

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.

2018

Open to Public
Inspection

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

Name of foundation THE ALLEN TATE FOUNDATION		A Employer identification number 56-2044322
Number and street (or P O box number if mail is not delivered to street address) 6700 FAIRVIEW RD RM/STE 300		Room/suite
City or town, state or province, country, and ZIP or foreign postal code CHARLOTTE, NC 282103324		
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		C If exemption application is pending, check here ► <input type="checkbox"/> D 1. Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 276,510	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	(Part I, column (d) must be on cash basis)

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)
1	Contributions, gifts, grants, etc, received (attach schedule)		177,356		
2	Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments		33	33	
4	Dividends and interest from securities		6,794	6,794	
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)				
8	Net short-term capital gain				
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)				
12	Total. Add lines 1 through 11	184,183		6,827	
13	Compensation of officers, directors, trustees, etc				
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)	975		100	
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions)	51			
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule)	100			
24	Total operating and administrative expenses.	1,126		100	0
25	Contributions, gifts, grants paid	253,970			253,970
26	Total expenses and disbursements. Add lines 24 and 25	255,096		100	253,970
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	-70,913			
b	Net investment income (if negative, enter -0-)			6,727	
c	Adjusted net income (if negative, enter -0-)				

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			
	2	Savings and temporary cash investments	161,016	82,624	82,624
	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)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)	170,219	149,440	193,886	
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)	331,235	232,064	276,510	
Liabilities	17	Accounts payable and accrued expenses	735	50	
	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)	735	50	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> 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	330,500	232,014	
	30	Total net assets or fund balances (see instructions)	330,500	232,014	
	31	Total liabilities and net assets/fund balances (see instructions)	331,235	232,064	

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	330,500
2	Enter amount from Part I, line 27a	2	-70,913
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	259,587
5	Decreases not included in line 2 (itemize) ►	5	27,573
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	232,014

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				
(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				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a				
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	
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	

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	210,935	276,106	0 763964
2016	111,790	208,258	0 536786
2015	38,701	163,109	0 237271
2014	253,816	201,278	1 261022
2013	43,200	109,285	0 395297
2 Total of line 1, column (d)			2 3 194340
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 0 638868
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			4 355,685
5 Multiply line 4 by line 3			5 227,236
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 67
7 Add lines 5 and 6			7 227,303
8 Enter qualifying distributions from Part XIII, line 4			8 253,970

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 ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	67
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% 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)		
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	67
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	67
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 <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ►	9	67
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

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	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).	1b	Yes	No
<i>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</i>				
c	Did the foundation file Form 1120-POL for this year?	1c	Yes	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? <i>If "Yes," attach a detailed description of the activities</i>	2	Yes	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? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	Yes	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	Yes	No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	No
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? <i>If "No," attach explanation</i>	8b	Yes	No
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 <i>If "Yes," complete Part XIV</i>	9	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes	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? Website address ►N/A	13	Yes
14	The books are in care of ►H ALLEN TATE III	Telephone no ►(704) 367-7310	
Located at ►6700 FAIRVIEW RD STE 300 CHARLOTTE NC			ZIP+4 ►282103324
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	<input type="checkbox"/>
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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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.		Yes	No
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)?.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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. Organizations relying on a current notice regarding disaster assistance check here.	1b	<input type="checkbox"/>
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	<input type="checkbox"/>
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? If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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	<input type="checkbox"/>
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	<input type="checkbox"/>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<input type="checkbox"/>
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	<input type="checkbox"/>

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))?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	<input checked="" type="checkbox"/> No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
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 Organizations relying on a current notice regarding disaster assistance check here. ►	<input type="checkbox"/>	
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?	<input type="checkbox"/>	<input type="checkbox"/> Yes
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>		<input type="checkbox"/> No
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/> No
<i>If "Yes" to 6b, file Form 8870</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/> No
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes

Yes No

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

10 of 10

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
PATRICK RILEY 6700 FAIRVIEW RD STE 300 CHARLOTTE, NC 282103324	TRUSTEE 000 00	0	0	0
H ALLEN TATE III 6700 FAIRVIEW RD STE 300 CHARLOTTE, NC 282103324	TRUSTEE 000 00	0	0	0
ELIZABETH GORDON 6700 FAIRVIEW RD STE 300 CHARLOTTE, NC 282103324	TRUSTEE 000 00	0	0	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
NONE				

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 N/A	
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	252,993
b	Average of monthly cash balances.	1b	108,109
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	361,102
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	361,102
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	5,417
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	355,685
6	Minimum investment return. Enter 5% of line 5.	6	17,784

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

Part XI organizations check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6.	1	17,784
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	67
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	67
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	17,717
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	17,717
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	17,717

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	253,970
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	253,970
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	67
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	253,903
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				17,717
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018				
a From 2013.	37,760			
b From 2014.	243,798			
c From 2015.	30,611			
d From 2016.	101,449			
e From 2017.	197,228			
f Total of lines 3a through e.	610,846			
4 Qualifying distributions for 2018 from Part XII, line 4 ► \$ _____ 253,970				
a Applied to 2017, but not more than line 2a				
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.				17,717
e Remaining amount distributed out of corpus	236,253			
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	847,099			
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)	37,760			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	809,339			
10 Analysis of line 9				
a Excess from 2014.	243,798			
b Excess from 2015.	30,611			
c Excess from 2016.	101,449			
d Excess from 2017.	197,228			
e Excess from 2018.	236,253			

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

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 e-mail 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
NONE
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

PAYABLE TO QUALIFIED CHARITIES IN ACCORDANCE WITH IRS CODE OF 1986 AS AMENDED

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
<i>a Paid during the year</i> See Additional Data Table				
Total				► 3a
<i>b Approved for future payment</i>				
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					
4 Dividends and interest from securities.			14	6,794	33
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.					
8 Gain or (loss) from sales of assets other than inventory					
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).				6,794	33
13 Total. Add line 12, columns (b), (d), and (e).			13		6,827
(See worksheet in line 13 instructions to verify calculations.)					

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

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

Recipient	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)				
<i>a Paid during the year</i>				
A CHILD'S PLACE 601 E 5TH STREET 230 CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	6,526
ADA JENKINS CENTER 212 GAMBLE ST DAVIDSON, NC 28036	NONE	PUBLIC CHARI	UNRESTRICTED CASH	4,965
ALAMANCE COUNTY ARTS COUNCIL 213 S MAIN ST GRAHAM, NC 27253	NONE	PUBLIC CHARI	UNRESTRICTED CASH	963
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
ANNE SPRINGS CLOSE GREENWAY P O BOX 1209 FORT MILL, SC 29715	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,437
APEX ARTS COUNCIL P O BOX 1381 APEX, NC 27502	NONE	PUBLIC CHARI	UNRESTRICTED CASH	790
ARTS & SCIENCE COUNCIL 227 W TRADE ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	18,142
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
ARTS COUNCIL OF WINSTON SALEM 251 SPRUCE ST N WINSTON SALEM, NC 27101	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,294
ARTS COUNCIL OF YORK COUNTY 121 E MAIN ST ROCK HILL, SC 29730	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,841
ARTS GREENSBORO 200 N DAVIE ST SUITE 201 GREENSBORO, NC 27401	NONE	PUBLIC CHARI	UNRESTRICTED CASH	8,540
Total			► 3a	253,970

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

Recipient	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				
BLUMENTHAL PERFORMING ARTS CENTER 130 N TRYON ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	4,927
BOYS & GIRLS CLUB OF YORK COUNTY 228 E BLACK ST ROCK HILL, SC 29730	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,766
CABARRUS ARTS COUNCIL 65 UNION ST S CONCORD, NC 28025	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,510
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
CANCER SERVICES OF GASTON CTY 306 S COLUMBIA ST GASTONIA, NC 28054	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,346
CARY VISUAL ARTSPO BOX 4322 CARY, NC 27519	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,755
CFSC SHARED SERVICES 601 E 5TH ST 450 CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,500
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
CHARLOTTE CENTER CITY PARTNERS 200 S TRYON STE 1600 CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	11,500
CHARLOTTE RESCUE MISSION 907 W 1ST ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,000
CLEVELAND COUNTY ARTS COUNCIL 111 S WASHINGTON ST SHELBY, NC 28150	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,055
Total			► 3a	253,970

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

Recipient	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				
ST GABRIEL CRADLE 3028 PROVIDENCE RD CHARLOTTE, NC 28211	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,250
CLOVER CHORALIERS P O BOX 836 CLOVER, SC 29710	NONE	PUBLIC CHARI	UNRESTRICTED CASH	50
CLOVER SCHOOLS DISTRICT COUMMUNITY 5485 CHARLOTTE HWY CLOVER, SC 29710	NONE	PUBLIC CHARI	UNRESTRICTED CASH	351
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
PROVIDENCE DAY SCHOOL 5800 SARDIS RD CHARLOTTE, NC 28270	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,250
PHILLIPS ACADEMY 3115 PROVIDENCE RD CHARLOTTE, NC 28211	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,500
DAVIDSON COMMUNITY PLAYERS PO BOX 76 DAVIDSON, NC 28036	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,000
Total			► 3a	253,970

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

Recipient	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				
ZERO-THE END OF PROSTATE CANCER P O BOX 320882 ALEXANDRIA, VA 22320	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,000
FOOTHILLS PLAYHOUSE 201 S 5TH ST EASLEY, SC 29640	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,001
FOUNDATION FOR THE CAROLINAS 220 N TRYON ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	30,000
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
FORE THE CURE 2601 PROVIDENCE HILLS RD CHARLOTTE, NC 28105	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,000
GASTON ARTS & SCIENCE COUNCIL 301 W MAIN AVE GASTONIA, NC 28052	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,102
MYERS PARK TRADIONAL PTA 2132 RADCLIFFE AVE CHARLOTTE, NC 28207	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,500
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
HIGH POINT ARTS COUNCIL 121 S CENTENNIAL ST HIGH POINT, NC 27260	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,020
HOSPICE - CLEVELAND COUNTY 953 WENDOVER HEIGHTS DRIV SHELBY, NC 28150	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,130
IREDELL ARTS COUNCIL P O BOC 167 STATESVILLE, NC 28687	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,236
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
KIDS PATH HOSPICE & PALLIAT 2504 SUMMIT AVE GREENSBORO, NC 27405	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,200
KINGS MOUNTAIN LITTLE THEATRE INC P O BOX 1022 KINGS MOUNTAIN, NC 28086	NONE	PUBLIC CHARI	UNRESTRICTED CASH	335
LANCASTER COUNCIL OF THE ARTS 201 GAY ST LANCASTER, SC 29720	NONE	PUBLIC CHARI	UNRESTRICTED CASH	560
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
LOAVES & FISHES 648B GRIFFITH RD CHARLOTTE, NC 28217	NONE	PUBLIC CHARI	UNRESTRICTED CASH	160
MATTHEWS COMMUNITY CENTER 100 W McDOWELL ST MATTHEWS, NC 28105	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,951
METROPLITAN ARTS COUNCIL 16 AUGUSTA ST GREENVILLE, SC 29601	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,181
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
MIRACLE HILL MINISTRIES 1916 N PLEASANTBURG DRIV GREENVILLE, SC 29609	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,744
MITCHELLS FUNDP O BOX 33549 CHARLOTTE, NC 28233	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,500
PILGRIM'S INN236 W MAIN ST ROCK HILL, SC 29730	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,130
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
QUEENS UNIVERSITY OF CHARLOTTE 1900 SELWYN AVE CHARLOTTE, NC 28207	NONE	PUBLIC CHARI	UNRESTRICTED CASH	20,000
RANDOLPH ARTS GUILD 123 SUNSET AVE ASHEBORO, NC 27203	NONE	PUBLIC CHARI	UNRESTRICTED CASH	325
RANDOLPH COUNTY FAMILY CRISIS P O BOX 2161 ASHEBORO, NC 27204	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,350
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
ROCKINGHAM COUNTY ARTS COUNCIL P O BOX 1371 REIDSVILLE, NC 27320	NONE	PUBLIC CHARI	UNRESTRICTED CASH	50
SCAN OF IREDELL COUNTY 207 WALNUT ST MOORESVILLE, NC 28117	NONE	PUBLIC CHAR	UNRESTRICTED CASH	1,716
SIMPSONVILLE ARTS FOUNDATION 110 ACADEMY ST SIMPSONVILLE, SC 29681	NONE	PUBLIC CHARI	UNRESTRICTED CASH	516
Total			► 3a	253,970

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

Recipient	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				
THE ARTS CENTER 300-G EAST MAIN ST CARRBORO, NC 27510	NONE	PUBLIC CHARI	UNRESTRICTED CASH	710
TURNING POINT OF UNION COUNTY PO BOX 952 MONROE, NC 28111	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,605
UNC CHARLOTTE 9201 UNIVERSITY CITY BLVD CHARLOTTE, NC 28223	NONE	PUBLIC CHARI	UNRESTRICTED CASH	10,000
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
UNION COUNTY COMMUNITY ARTS 120 N MAIN ST MONROE, NC 28112	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,910
UNITED WAY OF ALAMANCE COUNTY 803 HERMIAGE RD BURLINGTON, NC 27215	NONE	PUBLIC CHARI	UNRESTRICTED CASH	988
UNITED WAY OF CENTRAL CAROLINAS 308 S BREVARD CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	13,389
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
UNITED WAY OF CLEVELAND COUNTY 132 W GRAHAM ST SHELBY, NC 28150	NONE	PUBLIC CHARI	UNRESTRICTED CASH	250
UNITED WAY OF FORSYTH COUNTY 301 NORTH MAIN STREET 17 WINSTON SALEM, NC 27101	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,375
UNITED WAY OF GREATER GREENSBORO 1500 YANCEYVILLE ST GREENSBORO, NC 27405	NONE	PUBLIC CHARI	UNRESTRICTED CASH	4,895
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
UNITED WAY OF GREATER HIGH POINT 201 CHURCH AVE HIGH POINT, NC 27262	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,650
UNITED WAY OF GREENVILLE COUNTY 105 EDINBURGH CT GREENVILLE, SC 29607	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,004
UNITED WAY OF LANCASTER COUNTY 109 S WYLIE ST LANCASTER, SC 29720	NONE	PUBLIC CHARI	UNRESTRICTED CASH	500
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
UNITED WAY OF PICKENS COUNTY 201 S 5TH ST EASLEY, SC 29640	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,416
UNITED WAY OF ROCKINGHAM COUNTY 335 COUNTY HOME RD REIDSVILLE, NC 27320	NONE	PUBLIC CHARI	UNRESTRICTED CASH	50
UNITED WAY OF THE GREATER TRIANGLE 2400 PERIMETER PARK DR 1 MORRISVILLE, NC 27560	NONE	PUBLIC CHARI	UNRESTRICTED CASH	8,938
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
VISUAL ARTS EXCHANGE 309 WEST MARTIN STREET RALEIGH, NC 27601	NONE	PUBLIC CHARI	UNRESTRICTED CASH	4,965
VOTE YES FOR SCHOOL BONDS C/O CHARLOTTE CHAMBER OF COMMERCE 330 S TRYON ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	3,000
WAKE FOREST ARTSP O BOX 528 WAKE FOREST, NC 27588	NONE	PUBLIC CHARI	UNRESTRICTED CASH	625
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
MCCRORY YMCA400 E MOREHEAD ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,500
THE ZEITGEIST FOUNDATION 2700 COLTSGATE RD STE 102 CHARLOTTE, NC 28211	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,000
NC ASSOC OF REALTORS HOUSING 4511 WEYBRIDGE LN GREENSBORO, NC 27407	NONE	PUBLIC CHARI	UNRESTRICTED CASH	10,000
Total			► 3a	253,970

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

Recipient	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				
ST MARY'S SCHOOL 900 HILLSBOROUGH ST RALEIGH, NC 27603	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,500
BOYS SCOUTS OF AMERICA 1410 E 7TH ST CHARLOTTE, NC 28204	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,500
THE MOORESVILLELAKE NORMAN CHRISTI P O BOX 62 MOORESVILLE, NC 28115	NONE	PUBLIC CHARI	UNRESTRICTED CASH	795
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
SAFE PASSAGES INCP O BOX 11458 ROCK HILL, SC 29731	NONE	PUBLIC CHARI	UNRESTRICTED CASH	705
HOSPICE & PALLIATIVE CARE OF GREENS 2500 SUMMITT AVE GREENSBORO, NC 27405	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,235
CORNELIUS ART CENTERP O BOX 1443 CORNELIUS, NC 28031	NONE	PUBLIC CHARI	UNRESTRICTED CASH	2,970
Total			► 3a	253,970

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

Recipient	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)				
<i>a Paid during the year</i>				
CLOVER HIGH SCHOOL BAND BOOSTERS P O BOX 952 CLOVER, SC 29710	NONE	PUBLIC CHARI	UNRESTRICTED CASH	210
UNITED WAY OF RANDOLPH CTY 363 S COX ST ASHEBORO, NC 27203	NONE	PUBLIC CHARI	UNRESTRICTED CASH	100
HOPE IN LANCASTER 2008 PAGELAND HWY LANCASTER, SC 29720	NONE	PUBLIC CHARI	UNRESTRICTED CASH	1,220
Total			► 3a	253,970

TY 2018 Accounting Fees Schedule

Name: THE ALLEN TATE FOUNDATION**EIN:** 56-2044322

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	975	100		

TY 2018 Investments - Other Schedule**Name:** THE ALLEN TATE FOUNDATION**EIN:** 56-2044322**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SUNTRUST STOCK	AT COST	149,440	193,886

TY 2018 Other Decreases Schedule

Name: THE ALLEN TATE FOUNDATION

EIN: 56-2044322

Description	Amount
ADJ IN COST OF SUNTRUST	27,573

TY 2018 Other Expenses Schedule

Name: THE ALLEN TATE FOUNDATION
EIN: 56-2044322

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
MISCELLANEOUS	100			

TY 2018 Taxes Schedule

Name: THE ALLEN TATE FOUNDATION**EIN:** 56-2044322

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAX	51			

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

OMB No 1545-0047

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

2018**Name of the organization**
THE ALLEN TATE FOUNDATION**Employer identification number**
56-2044322**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 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc. purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc. contributions totaling \$5,000 or more during the year. ► \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE ALLEN TATE FOUNDATION		Employer identification number 56-2044322	
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	ALLEN TATE CO INC	\$ 25,000	Person <input checked="" type="checkbox"/>
	6700 FAIRVIEW RD SUITE 300		Payroll <input type="checkbox"/>
	CHARLOTTE, NC 282103324		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	H ALLEN TATE JR UAD 3-6-07 AS AMEND RVOC TR OF H ALLEN TATE III TTEE	\$ 30,000	Person <input checked="" type="checkbox"/>
	6700 FAIRVIEW RD STE 300		Payroll <input type="checkbox"/>
	CHARLOTTE, NC 282103324		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	FALL INVESTMENTS LLC	\$ 30,000	Person <input checked="" type="checkbox"/>
	6700 FAIRVIEW RD		Payroll <input type="checkbox"/>
	CHARLOTTE, NC 28210		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SONNY VENTURES LLC	\$ 20,000	Person <input checked="" type="checkbox"/>
	6700 FAIRVIEW RD		Payroll <input type="checkbox"/>
	CHARLOTTE, NC 28210		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)

Name of organization THE ALLEN TATE FOUNDATION		Employer identification number 56-2044322	
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 THE ALLEN TATE FOUNDATION			Employer identification number 56-2044322
Part III <i>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.) ► \$ _____</i> 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