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.

A Employer identification number ACORRET AND MOLLY TARR CHARITABLE POUNDATION 129 GRANVILLE ROAD City or town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code CHARLOTTE, NC 25207 City of town, date of province, country, and 2P or foreign postal code deturn Address change Andress change	Internal Reve	nue Service Go to www.if	s.gov/Form990PF for instri	uctions and the latest info		Open to Public Inspection
ROBERT AND MOLLY TARR CHARITABLE POUNDAPTION Names we do see for P O see make resident of continuents to store delivered to store delivered to 1.29 GRANVILLE ROAD City or town, state or province, country, and 2P or foreign postal codes CHARLOTTE, NC 28207 G Check all that spoyl. Initial return I Andread ret	For calend	ar year 2017 or tax year beginning DEC	1, 2017	, and ending	NOV 30, 2018	
Number and set and to the securities of multi-conditional set and advances to shoot addressed	Name of f	oundation			A Employer identification	number
Templane number Templane Te	ROBE	RT AND MOLLY TARR CHARI	TABLE			
The content of the	FOUN	DATION			04-3173231	
City or term, state or province, country, and 2IP or foreign postal code CHARLOTTE, NC 28207 G Check all that apply: Initial return Initial return of a former public chanty	Number and	d street (or P O box number if mail is not delivered to street as	idress)	Room/suite	B Telephone number	
CHARLOTTE, NC 28207 G Check alt that apply:	1129	GRANVILLE ROAD			781-929-91	17
CHARLOTTE NC 28207 G Check all that apply: Interference Interfe	City or to	wn, state or province, country, and ZIP or foreign po	ostal code	• •	C If exemption application is pe	ending, check here
G Check all that apply:			, ,			<u> </u>
Final return			Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
Address change Name change	u oncon c	···	==			,
Control Notes (type of organization: Section 501(c)(3) exempl private foundation Section 507(c)(1)(1)(A), check here If arm market value of all assets at end of year Accurual (from Part II), col. (c), line (b) S 3, 90.5, 60.3. ([Part I, column of must be on cash basis.)				1	Foreign organizations me check here and attach co	eting the 85% test,
Section 4947(a)(1) measurempt charactable trust Other travable private foundation Far market value of all assets at end of year J Accounting method.	H Check t			O₩		
Farm market value of all assets at end of year Accounting method:				tion	_ · · F · · · · · · · · · · · · · · · ·	
(from Part II, col. (c), Ine 15)						• • •
S 3,905,603 (Part I, column (d) must be on cash basis.)				C ACCIDAL		
Part	•			<u> </u>	under section 507(0)(1)	(B), CHECK HEIE
The load of amounts an column big. (sp. and (g) may not recovered by each this emission is notioned (sp.) and column big. (sp. and column) in column big. (sp.					/-> Admoted net	(d) Dishusements
1 Contributions, gifts, grants, etc., received 2 Cheal ▶	raiti	(The total of amounts in columns (b), (c), and (d) may not				for charitable purposes
2 Check					NT / A	(cash basis only)
3 set interest on aways and temporary 4 Dividends and interest from securities 5 a Gross rents 5 Not rental income or (less) 6 Not sential income or (less) 7 Capital gain set income (less) 8 Not short-lerm capital gain 8 Not short-lerm capital gain 9 Income modifications 10 Cross short for (less) 10 Other income 11 Total, Add lines 1 through 11 12 Total, Add lines 1 through 11 13 Compensation of offices, one-fires, vinctions, nic 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest 18 Taxes 18 Taxes 17 Interest 18 Total operation and depletion 18 Total operation and depletion 19 Operation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operation and administrative expenses. Add lines 13 through 23 contributions, grits, grants paid 25 Contributions, grits, grants paid 26 Total operating and administrative expenses. Add lines 13 through 23 contributions, grits, grants paid 26 Total operating and administrative expenses. Add lines 13 through 23 contributions, grits, grants paid 26 Total operating and administrative expenses. Add lines 24 and 25 27 Subtract line 26 from line 12: 28 Excess of remains over sepanses and dictoursments b Net investment income (if negative, error 4-)			430,413.		N/A	
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Sa Cross Felts B Net restant income or (loss) 68 Net gan or (loss) from salve of assests not on line 10 872, 285. 7 Capital gann rel record from Part IV, line 2) 8 Net short-term capital gan 9 Income modifications 10a Gross scale lase returns 10a and ellowances 10 Liess Cost of goods sold c Gross profit or (loss) 11 Other income 99, 409. 99, 409. 99, 409. STATEMENT 3 12 Total. Add lines 1 through 11 607, 774. 357, 359. 13 Compensation of others, directors, trustees, ric 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees 8 Accounting fees STMT 4 2,895. 0. 17 Interest 18 Taxes Cother professional fees STMT 5 19 perication and depletion 20 Cocupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, grifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 386, 963. 116, 956. 240, 403. Via		,	61,841.	61,841.		STATEMENT Z
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	p,	Net rental income or (loss)	110 111			
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 240,403.	a, 7	·				245.090.
Add lines 24 and 25 386, 963. 116, 956. 262, 227. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 240, 403.	23 \		223,000			
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 220,811.		•	386 963	116 956		262 227
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 220,811.			300,3030	110,550.		202,227.
b Net investment income (if negative, enter -0-)	- 1		777 877			
27/2	1		220,011.	240 403		
	- 1			240,403.	N/A	
					I N/A	Form 990-PF (2017)



ROBERT AND MOLLY TARR CHARITABLE 04-3173231 Form 990-PF (2017) FOUNDATION Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 146,040. 97,109. 97,109 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 49,734. 73,961. 74,122 10a Investments - U.S. and state government obligations 3,402,494. 3,734,372 3,215,044. STMT 9 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 3,410,818. 3,573,564. 3,905,603. instructions Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe > 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ö 3,410,818 3,573,564 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 0. 29 Retained earnings, accumulated income, endowment, or other funds 3,410,818. 3,573,564. 30 Total net assets or fund balances 3,410,818. 3,573,564 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 3,410,818. (must agree with end-of-year figure reported on prior year's return) 220,811. 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) 3,631,629. Add lines 1, 2, and 3

SEE STATEMENT 7

58,065.

Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

04-3173231 Page 3

Part IV Capital Gains	and Losses for Tax on In	vestment	Income			. <u></u>	
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How a P - Pur D - Dor	chase nation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr)	
1a MORGAN STANLEY					P	VARIOUS	VARIOUS
b MREP GLOBAL II					P	VARIOUS	VARIOUS
c CAMDEN PRIVATE	CAPITAL III				P	VARIOUS	VARIOUS
đ					1		
e				<u> </u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		•	(h) Gain or (los: ((e) plus (f) minus	s) (9))
a 860,840.			732,17	1.			128,669.
b 1,622.		<u> </u>					1,622.
g 9,823.							9,823.
d					•		
e							
	g gain in column (h) and owned by t	the foundation	on 12/31/69			I) Gains (Col. (h) gair	n minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any			l. (k), but not less that Losses (from col.	ın -0-) or
a							128,669.
<u>b</u>							1,622.
C							9,823.
d							
<u>e</u>							
Capital gain net income or (net ca	pital loss) { If gain, also enter	r in Part I, line i- in Part I. line	7 7	} 2			140,114.
3 Net short term capital gain or (los	•			, <u> </u>			
If gain, also enter in Part I, line 8,		(0).		} 3		N/A	L
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	nvestm	ent Inco	ome	
If section 4940(d)(2) applies, leave the Was the foundation liable for the social "Yes," the foundation doesn't qualifation. 1. Enter the appropriate amount in the social section of the	tion 4942 tax on the distributable am	plete this part					Yes X No
(a)		1011 00110110 1001	ore maning any er			<u> </u>	(d)
Base period years <u>Calendar year (or tax year beginnii</u>			Net value of no			(col. (b) dı	(d) bution ratio vided by col. (c))
		3,935.			1,540		.043582
2015		1,913.			2,865		.041137
2014		9,889.			3,005		.050629
2013		3,803.			7,468		.057409
2012		4,119.		3,71	4,341	. •	.054954
2 Total of line 1, column (d)						2	.247711
3 Average distribution ratio for the the foundation has been in existent	•	on line 2 by 5.0), or by the numbe	or of yoars		3	.049542
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5					4	4,146,575.	
5 Multiply line 4 by line 3				5	205,430.		
6 Enter 1% of net investment income (1% of Part I, line 27b)				6	2,404.		
7 Add lines 5 and 6						7	207,834.
8 Enter qualifying distributions from	n Part XII, line 4					8	262,227.
, , ,	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1% tax	rate.		
723521 01-03-18							Form 990-PF (2017)

Forn	1 990-PF (2017) FOUNDATION 04-	3173	231		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see in	struc	tion	s)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				and shades and all the
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that most the section 4940(e) requirements in Part V, check here X and enter 1%			2,4	04.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	<u> </u>			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0.
	Add lines 1 and 2			2,4	04.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			2,4	04.
6	Credits/Payments:	Ī			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6, 402.				
b	Exempt foreign organizations - tax withheld at source 6b 0.				
C	Tax paid with application for extension of time to file (Form 8868) 6c 6c]
đ	Backup withholding erroneously withheld 6d 0.				
7	Total credits and payments. Add lines 6a through 6d	L		6,4	02.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	<u> </u>			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u> </u>			
10		Ь—		<u>3,9</u>	98.
	Enter the amount of line 10 to be: Credited to 2018 estimated tax > 3,998 • Refunded > 11	l			0.
Pa	rt VII-A Statements Regarding Activities		,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		L	Yes	-
	any political campaign?		1a_		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		ĺ	ĺ	1 1
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ 0.				}
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1		1 1
	managers. ▶ \$ 0 .				لــــا
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2_		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3_	 ,-	X_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	X	├─
	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	Х	177
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				
6	Are the requirements of section 508(e) (rolating to sections 4941 through 4945) satisfied either.		lii .		
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?		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 XV		7	Х	Ь.,
_					{
84	Enter the states to which the foundation reports or with which it is registered. See instructions.				-···
	NC CONTRACTOR OF THE CONTRACTO				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
_	of each state as required by General Instruction G? If "No," attach explanation		8b_	X	
9	is the foundation claiming status as a private operating foundation within the moaning of section 4942(j)(3) or 4942(j)(5) for calendar		<u> </u>	<u></u>	انتينا
44	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		9	_	X
10	Did any persons become substantial contributors during the tax year? H *Yoo,* attach a schedule listing their names and addresses		10 QQ()_DE	(2017)
		For	iii aai	<i>,</i>	(2017)

2/

ROBERT AND MOLLY TARR CHARITABLE Form 990-PF (2017) FOUNDATION 04-3173231 Page 5 Part VII-A | Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of Х section 512(b)(13)? If "Yes," attach schedule. See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? Х If "Yes," attach statement. See instructions 12 $\overline{\mathbf{x}}$ 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address Telephone no. $\triangleright 781 - 929 - 9117$ 14 The books are in care of ▶ ROBERT J. TARR, JR. Located at ▶1129 GRANVILLE ROAD, CHARLOTTE, NC ZIP+4 ▶28207 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year **▶** 15 | 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 Νo Х securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes." enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 ff any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4041(d) 3 or in a current notice regarding disaster assistance? See instructions N/A 16 Organizations relying on a current notice regarding disaster assistance, check here u Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2017? 1c 2 Taxos on failure to distributo income (soction 1912) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)); a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6c, Part XIII) for tax year(s) beginning before 2017? 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 N/A 2b o If the provisions of section 4042(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation held more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "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, N/A Form 4720, to determine if the foundation had excess business holdings in 2017.) 3b

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

b. Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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4a

4b

ROBERT AND MOLLY TARR CHARITABLE

Form 990-PF (2017) FOUNDATION			04-31732	31	F	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)			
5a' During the year, did the foundation pay or incur any amount to			L		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y	es X No			l
(2) Influence the outcome of any specific public election (see section 4955), or	r to carry on, directly or indire	ectly,			- 1	
any voter registration drive?		Y	es 🗶 No		i	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Y	es X No		-	ł
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					Ì
4945(d)(4)(A)? See instructions		Y	es X No		l	- 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	1	,	I	
the prevention of cruelty to children or animals?			es X No			}
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	<u> </u>			
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			▶□ [
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned	[l	
expenditure responsibility for the grant?		I/A 🔲 Y	es 🔲 No		ŀ	
If "Yes," attach the statement required by Regulations section 53 4945-5(d).					l	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				Ī	ļ
a personal benefit contract?	, , , , , , , , , , , , , , , , , , ,		s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b		$\overline{\mathbf{x}}$
If "Yes" to 6b, file Form 8870.	ordonal bonom comitati				1	i
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu		···	N/A	7b		
Part VIII Information About Officers, Directors, Truste		nagers, Highly	21,7 22	,,,		
Paid Employees, and Contractors						
1 List all officers, directors, trustees, and foundation managers and the	er compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(4	e) Exp	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		count, allowar	
ROBERT J. TARR, JR.	TRUSTEE	Cinci o j	compensation	 `	o	
1129 GRANVILLE ROAD						
CHARLOTTE, NC 28207	1.00	0.	0.			0.
MOLLY U. TARR	TRUSTEE	1	<u> </u>	 		
1129 GRANVILLE ROAD		-				
CHARLOTTE, NC 28207	1.00	0.	0.			0.
CHARDOTTE, NC 20207	1.00	<u> </u>	<u></u>	 		<u> </u>
		 		┼		
2 Compensation of five highest-paid employees (other than those incl	luded on line 1) If none	enter "NONE."		<u> </u>		
2 Compensation of the highest para employees (outer diam alose me	(b) Title, and average	T TOTAL	(d) Contributions to	1 6	e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	l ac	count, allowar	other
NONE	devoted to position		compensation	├ '	allowal	1062
HONE						
				╁		
		 	-	1		
		 		1		
				1		
				1		
				1		
		J	<u> </u>	1		
Total number of other employees paid over \$50,000			<u>_</u>	000	DE	0

ROBERT AND MOLLY TARR CHARITABLE FORM 990-PF (2017) FOUNDATION

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Part VIII	Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		, tugo.
3 Five high	est-paid independent contractors for professional services. If none, enter "No	ONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N	IONE		
Total number	of others receiving over \$50,000 for professional services	-	▶ 0
	Summary of Direct Charitable Activities		
number of org	ation's four largest direct charitable activities during the tax year. Include relevant statistical anizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 NOT AP	PLICABLE		
			0.
2			
 			
3			
	······································		
4			
- · - · - · - · ·			
	Summary of Program-Related Investments wo largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 N/A	wo largest program-related investments made by the foundation during the tax year on mes	i aliu 2.	Amount
			0.
	· · · · · · · · · · · · · · · · · · ·		
	am-related investments. See instructions.		
3			
Total, Add lin	es 1 through 3	•	0.

FOUNDATION

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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.		
а	Average monthly fair market value of securities	1a	4,052,740. 156,981.
b	Average of monthly cash balances	1b	156,981.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	4,209,721.
C	Roduction 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	4,209,721.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	63,146.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,146,575.
6	Minimum investment return. Enter 5% of line 5	6	207,329.
Р	Tart XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ■ and do not complete this part.)	d certair	1
1	Minimum investment return from Part X, line 6	1	207,329.
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	2,404.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,404. 204,925.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	204,925.
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	204,925.
Р	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	262,227. 0.
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	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
1	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	262,227.
5	Foundations that qualify under section 4940(o) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	2,404.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	259,823.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies 1	for the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				204,925.
2 Undistributed income, if any, as of the end of 2017	· · · · · · · · · · · · · · · · · · ·			201/3231
a Enter amount for 2016 only			166,178.	
b Total for prior years:		0		
Excess distributions carryover, if any, to 2017:		0.		
a From 2012				
b From 2013				•
c From 2014				
d From 2015				1
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4. ► \$ 262, 227.				
a Applied to 2016, but not more than line 2a			166,178.	
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.			0.5.010
d Applied to 2017 distributable amount				96,049.
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:				
a 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				Į.
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.		í
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	'
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				108,876.
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 2012				ı
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				ı
a Excess from 2013				i
b Excess from 2014				İ
c Excess from 2015				
d Excess from 2016				•
e Excess from 2017			<u></u>	000 DE

ROBERT AND MOLLY TARR CHARITABLE

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Part XIV Private Operating F	oundations (see in	nstructions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	at it is a private operating	İ		<i>*</i>
foundation, and the ruling is effective fo	r 2017, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	lation is a private operate	ing foundation described i	n section	4942(j)(3) or4	942())(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years] ′
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed			L		
b 85% of line 2a					
c Qualifying distributions from Part XII,				, ,	
line 4 for each year listed					
d Amounts included in line 2c not		1.		//	
used directly for active conduct of				<u>/</u>	}
exempt activities			1	/	
e Qualifying distributions made directly			//		
for active conduct of exempt activities.		1			
Subtract line 2d from line 2c				į	
3 Complete 3a, b, or c for the		+	///		· · · · · · · · · · · · · · · · · · ·
alternative test relied upon:			,		
a "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				ļ	
512(a)(5)), or royalties)		<u> </u>			
(2) Support from general public					
and 5 or more exempt organizations as provided in		1			
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or moi	e in assets
at any time during the	ne year-see instr	ructions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who			ibutions received by the	foundation before the clos	e of any tax
year (but only if they have contributed in	iore than \$5,000). (See s	section 507(d)(2).)			
SEE STATEMENT 10					
b List any managers of the foundation who			or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	a 10% or greater intere	st.			
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc., Pro	ograms:		
Check here 🕨 🔙 if the foundation o	nly makes contributions	to preselected charitable	organizations and does r	not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone numb	er or email address of the	he person to whom applic	ations should be address	sed:	
SEE STATEMENT 11					· · · · · · · · · · · · · · · · · · ·
b The form in which applications should b	e submitted and informa	ition and materials they sh	iould include:		
c Any submission deadlines.				-	
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields.	kınds of institutions, or	other factors:	
		,			

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE ATTACHED STATEMENT 245,090. **▶** 3a 245,090. Total b Approved for future payment NONE Total

rt XVI-A Analysis of Income-Pro	oducing Activities	•			
gross amounts unless otherwise indicated.	Unrelated by	isiness income		y section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exemp
rogram service revenue; NONE	COUE				
			++-		
		· · · · · · · · · · · · · · · · · · ·	+ + -		
			+		
	1 1		+		
	— -		 		
Fore and contracts from accomment accomme			+ + -		
Fees and contracts from government agencies	 	 .	+ + -		
embership dues and assessments	 		+		
terest on savings and temporary cash	900000		14	55 995	
vestments ividends and interest from securities	900000		14	55,995.	
et rental income or (loss) from real estate:	500000		+ = =	01,041.	
• •	 		+		
Debt-financed property			+		
Not debt-financed property			+ + -		
et rental income or (loss) from personal			i	İ	
roperty	<u> </u>		14	99,409.	
ther investment income			╅╧	- 22,4021	
ain or (loss) from sales of assets other			18	140,114.	
nan inventory			1 1 9	140,114.	
et income or (loss) from special events			+ + -		
ross profit or (loss) from sales of inventory			+		
ther revenue:					
	1 1		+ + -		
			 -		
			+		
			+		
ubtotal. Add columns (b), (d), and (e)		0.	+ +-	357,359.	
otal. Add line 12, columns (b), (d), and (e)	<u> </u>		<u>' 1</u>	13	
worksheet in line 13 instructions to verify calculation	nc \				
					
rt XVI-B Relationship of Activiti	es to the Accomp	disnment of Ex	empt Pu	rposes	
No. Explain below how each activity for whice	h income is reported in co	lumn (e) of Part XVI-	A contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other				mportality to the decomp	
NOT APPLICABLE				_, , , 	
NOT INTERCEDED					
			·		
				-	

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Form 990-PF (2017) FOUNDATION 04-3173231

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

	7411	Exempt Organ		sicis to a	na mansactions a					
1 N	ıd the or	<u>_</u>		of the followin	ig with any other organizati	on described in sec	tion 501(c)		Yes	No
					g to political organizations?					
	a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash									Х
		Other assets								
•	•	isactions.								
(1) Sales	of assets to a noncharita	ble exempt organizati	ion				16(1)		X
	•	nases of assets from a no						1b(2)		Х
(3	I) Renta	al of facilities, equipment,	or other assets	•				1b(3)		Х
•	•	bursement arrangements						1b(4)		X
		s or loan guarantees						1b(5)		X
(6) Perfo	rmance of services or me	mbership or fundrais	ing solicitatio	ns			16(6)		X
c S	haring o	f facilities, equipment, ma	iling lists, other asset	ts, or paid em	ployees			10		X
					dule. Column (b) should a				ets,	
10	cervice	s given by the reporting fo	oundation If the foun	idation receive	od loss than fair market vali	ue in any transactior	n or sharing arrangem	ient, show in		
		i) the value of the goods,								
a) Line	no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	n of transfers transaction	s, and sharing arra	ngemen	ts
				N/A						
							··-			
										
										
										
	\dashv					 				
	-					 				
	-	<u> </u>						-		
	_				,	- 				
2a Is	the four	idation directly or indirect	lly affiliated with, or r	elated to, one	or more tax-exempt organ	ızatıons described				
		501(c) (other than section		ction 527?				Yes	X	No
b If	"Yes," co	omplete the following sch								
		(a) Name of org	anization		(b) Type of organization		(c) Description of rel	ationship		
		N/A				ļ				
		<u></u>								
						 	······································			
						 				
	Under	penalties of periury. I declare t	hat I have examined this	eturn, including	accompanying schedules and s	tatements and to the be	est of my knowledge			
Sign					taxpayer) is based on all informa			May the IRS d	prepare	r
Here		$\mathcal{K}\mathcal{M} \setminus \mathcal{M}$, K	_	12/24/19	Truste	C.	shown below? X Yes	See inst	
	Sion	nature of officer or trustee		7	Date	Title		res		No
		Print/Type preparer's na	me I	Preparer's si		Date	Check If	PTIN		
				1	11-		self- employed	= = =		
Paid		Diana J Cohen		Jon	along	2/21/19		P00188	391	
Preparer Firm's name ▶ DELOITTE TAX LLP Firm's EIN ▶ 86-									-	
Use	Only							·	-	
		Firm's address ▶ 20	0 BERKELE	Y STRE	ET		1			
	_		STON, MA				Phone no. (61	7) 437	-200	00
			· · · ·						DE	

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.

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

OMB No 1545-0047

Employer identification number

2017

-	BERT AND MOLLY TARR CHARITABLE UNDATION	04-3173231					
Organization type (check or							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charatable 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						
_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	•					
Special Rules							
sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, contributions of the greater of (1) \$5,000, or (2) 2% of the amoundine 1. Complete Parts I and II	or 16b, and that received from					
year, total contribut	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 ertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

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)

Name of organization ROBERT AND MOLLY TARR CHARITABLE FOUNDATION

Employer identification number

04-3173231

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT TARR, JR. 1129 GRANVILLE ROAD CHARLOTTE, NC 28207	s157,220.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT TARR, JR. 1129 GRANVILLE ROAD CHARLOTTE, NC 28207	\$\$8.800.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ROBERT TARR, JR. 1129 GRANVILLE ROAD CHARLOTTE, NC 28207	s <u>44,395.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli 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 Occash Occash If for noncash contributions

ROBERT AND MOLLY TARR CHARITABLE FOUNDATION

Employer identification number

04-3173231

Part II	Noncash Property (see instructions). Use duplicate copies of Part 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	285 SHRS. OF MCDONALDS CORP.	\$	12/26/17			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
3	460 SHRS. OF DR. PEPPER SNAPPLE GROUP INC.	\$ <u>44,311.</u>	12/26/17			
(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			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$	900-F7 or 990-PF1/2017			

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number ROBERT AND MOLLY TARR CHARITABLE FOUNDATION 04 - 3173231Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once.) Use duplicate copies of Part III if additional space is needed (a) No. 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 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 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 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

POREST & MOLLY TARR CHARITABLE FOUNDATION 11/30/2018

POSE 990PF, PART XV, LINE 3a CONTRIBUTIONS PAID

	POURDATION STATUS			PURPOSE OF GRAFF OR	
HAME OF RECIPIEST	OF RECIPIENT	RELATIONSHIP	STATUS	CONTRIBUTION	AMOUNT
CHARLOTTE BALLET COMPANY	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	10,000
CYSTIC PIBROSIS POUNDATION	501(c)(3)	NONE	PUBLIC CHARITY	MEDICAL	10,000
DAVID HOROWITZ FREEDOM CENTER	501(c)(3)	NONE	PUBLIC CHARITY	EDUCATION	5,000
PULL STATURE MINISTRIES	501(c)(3)	NONE	PUBLIC CHARITY	RELIGIOUS	11,000
HARVEST CENTER	501(c)(3)	NONE	PUBLIC CHARITY	RELIGIOUS	15,000
BEINEMAN MEDICAL OUTREACH	501(c)(3)	NONE	PUBLIC CHARITY	MEDICAL	75,000
JESUS PILM PROJECT	501(c)(3)	NONE	PUBLIC CHARITY	RELIGIOUS	5,000
JUDICIAL WATCE	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	10,000
LIGHTKEEPERS	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	15,000
NATIONAL ALLIANCE ON MENTAL ILLNESS	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	5,000
DYSTER HARBORS SCHOLARSHIP FUND	501(c)(3)	NONE	PUBLIC CHARITY	EDUCATION	5,090
PHILIPS ACADEMY	501(c)(3)	NONE	PUBLIC CHARITY	EDUCATION	500
SAMARITANS PURSE	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	10,000
SAVE OUR SOUND	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	5,000
SEMPER PI FOND	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	10,000
THE JOEY FUND	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	2,500
UNITED WAY OF CENTRAL CAROLINAS	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	10,000
US NAVAL ACADEMY FOUNDATION	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	25,000
WASHINGTON & LEE UNIVERSITY	501(c)(3)	NONE	PUBLIC CHARITY	EDUCATION	1,000
WATER MISSIONS	501(c)(3)	NONE	PUBLIC CHARITY	PUBLIC WELFARE	10,000
WORLD VISION	501(c)(3)	HONE	PUBLIC CHARITY	PUBLIC WELPARE	5,000
•					
POTAL				_	245,090

FORM 990-PF INT	EREST ON S	SAVING	S AND	TEMPOR	ARY	CASH	INV	ESTMENTS	Sī	PATEMENT 1
SOURCE			(A) REVENUE PER BOOKS		S	(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		
BANK OF AMERICA CAMDEN PRIVATE CAPITAL FOLGER HILL PARTNERS CI A FOLGER HILL PARTNERS CI B MORGAN STANLEY MREP GLOBAL II				518 3,228 2,617 49,615		17.		12. 518. 3,228. 2,617. 49,615.		
TOTAL TO PART I, LINE 3			55,995.		95.	55,995.				
FORM 990-PF	DIVII	DENDS .	AND IN	TEREST	FRO	M SEC	URI	TIES	Sī	PATEMENT 2
SOURCE	GROS AMOU		CAPI' GAII DIVID	NS	RE	(A) VENUE BOOK		(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
CAMDEN PRIVATE CAPITAL FOLGER HILL		168.	· -	0.			58.		8.	
PARTNERS CI A FOLGER HILL PARTNERS CI B MORGAN STANLEY	8	,019. ,123. ,667.		0. 0. 0.		10,01 8,12 42,66	23.	10,01 8,12 42,66	3.	
MREP GLOBAL II TO PART I, LINE	4 61	864. ,841.		0.		86 61,84	11.	61,84	1.	
										
FORM 990-PF			OTHE	R INCO	ME				SI	PATEMENT 3
DESCRIPTION				RE	(A) VENU BOO			(B) T INVEST- NT INCOME		(C) ADJUSTED NET INCOME
MREP GLOBAL II CAMDEN PRIVATE C. FOLGER HILL PARTI	NERS CI A	I			52	,038. -973. ,544.	,	3,038 -973 52,544 44,800	•	
TOTAL TO FORM 99	0-PF, PART	r I, L	INE 11		99	,409.		99,409	 - 	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DELOITTE TAX PREP. FEE	2,895.	0.		2,895.	
TO FORM 990-PF, PG 1, LN 16B	2,895.	0.		2,895.	
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MORGAN STANLEY MREP GLOBAL II CAMDEN PRIVATE CAPITAL III BOSTON PRIVATE FOLGER HILL PARTNERS CI A FOLGER HILL PARTNERS CI B	30,700. 1,421. 45. 0. 53,729. 43,594.	1,421. 45. 0. 53,729.		14,242. 0. 0. 0. 0.	
TO FORM 990-PF, PG 1, LN 16C	129,489.			14,242.	
FORM 990-PF	TAX	FC	C	TATEMENT 6	
				TATEMENT 0	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL INCOME TAX PAID FOREIGN TAXES	7,780. 1,709.			0.	
TO FORM 990-PF, PG 1, LN 18	9,489.	1,709.		0.	
=					

FORM 990-PF OTHER DECREASES	IN NET ASSE	TS OR F	UND BALANCES	STATEMENT 7
DESCRIPTION				AMOUNT
BOND COST DIFFERENCE DUE TO AMC COST DIFFERENCE BETWEEN COST AND FMV	13,804. 44,261.			
TOTAL TO FORM 990-PF, PART III,	58,065.			
FORM 990-PF U.S. AND STA	ATE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVERNMENT SECURITIES	<u> </u>		73,961.	74,122.
TOTAL U.S. GOVERNMENT OBLIGATION			73,961.	74,122.
TOTAL STATE AND MUNICIPAL GOVER TOTAL TO FORM 990-PF, PART II,		ATIONS	73,961.	74,122.
FORM 990-PF	CORPORATE	STOCK		STATEMENT 9
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
STOCKS ETF'S & CEF'S MUNICIPAL BONDS MREP GLOBAL CAMDEN PRIVATE CAPITAL III FOLGER HILL PARTNERS CI A FOLGER HILL PARTNERS CI B CORPORATE FIXED INCOME MUTUAL FUNDS			872,306. 752,989. 237,444. 81,927. 45,037. 4,583. 4,617. 978,464. 425,127.	1,169,468. 767,024. 231,459. 81,927. 45,037. 4,583. 4,617. 976,351. 453,906.
TOTAL TO FORM 990-PF, PART II,	LINE 10B		3,402,494.	3,734,372.

FORM 990-PF PART XV - LINE 1A STATEMENT 10
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

ROBERT J. TARR, JR. MOLLY U. TARR

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROBERT J. TARR, JR. 1129 GRANVILLE ROAD CHARLOTTE, NC 28207

TELEPHONE NUMBER

781-929-9117

FORM AND CONTENT OF APPLICATIONS

WRITTEN FORM INDICATING AMOUNTS REQUESTED & PROJECTED USE

ANY SUBMISSION DEADLINES

NONE

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITABLE PURPOSES UNDER IRC SECTION 501 (C)(3)