efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491303005269

Form **990-PF**
Department of the Treasury
Internal Revenue Service

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.**
▶ **Go to *www.irs.gov/Form990PF* for instructions and the latest information.**

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018

Name of foundation
ROSS ANGEL FOUNDATION

A Employer identification number
56-2013753

Number and street (or P O box number if mail is not delivered to street address)
3011-B SPRING GARDEN ST

Room/suite

B Telephone number (see instructions)
(336) 292-2227

City or town, state or province, country, and ZIP or foreign postal code
Greensboro, NC 27403

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col (c), *line 16)* ▶$ 3,016,380

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	98,145			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	9,597	9,597		
	4	Dividends and interest from securities	27,519	27,519		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	40,409			
	b	Gross sales price for all assets on line 6a 382,667				
	7	Capital gain net income (from Part IV, line 2)		40,409		
	8	Net short-term capital gain			11,620	
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	7,002	7,002	7,002	
	12	**Total.** Add lines 1 through 11	182,672	84,527	18,622	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc				
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)	12,000	12,000	12,000	
	b	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)	5,781	5,781	5,781	
	17	Interest				
	18	Taxes (attach schedule) (see instructions)				
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)				
	24	**Total operating and administrative expenses.** Add lines 13 through 23	17,781	17,781	17,781	0
	25	Contributions, gifts, grants paid	175,000			175,000
	26	**Total expenses and disbursements.** Add lines 24 and 25	192,781	17,781	17,781	175,000
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	-10,109			
	b	**Net investment income** (if negative, enter -0-)		66,746		
	c	**Adjusted net income** (if negative, enter -0-)			841	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	43,842	35,250	35,250
	2 Savings and temporary cash investments	974,703	370,042	370,420
	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 (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	563,663	716,326	723,711
	c Investments—corporate bonds (attach schedule)	250,000	550,000	540,862
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	882,062	838,758	1,346,137
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	2,714,270	2,510,376	3,016,380
Liabilities	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 (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)		0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☑ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	2,714,270	2,510,376	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	2,714,270	2,510,376	
	31 **Total liabilities and net assets/fund balances** (see instructions)	2,714,270	2,510,376	

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), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,714,270
2	Enter amount from Part I, line 27a	2	-10,109
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	2,704,161
5	Decreases not included in line 2 (itemize) ▶	5	193,785
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	2,510,376

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table			
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	See Additional Data Table			
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	40,409
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	11,620

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017			
2016			
2015			
2014			
2013			

2	**Total** of line 1, column (d)	2	
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	
4	Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	2,971,134
5	Multiply line 4 by line 3	5	
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	667
7	Add lines 5 and 6	7	667
8	Enter qualifying distributions from Part XII, line 4	8	175,000

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

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	667
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	667
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	667
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018 — 6a		
b	Exempt foreign organizations—tax withheld at source — 6b		
c	Tax paid with application for extension of time to file (Form 8868) — 6c		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	4
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	671
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be **Credited to 2019 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ _____ **(2)** On foundation managers ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
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		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		No
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NC			
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	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		No

Website address ▶ N/A

14 The books are in care of ▶ RUSSELLENE ANGEL Telephone no ▶ (336) 854-4141

Located at ▶ 3011 B SPRING GARDEN ST Greensboro NC ZIP+4 ▶ 27403

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(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 termination of government service, if terminating within 90 days). ☐ Yes ☑ No			
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 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		No
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
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 2018?	1c		No
2	Taxes on failure to distribute income (section 4942) (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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2018 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 2018).*	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2018?	4b		No

Part VII-B **Statements Regarding Activities for Which Form 4720 May Be Required** *(continued)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☑ No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No			
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☑ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions	5b		No
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No			
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☑ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year? ☐ Yes ☐ No			

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
RICHARD FORMAN 3011 B SPRING GARDEN ST Greensboro, NC 27403	SECRETARY/TREASURER 1 00	0		
RUSSELLENE ANGEL 3011 B SPRING GARDEN ST Greensboro, NC 27403	PRESIDENT 1 00	0		
WILLIAM R JOHNSON 3011 B SPRING GARDEN ST Greensboro, NC 27403	VICE PRESIDENT 1 00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances

Total number of other employees paid over $50,000 ▶

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		
Total number of others receiving over $50,000 for professional services. ▶		

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	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,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	1,264,573
b	Average of monthly cash balances	1b	405,670
c	Fair market value of all other assets (see instructions)	1c	1,346,137
d	**Total** (add lines 1a, b, and c)	1d	3,016,380
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,016,380
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	45,246
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,971,134
6	**Minimum investment return.** Enter 5% of line 5	6	148,557

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	148,557
2a	Tax on investment income for 2018 from Part VI, line 5	2a	667		
b	Income tax for 2018 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	667
3	Distributable amount before adjustments Subtract line 2c from line 1			3	147,890
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	147,890
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	147,890

Part 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	175,000
b	Program-related investments—total from Part IX-B	1b	
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		
a	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	175,000
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 See instructions	5	667
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	174,333

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				147,890
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			8,436	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f **Total** of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ $ 175,000				
a Applied to 2017, but not more than line 2a			8,436	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				147,890
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018				
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount —see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
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)				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014. . . .				
b Excess from 2015. . . .				
c Excess from 2016. . . .				
d Excess from 2017. . . .				
e Excess from 2018. . . . 18,674				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
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 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					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					9,597
4 Dividends and interest from securities. . . .					27,519
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					7,002
8 Gain or (loss) from sales of assets other than inventory					40,409
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .					84,527
13 **Total.** Add line 12, columns (b), (d), and (e).				13	84,527

(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) (See instructions)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2019-10-30	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☐ Yes ☑ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
Betty Gaydon		2019-10-30		P00066078
Firm's name ▶ H AND R BLOCK				Firm's EIN ▶20-3706839
Firm's address ▶ 3011 SPRING GARDEN ST GREENSBORO, NC 27403				Phone no (336) 854-4141

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
1	CD REDEMPTION CAP ONE BK	P	2016-10-28	2018-05-02
1	CD REDEMPTION WF BK NC	P	2016-02-25	2018-03-09
	COMMON ST 3 077 SH ELI LILLY & CO	P	2017-03-10	2018-01-04
	COMMON ST 3 266 SH ELI LILLY & CO	P	2017-06-09	2018-01-04
	COMMON ST 3 220 SH ELI LILLY & CO	P	2017-09-08	2018-01-04
	COMMON ST 3 093 SH ELI LILLY & CO	P	2017-12-08	2018-01-04
	COMMON ST 3 590 SH PFIZER INC	P	2017-12-01	2018-10-30
	COMMON ST 3 891 SH PFIZER INC	P	2018-03-01	2018-10-03
	COMMON ST 3 895 SH PFIZER INC	P	2018-06-01	2018-10-30
	COMMON ST 3 435 SH PFIZER INC	P	2018-09-04	2018-10-30

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
100,000		100,000	
100,000		100,000	
263		260	3
279		262	17
275		263	12
264		265	-1
150		130	20
163		140	23
163		141	22
143		142	1

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			3
			17
			12
			-1
			20
			23
			22
			1

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
	COMMON ST 1 578 SH PROCTOR & GAMBLE CO	P	2017-11-15	2018-10-25
1	COMMON ST 1 745 SH PROCTOR & GAMBLE CO	P	2018-02-15	2018-10-25
	COMMON ST 2 021 SH PROCTOR & GAMBLE CO	P	2018-05-15	2018-10-25
	COMMON ST 1 840 SH PROCTOR & GAMBLE CO	P	2018-08-15	2018-10-25
	COMMON ST 9 347 SH QUALCOMM INC	P	2017-03-22	2018-02-09
	COMMON ST 10 132 SH QUALCOMM INC	P	2017-06-21	2018-02-09
	COMMON ST 11 083 SH QUALCOMM INC	P	2017-09-20	2018-02-09
	COMMON ST 8 997 SH QUALCOMM INC	P	2017-12-15	2018-02-09
	COMMON ST 500 SH QUALCOMM INC	P	2018-05-01	2018-09-26
	COMMON ST 9 347 SH QUALCOMM INC	P	2018-06-20	2018-09-26

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
140		140	
155		141	14
180		148	32
163		150	13
590		519	71
640		570	70
700		581	119
568		587	-19
36,530		25,380	11,150
383		310	73

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			14
			32
			13
			71
			70
			119
			-19
			11,150
			73

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
	COMMON ST 500 SH ELI LILLY & CO	P	2016-11-23	2018-01-04
1	COMMON ST 100 SH PFIZER INC	P	2013-07-09	2018-10-30
	COMMON ST 100 SH PFIZER INC	P	2014-10-15	2018-10-30
	COMMON ST 200 SH PFIZER INC	P	2014-10-28	2018-10-30
	COMMON ST 3 905 SH PFIZER INC	P	2017-06-01	2018-10-30
	COMMON ST 3 435 SH PFIZER INC	P	2017-09-01	2018-10-30
	COMMON ST 50 SH PROCTOR & GAMBLE CO	P	2013-07-09	2018-10-25
	COMMON ST 150 SH PROCTOR & GAMBLE CO	P	2014-10-15	2018-10-25
	COMMON ST 1 591 SH PROCTOR & GAMBLE CO	P	2017-05-15	2018-10-25
	COMMON ST 1 512 SH PROCTOR & GAMBLE CO	P	2017-08-15	2018-10-25

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
42,704		33,410	9,294
4,180		2,843	1,337
4,180		2,806	1,374
8,360		5,780	2,580
163		128	35
159		129	30
4,442		3,983	459
13,326		12,502	824
141		138	3
134		139	-5

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			9,294
			1,337
			1,374
			2,580
			35
			30
			459
			824
			3
			-5

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
COMMON ST 1000 SH QUALCOMM INC	P	2015-12-03	2018-02-09

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
63,129		50,270	12,859

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			12,859

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ALS4 N BLOUNT ST Raleigh, NC 27601		NC	TO HELP SUPPORT RESEARCH AND PROVIDE LOCAL PROGRAMS AND SERVICES	500
ALZHEIMERS FOUNDATION OF AMERICA BOX 1950 Clarksburg, MD 20871		NC	RESEARCH AND TRAINING	500
AMERICAN BIBLE SOCIETY 101 N INDEPENDCE MALL E FL 8 Philadelphia, PA 19106		NC	PROVIDE BIBLES FOR THE NEEDED	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AMERICAN CANCER SOCIETY 7027 ALBERT PICK RD SUITE 104 Greensboro, NC 27409		NC	RESEARCH AND PUBLIC SERVICE	500
AMERICAN DIABETES ASSOCIATION 222 S CHURCH ST STE 336M Charlotte, NC 28202		PF	RESEARCH AND PUBLIC SERVICE	500
AMERICAN HEART ASSOCIATION 101 CENTERPOINT DR Greensboro, NC 27409		NC	RESEARCH AND PUBLIC SERVICE	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AMERICAN LUNG ASSOCIATION 514 DANIELS STREET Raleigh, NC 27605		NC	RESEARCH AND PUBLIC SERVICE	500
AMERICAN RED CROSSPO BOX 14710 Greensboro, NC 27415		NC	RESEARCH AND PUBLIC SERVICE	500
ARTHRITIS FOUNDATION 1355 PEACHTREE ST NE SUITE 600 Atlanta, GA 30309		NC	RESEARCH AND PUBLIC SERVICE	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ARTS OF GREENSBOROPO BOX 877 Greensboro, NC 27402		NC	RESEARCH AND PUBLIC SERVICE	500
BILLY GRAHAM ASSOCIATION 1 BILLY GRAHAM PARKWAY Charlotte, NC 28201		NC	OUTREACH	500
BOYS AND GIRLS HOME OF NC PO BOX 127 Lake Waccamaw, NC 28450		NC	TO PROVIDE FOR SUPPORT AND RESOURCES FOR CHILDREN	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CAMPBELL UNIVERSITYBOX 116 Buies Creek, NC 27506		NC	SCHOLARSHIP FUND	10,000
CHILDRENS HOME SOCIETY PO BOX 14608 Greensboro, NC 27415		NC	TO PROVIDE SUPPORT AND RESOURCES FOR CHILDREN	1,000
CHILDRENS HOPE ALLIANCE 8358 SIX FORKS RD STE 203 Raleigh, NC 27615		NC	GIVING A SAFE HAVEN TO CHILDREN	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CHILDRENS MUSEUM220 N CHURCH ST Greensboro, NC 27401		NC	EDUCATION	500
CITY OF HOPE1055 WILSHIRE BLVD Los Angeles, CA 90017		NC	RESEARCH AND OUTREACH	500
CONE HEALTH FOUNDATION 721 GREEN VALLEY RD STE 102 Greensboro, NC 27408		NC	TO SUPPORT THEIR MISSION	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CURE PSP 404 FIFTH AVENUE 3RD FLOOR New York, NY 10018		NC	PROVIDING INFORMATION AND SUPPORT	200
DELEWARE VALLEY GOLDEN RETRIEVER RE 60 VERA CRUZ RD Reinholds, PA 17569		NC	ANIMAL RESCUE AND CARE	2,000
DOCTORS WITHOUT BORDERS PO BOX 5030 Hagerstown, MD 21741		NC	INTERNATIONAL MEDICAL AIDE	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
DUKE CHILDRENS HOSPITALBOX 90581 Durham, NC 27708		NC	RESEARCH AND OUTREACH	500
EASTER SEALSBOX 28239 Raleigh, NC 27611		NC	EDUCATION AND OUTREACH	200
ELON HOME FOR CHILDREN 1717 SHARON RE WEST Charlotte, NC 28201		NC	TEACHING LIFE SKILLS TO CHILDREN	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FEED THE CHILDRENPO BOX 36 Oklahoma City, OK 73101		NC	FOOD SUPPLIES	200
FIRST MORAVIAN CHURCH 304 SOUTH ELAM AVE Greensboro, NC 27403		NC	TO SUPPORT THEIR MISSION	3,000
FLIGHT 93 NATIONAL MEMORIAL BOX 6591 Washington, DC 20090		NC	BUILD AND MAINTAIN MEMORIAL	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FREEDOM ALLIANCE2257 MARKEY CT Dulles, VA 20166		NC	TO SUPPORT THEIR MISSION	500
FRIENDS FOREVERPO BOX 77262 Greensboro, NC 27417		NC	RESCUE AND SUPPORT ANIMALS	200
FRIENDS HOME925 NEW GARDEN RD Greensboro, NC 27410		NC	TO SUPPORT THEIR MISSION	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GEORGE BUSH PRESIDENTIAL CTR BOX 560887 Dallas, TX 75356		NC	EDUCATION	500
GIDEONS GREENSBORO NW CAMP BOX 19524 Greensboro, NC 27419		NC	TO PROVIDE CHILDREN A SAFE PLACE	500
GIDEON GROVE UMCBOX 444 Stokesdale, NC 27357		NC	TO SUPPORT THEIR MISSION	5,000
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GOATS FOR THE OLD GOAT 501 KINGS HWY EAST SUITE 400 Fairfield, CT 06825		NC	HELPING WITH HUNGER	1,800
GRAND STAND HUMANE SOCIETY 3241 10TH AVE EXT N Myrtle Beach, SC 29577		NC	LOW COST WALK IN VETERINARY CLINIC	500
GREATER PIEDMONT TEEN CHALLENGE 1912 BOULEVARD ST Greensboro, NC 27407		NC	HELP YOUNG ADULTS STRUGGLING WITH ADDICATIONS	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GREENSBORO SYMPHONY 200 N DAVIE ST Greensboro, NC 27401		NC	TO PROVIDE EDUCATION IN MUSIC	500
GREENSBORO URBAN MINISTRY 305 W MARKET ST Greensboro, NC 27406		NC	TO PROVIDE FOOD	1,000
HABITAT FOR HUMANITYBOX 3402 Greensboro, NC 27402		NC	HELP THE HOMELESS	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HEARTSTRINGS COMMUNITY FD 7086 W 105TH ST Overland Park, KS 66212		NC	PROVIDE OPPORTUNITIES TO ADULTS WITH DISBILITIES	500
HELPING HANDS CLINIC 810 HARPER AVE NW Lenoir, NC 28645		NC	TO SUPPORT THEIR MISSION	500
HILLSDALE COLLEGE33 E COLLEGE ST Hillsdale, MI 49242		NC	EDUCATION	5,000
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HOPE ACADEMY2300 CHICAGO AVE S Minneapolis, MN 55404			EDUCATION	20,000
HOSPICE AND PALLATIVE CARE 2500 SUMMIT AVE Greensboro, NC 27405			TO SUPPORT THEIR MISSION	500
HUMANE SOCIETY OF THE TRIAD 4527 WEST WENDOVER AVE Greensboro, NC 27409			TO SUPPORT THEIR MISSION	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LUPUS FOUNDATION 4530 PARK RD STE 302 Charlotte, NC 28209			RESEARCH AND SUPPORT	500
MAKE A WISH TRIAD212 S TRYON ST Charlotte, NC 28281			TO SUPPORT THEIR MISSION	500
MARCH OF DIMESBOX 2547 Decatur, IL 62525			TO SUPPORT THEIR MISSION	200
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MDA3300 EAST SUNRISE DR Tucson, AZ 85718			TO SUPPORT THEIR MISSION	500
NATIONAL MS 2211 MEADOWVIEW ST STE 30 Greensboro, NC 27407			RESEARCH AND OUTREACH	1,000
NATIONAL PARKINSONBOX 8401 Raleigh, NC 27605			TO SUPPORT THEIR MISSION	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NC VET MED FOUNDATION NCSU BOX 8401 Raleigh, NC 27605			EDUCATION	500
NC WILDLIFEBOX 10626 Raleigh, NC 27690			RESEARCH AND OUTREACH	500
NC ZOOLOGICAL SOCIETY 4403 ZOO PARKWAY Asheboro, NC 27205			RESEARCH AND CARE OF ANIMALS	30,000
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NORTH MYRTLE BEACH RESCUE PO BOX 555 North Myrtle Beach, SC 29597			TO SUPPORT THEIR MISSION	200
OPERATION SMILE 502 E CORNWALLIS DR Greensboro, NC 27405			TO SUPPORT THEIR MISSION	500
PINECROFT BAPTIST CHURCH 2022 W VANDALIA RD Greensboro, NC 27407			TO SUPPORT THEIR MISSION	30,000
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
RED DOG FARM5836 BUR MILL CLUB RD Greensboro, NC 27410			RESCUE AND REHABILITATE NEGLECTED ANIMALS	500
SAMARITANS PURSEPO BOX 3000 Boone, NC 28607			TO SUPPORT THEIR MISSION	500
SECOND HARVEST FOOD BANK 3655 REED ST 1 Winston Salem, NC 27107			FOOD AND NUTRITION SERVICES	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SENIOR AND DISABLED FUNDBOX 85 San Bernardino, CA 92410			TO SUPPORT THEIR MISSION	1,000
SMILE TRAIN 633 THIRD AVE 9TH FLOOR New York, NY 10017			HELP CHILDREN WITH CLEFTS	500
SOLDIERS ANGELS200 NE LOOP 410 San Antonio, TX 78217			SUPPORT OF TROOPS AND DISABLED VETS	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SPECIAL OLYMPICS ATTN WEB GIFTS 1133 19TH STREET 12TH FLOOR Washington, DC 20036			HELP CHILDREN AND ADULTS WITH INTELLECTUAL DISABILITIES	500
SUSAN G KOMEN FOUNDATION 5005 LBJ FREEWAY Dallas, TX 75244			RESEARCH AND COMMUNITY OUTREACH	500
SYLVAN HEIGHTS BIRD PARK DRAWER 368 Scotland Neck, NC 27874			EDUCATTION ON CARING FOR ENDANGEDER WATERFOWL	1,500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE COALITION TO SALUTE AMERICAS HE 552 FORT EVANS ROAD SUITE 300 Lansdowne, VA 20176			HELP SEVERLY WOUNDED VETERANS AND FAMILIES	500
THE MUSIC ACADEMY127 BEAMAN PL Greensboro, NC 27410			TO ENABLE STUDENTS OF ALL AGES TO DEVELOPE THEIR TALENTS	1,500
THE SALVATION ARMYBOX 5610 Greensboro, NC 27435			TO SUPPORT THEIR MISSION	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE SERVANTS CENTER 1312 LEXINGTON AVE Greensboro, NC 27403			COMMUNITY SERVICE	500
THE USOPO BOX 96860 Washington, DC 20077			SUPPORT SERVICE MEMBERS AND THEIR FAMILIES	500
TRIAD GOLDEN RETRIEVER RESCUE 2 FLEMING TERRECE CIRCLE Greensboro, NC 27410			REHABILITATION HUMANE TREATMENT AND PLACEMENT OF GOLDEN RETRIEVERS	2,000
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
TRIAD HEALTH PROJECTBOX 5716 Greensboro, NC 27435			RESEARCH AND SUPPORT OF HIV VICTIMS	500
UNC TVBOX 149000 Durham, NC 27709			TO SUPPORT THEIR MISSION	500
US OLYMPIC COMMITTIE 1 OLYMPIC PLAZA Colorado Springs, CO 80909			TO SUPPORT THEIR MISSION	500
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNIVERSITY OF THE CUMBERLANDS 410 MEIJER DRIVE Florence, KY 41042			EDUCATION	5,000
VETERANS OF FOREIGN WARS 2605 S ELM EUGENE ST Greensboro, NC 27406			PROVIDING EDUCATION FOR VETERANS	500
WOUNDED WARRIORS 4899 BELFORT RD Jacksonville, FL 32256			SUPPORT FOR WOUNDED VETERANS	1,000
Total . . . . . ▶ **3a**				175,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CALDWELL MEMORIAL HOSPITAL PO BOX 1890 Lenoir, NC 28645			TO SUPPORT THEIR MISSION	25,000
Total . . . . . ▶ **3a**				175,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303005269

TY 2018 Investments Corporate Bonds Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
SAFRA NATL BANK NY	100,000	100,000
WELLS FARGO BK	100,000	99,884
ALLY BANK	100,000	99,768
GOLDMAN SACHS BK USA	100,000	99,807
CATHY BANK	100,000	99,803
BLACKROCK GLOBAL OPPTY	50,000	41,600

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303005269

TY 2018 Investments Corporate Stock Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AT&T INC	39,375	31,110
ABBOTT LABORATORIES	42,876	74,831
ALTRIA GROUP INC	58,166	51,270
AMGEN INC	24,924	41,093
APPLE INC	16,620	32,399
BP PLC	15,680	18,960
BRIGHTHOUSE FINANCIAL INC	1,655	1,097
CELGENE CORP	23,836	12,818
CHEVRON CORP	45,407	46,941
CISCO SYSTEMS INC	5,170	9,158
COCA COLA COMPANY	9,170	10,127
EMERSON ELECTRIC CO	12,438	12,671
EXXON MOBIL CORP	19,364	14,742
GENERAL MILLS INC	27,389	20,620
GILEAD SCIENCES INC	35,164	26,384
INTERNATIONAL PAPER CO	16,675	12,464
JOHNSON & JOHNSON	31,089	40,740
KELLOGG CO	34,763	29,929
KIMBERLY CLARK CORP	21,526	24,164
KRAFT HEINZ CO	11,591	9,252
LINCOLN NATIONAL CORP	9,109	10,585
LOWES COMPANIES INC	10,132	19,098
METLIFE INC	15,693	17,571
PHILIP MORRIS INTL INC	74,813	55,114
QUALCOMM INC	316	248
VERITIV CORP	35	25
FIRST TRUST	113,350	100,300

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303005269

TY 2018 Investments - Other Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BELL HNW HORIZONS LLC		114,631	282,711
BELL OLMSTEAD PARK HNW LLC		207,570	250,000
BELL HNW FUND V LLC		246,452	427,798
BELL HNW FUND VI LLC		118,546	135,040
CAMERON AT THE SUMMIT PROPERTIES LLC		151,559	250,588

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303005269

TY 2018 Legal Fees Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RETAINER	12,000	12,000	12,000	

TY 2018 Other Decreases Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Description	Amount
DECREASE IN FUND BALANCE	47,785
CONTRIBUTIONS INCLUDED IN PRIOR YEAREND BOOK BALANCE	146,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303005269

TY 2018 Other Income Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CAMERON AT THE SUMMIT PROPERTIES LLC	7,002	7,002	7,002

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303005269

TY 2018 Other Professional Fees Schedule

Name: ROSS ANGEL FOUNDATION

EIN: 56-2013753

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVISORY FEES	5,781	5,781	5,781	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491303005269

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Go to *www.irs.gov/Form990* for the latest information

OMB No 1545-0047

2018

Name of the organization
ROSS ANGEL FOUNDATION

Employer identification number
56-2013753

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	☑ 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

☑ 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 other 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 990PF, Part I, line 2, to 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
ROSS ANGEL FOUNDATION	56-2013753

Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RUSSELLENE J ANGEL 4826 COUNTRY WOODS LANE Greensboro, NC 27410	$ 98,145	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization	Employer identification number
ROSS ANGEL FOUNDATION	56-2013753

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
		$	
(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
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization	**Employer identification number**
ROSS ANGEL FOUNDATION	56-2013753

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for 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 information once. See instructions.) ▶ $** ____________

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	