Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

Fo	r calen	dar year 2019 or tax year beginning	<u>, </u>	2019, and			, 20		
Nan	ne of four	ndation			A Employe	r identification numb	er		
<u>C</u> a	stel	loe Family Foundation				148069			
Nun	nber and	street (or P O box number if mail is not delivered to street address)	F	Room/suite	B Telephor	e number (see instruct	ions)		
Р.	O. B	ох 9325			(828)407-8356			
City	or town,	state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ling, check here ▶ 🔲		
As	Asheville NC 28815								
	Check all that apply: ☐ Initial return ☐ Initial return of a former public charity D 1. Foreign organizations, check here								
	Final return Amended return 2. Foreign organizations meeting the 85% test,								
		Address change Name cha	nge	. 1		here and attach comp			
Н	Check	type of organization: X Section 501(c)(3) exempt p	rivate foundati	on M	E If private	foundation status was			
		on 4947(a)(1) nonexempt charitable trust Other ta			section 5	07(b)(1)(A), check here	▶ 🗌		
Ī		narket value of all assets at J Accounting method			F If the four	ndation is in a 60-mont	th termination		
	end of	f year (from Part II, col (c), Other (specify)				ction 507(b)(1)(B), chec			
	line 16		e on cash basis)					
P	arti	Analysis of Revenue and Expenses (The total of	(a) Revenue an	.д	<u></u>		(d) Disbursements		
B1111111		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(0) 146	t investment income	(c) Adjusted net income	for charitable purposes		
		the amounts in column (a) (see instructions))	books				(cash basis only)		
	1 1	Contributions, gifts, grants, etc , received (attach schedule)	3,991,98	0. /	XX 75,34		TOUR STATE		
	2	Check ► ☐ if the foundation is not required to attach Sch B	34.5				CASS - CO		
`	3	Interest on savings and temporary cash investments	22	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	223.		67. V. 3.		
	4	Dividends and interest from securities	65,55		65,553.		4.7.467338.3.3.5.0		
	5a	Gross rents					7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
	b	Net rental income or (loss)	334 33 · · ·	72 38	(A) 5 - 5	183343	27 BB 27		
2022 snue	6a	Net gain or (loss) from sale of assets not on line 10	+45°C				10 - 10 10 10 10 10 10 10 10 10 10 10 10 10		
20	b	Gross sales price for all assets on line 6a	355 775 7	- 1323					
28 202 Revenue	7	Capital gain net income (from Part IV, line 2)			0.		144		
Reve	8	Net short-term capital gain				0.			
_	9	Income modifications		7188	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	· · ·	7.903883333		
JAN	10a	Gross sales less returns and allowances		**********		14 .02 34 4			
	b	Less Cost of goods sold	[4. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		<u> </u>				
	C	Gross profit or (loss) (attach schedule)	1 1			<u> </u>			
Ž	11	Other income (attach schedule)							
SCANNED	12	Total. Add lines 1 through 11	4,057,75	6	65,776.	0.			
8_	13	Compensation of officers, directors, trustees, etc.	21,33		05,770.		21,337.		
S S	14	Other employee salaries and wages	29,96				29,969.		
S(Expenses	15	Pension plans, employee benefits	23,30	,			27,505.		
ac.	16a	Legal fees (attach schedule)							
Ä	b	Accounting fees (attach schedule)	1,20		1,200.				
ě	1		1,20	<u> </u>	1,200.				
ati	17	Other protessionalifees (attach schedule) Interestaived US Bank - USB							
it.	18	Taxes (attach senedule) (see instructions) See Stmt	3,92	5			3,925.		
Ë		Depreciation (attach schedule) and depletion	3,32	٠					
Ē	19	Occupancy EC 0 7 20/20	6,96	0			6,969.		
Ad	20	Travel, conferences meetings	9,71				9,712.		
Þ	21		9,71	2.			7,,12.		
ਲ	22	Printing and publications	6 6 7	2	0.		6,632.		
Operating and Administrativ	23	Other expenses (attach schedule) See Stmt	6,63	4.	٠.		0,032.		
<u>a</u>	24	Total operating and administrative expenses.		,	1 200		70 544		
ě		Add lines 13 through 23	79,74		1,200.		78,544.		
Ö	25	Contributions, gifts, grants paid	201,29				201,297.		
	26	Total expenses and disbursements. Add lines 24 and 25	281,04	1.	1,200.	<u> </u>	279,841.		
	27	Subtract line 26 from line 12			74 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -	1883 XXV (X)			
	a	Excess of revenue over expenses and disbursements	3,776,71	5.	<u> </u>	<u> </u>	1000 (A)		
	b	Net investment income (if negative, enter -0-) .	<u> </u>	NV. 9	64,576.				
		natural management of magneture anter (1)	Y 2 A.	1 2.77 2	<i>,,</i> , , , , , , , , , , , , , , , , , ,	, /1	. m		

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2019)

1 Cash - non-interest-bearing	Pa	itill.	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	of year
2 Savings and temporary cash invastments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ 4 Piedges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) 25,000. 25			should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts ► 4 Pledges receivable ► Less allowance for doubtful accounts ► 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) { 7 Other notes and loans receivable (attach schedule) { 8 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10 Investments—Curporate stock (attach schedule) L=10b Stmt c investments—Curporate stock (attach schedule) L=10b Stmt c investments—Corporate bonds (attach schedule) L=10b Stmt c investments—Corporate bonds (attach schedule) L=10b Stmt c investments—Corporate stock (attach schedule) L=10b Stmt c investments—Corporate bonds (attach schedule) L=10b Stmt c in		1	Cash – non-interest-bearing	72,239.	2,4	50.	2,450.
Accounts receivable		2	Savings and temporary cash investments .				
Less allowance for doubtful accounts ▶ 4 Piedges receivable Signature of Country of Co		3	Accounts receivable ▶		17 12 1	- X	X 4 3 4
Less: allowance for doubful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualfied persons (attach schedule) 25,000. Less allowance for doubful accounts ▶ 0, 0, 25,000. Less allowance for doubful accounts ▶ 0, 0, 25,000. S Inventiones for sale or use 0, 0, 25,000. S Inventiones for sale or use 0, 0, 0, 25,000. Investments—U.S and state government obligations (attach schedule) binvestments—U.S and state government obligations (attach schedule) binvestments—Corporate stock		ŀ	Less allowance for doubtful accounts ▶				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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6 Recevables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans recevable (attach schedule) ≥ 25,000. Less allowance for doubtful accounts ≥ 0, 0 25,000. Less allowance for doubtful accounts ≥ 0, 0 0 25,000. Less allowance for doubtful accounts ≥ 0, 0 0 25,000. Investments—Organe expenses and deferred charges investments—Corporate stock (attach schedule) b. Investments—Horgage loans investments—Horgage loa			Less: allowance for doubtful accounts ▶		* ````	,	
disqualified persons (attach schedule) ≥ 25,000. 1.7 €mm² 25,000.		5					
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17 Accounts payable and accrued expenses				455,182.	4,237,5	78.	4,827,630.
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Foundations that do not follow FASB ASC 958, check here And complete lines 26 through 30. 26 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances (see instructions) 30 Total liabilities and net assets/fund balances (see instructions) 455,182. 4,226,127. 2011 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 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) See Statement 5 5,894. 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 4,226,127.	Š		and complete lines 24, 25, 29, and 30.				
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Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances (see instructions) 30 Total liabilities and net assets/fund balances (see instructions) 455,182. 4,226,127. 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 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) See Statement 5 5,894. 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 4,226,127.	Ä	25	Net assets with donor restrictions				738-7502 754
Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 Total net assets or fund balances (see instructions) 30 Total liabilities and net assets/fund balances (see instructions) 455,182. 4,226,127. 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 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) See Statement 5 5,894. 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 4,226,127.	nd		Foundations that do not follow FASB ASC 958, check here ▶ 🗵				
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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 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) > 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) > See Statement 6 Total net assets or fund balances at equipment fund 4 455,182. 4,226,127. 4 4,237,578. 4 4,237,578. 4 4,237,578. 4 4,237,578. 5 5,894. 6 Total net assets or fund balances (see instructions) 4 55,182. 4,226,127. 4 4,237,578. 4 4,237,578. 5 5,894. 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 4,226,127.	ō	l					
Part IIIAnalysis of Changes in Net Assets or Fund Balances1Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)1455,182.2Enter amount from Part I, line 27a23,776,715.3Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund3124.4Add lines 1, 2, and 344,232,021.5Decreases not included in line 2 (itemize) ▶ See Statement55,894.6Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 2964,226,127.	ts	27	• • • • • • • • • • • • • • • • • • • •				
Part IIIAnalysis of Changes in Net Assets or Fund Balances1Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)1455,182.2Enter amount from Part I, line 27a23,776,715.3Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund3124.4Add lines 1, 2, and 344,232,021.5Decreases not included in line 2 (itemize) ▶ See Statement55,894.6Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 2964,226,127.	se	28	-				6 307 68607 7 77.
Part IIIAnalysis of Changes in Net Assets or Fund Balances1Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)1455,182.2Enter amount from Part I, line 27a23,776,715.3Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund3124.4Add lines 1, 2, and 344,232,021.5Decreases not included in line 2 (itemize) ▶ See Statement55,894.6Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 2964,226,127.	As	l	·	455,182.	4,226,1	<u>27.</u>	
Part IIIAnalysis of Changes in Net Assets or Fund Balances1Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)1455,182.2Enter amount from Part I, line 27a23,776,715.3Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund3124.4Add lines 1, 2, and 344,232,021.5Decreases not included in line 2 (itemize) ▶ See Statement55,894.6Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 2964,226,127.	et	30	·				
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ See Statement 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 4,226,127.				455,182.	4,237,5	78.	
end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ See Statement 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29 1 455, 182. 2 3,776,715. 3 124. 4 4,232,021. 5 5,894.							
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ See Statement 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29 6 4, 226, 127.	1			mn (a), line 29 (mus	st agree with		455 100
3 Other increases not included in line 2 (itemize) ▶ 2018 Federal Tax Refund 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ See Statement 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 4,226,127.	-			•	٠		
4 Add lines 1, 2, and 3	_			m			
5 Decreases not included in line 2 (itemize) ► See Statement 5 5,894. 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 4,226,127.				Tax Refund			
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 . 6 4,226,127.							
		Decr	reases not included in line 2 (itemize) See Statement	Dort II column (h)	no 20		
	6	rotal	net assets or fund balances at end of year (line 4 minus line 5) —	rart II, column (b), II	ne 29 .	D D	

Part	V Capital Gains and I	Losses for Tax on Investmen	t Income						
	(a) List and describe the kind	(s) of property sold (for example, real estate , 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	.37 SHS Wabtec Corpo	oration		D	02/26/2019	02/26/2019			
<u>b</u>	1000 SHS General Ele	ectric Co		D	07/26/2010	03/21/2019			
<u>C</u>									
<u>d</u>									
<u>e</u>		<u></u>		1	 				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	other basis ense of sale		ain or (loss) s (f) minus (g))			
<u>a</u>	27. 29.					-2.			
<u> </u>	10,269.			16,047.		-5,778.			
<u>c</u>									
<u>d</u>									
<u>е</u>	Complete only for posets show	ing gain in column (h) and owned by t	ho foundation	00 12/21/60					
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col (k), but r	col (h) gain minus not less than -0-) or (from col (h))			
a						-2.			
<u>u</u> b						-5,778.			
d									
е				····································					
2	Capital gain net income or (nercaniiaringgi / • ·	o enter in Pa		2	-5,780.			
3	If gain, also enter in Part I,	or (loss) as defined in sections 12 line 8, column (c) See instruction				_			
	Part I, line 8	r Section 4940(e) for Reduce	d Toy on h	lat Invastment	3				
Part		ate foundations subject to the sec							
Was t	s," the foundation doesn't qu	ection 4942 tax on the distributab alify under section 4940(e). Do no	t complete t	his part		☐ Yes ⊠ No			
	······	nt in each column for each year;	see the instru	uctions before m	aking any entries				
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use a		(d) istribution ratio) divided by col (c))			
	2018	34,000		725,5		0.046862			
	2017	28,000		697,9		0.040120			
	2016	23,000		567,1		0.040554			
	2015	20,000		477,4		0.041887			
	2014	17,725	•	399,3	889.	0.044380			
2	Total of line 1, column (d)				2	0.213803			
3		or the 5-year base period—divide indation has been in existence if l			3 3	0.042761			
4	Enter the net value of nonch	naritable-use assets for 2019 from	n Part X, line	5 .	4	2,706,278.			
5	Multiply line 4 by line 3 .				. 5	115,723.			
6	Enter 1% of net investment	income (1% of Part I, line 27b)			6	646.			
7	Add lines 5 and 6				7	116,369.			
8	Enter qualifying distribution			. and accordate	. 8	304,841.			
	Part VI instructions.	er than line 7, check the box in Pa	art vi, line 10	o, and complete	mat part using a	170 tax rate See the			



खाः	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	Instru	ICTIO	15)		
`1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	1,35		*		
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)	Smerie.				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		6	46.		
	here ➤ 🗵 and enter 1% of Part I, line 27b	jàr 3				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	' دنست	6. 16. \ \	****		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.		
3	Add lines 1 and 2		6	46.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		6	46.		
6	Credits/Payments:		C.S.	150		
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 124.	and the second	, ` .	3 3		
b	Exempt foreign organizations—tax withheld at source	<u> </u>				
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.	¥. ()				
d	Backup withholding erroneously withheld		2 2			
7	Total credits and payments Add lines 6a through 6d		1	24.		
8	Enter any penalty for underpayment of estimated tax. Check here 🗵 if Form 2220 is attached			15.		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		5	37.		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .			0.		
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11					
***********	VII-A Statements Regarding Activities	Ţ,	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	163	X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		<u>×</u>		
	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.					
С	Did the foundation file Form 1120-POL for this year?					
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	12000	55 U	1		
	on foundation managers 🕨 \$	220	12800			
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 ///////	14 X.	<u> </u>		
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	37 · >	×		
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		$\frac{\dot{\mathbf{x}}}{\mathbf{x}}$		
4a 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?	5		×		
•	If "Yes," attach the statement required by General Instruction T	7.50	V 2	<i>y</i> ,		
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			lith homa'		
	conflict with the state law remain in the governing instrument?	6		×		
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	×			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	3,	- 44	3,		
	NC	130		¥\$.		
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 <i>General Instruction G</i> ? If "No," attach explanation	8b	×	7.51		
0	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	33	7			
9	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9		×		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		×		
				(2019)		

Pan	VIII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ▶ N/A	L		l
14	The books are in care of ▶ Paul E Castelloe Jr Telephone no ▶ (919)	E 7 1 (0063	
17			0003	
45	Located at ≥ 39 Ashley Road Asheville NC ZIP+4 ≥ 28805			
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 Image: square of tax in the properties of tax in			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?.	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	13%		4.5
	the foreign country	17%	13.	10 m
Par	WILE Statements Regarding Activities for Which Form 4720 May Be Required			
200000000000000000000000000000000000000	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	38.73	Yes	No
1a			\$60°	. 7%
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			後くと
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		77.E.	1 3 4
		12/3	P. Se	144
			7.0	4
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		. 1	1 /
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	10.4	100	7, 3
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	180 32	2 - 12 s	1.0%
	the benefit or use of a disqualified person)? .		22 N	. 02.
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			NAZY
	foundation agreed to make a grant to or to employ the official for a period after			24/3
	termination of government service, if terminating within 90 days)	2	()	3.6
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	133	1	14 G
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	x //	(x)
	Organizations relying on a current notice regarding disaster assistance, check here		180	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		<u>``</u> %	664
	were not corrected before the first day of the tax year beginning in 2019?	1c	^ ′′	×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1.5 4	250	2.7 /8
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	875	, 4	1
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		17.73	S. 19.
	6d and 6e) for tax year(s) beginning before 2019?	1.8 "	· 14	2,3
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	26. N	, '1	194
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		20	.34
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		<u> </u>	John S
	all years listed, answer "No" and attach statement—see instructions)	2b	X	29 W W
_		20		7.
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1.	(Ž.)	75.
0-	▶ 20 , 20 , 20 , 20			3.3
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1997	488	, ? ? _. ~
	at any time during the year?			} () \{ () \{ () \}
b	If "Yes," did it have excess business holdings in 2019 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	anenn ,	1.24	. *** . ***
	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 Form 4720, Schedule C, to determine if the	1		
	foundation had excess business holdings in 2019)	3b	~ 1	**
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		, <u>~</u> ~	<i>J</i>
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	75.00	`
		orm 990)-PF	
	DEV 10/27/00 PPO		- • •	· · -/

	VIII: Statements Regarding Activities	s for W	hich Form	4/20	мау ве к	equire	a (contii	nuea)			
5a	During the year, did the foundation pay or incur						_			Yes	No
	(1) Carry on propaganda, or otherwise attempt t						Yes Yes	⊠ No		,	
	(2) Influence the outcome of any specific public		on (see secti	on 495	(5), or to ca	arry on,		(527) a.	١,		
	directly or indirectly, any voter registration di		-46		0	•	☐ Yes	⊠ No		, ,	
	(3) Provide a grant to an individual for travel, st.(4) Provide a grant to an organization other than					ibed in	☐ Yes	⊠ No	1	·	`
	section 4945(d)(4)(A)? See instructions	i a cha	mable, etc.,	organiz		1000 111	☐ Yes	⊠ No		. 1	2
	(5) Provide for any purpose other than religious	. charita	able, scientif	c. litera	arv. or educ	ational		<u></u>			à
	purposes, or for the prevention of cruelty to			-,	,,		☐Yes	X No			, ,
b	If any answer is "Yes" to 5a(1)-(5), did any of the	ne trans	sactions fail t	o qualif	fy under the	е ехсер	tions des	scribed	1 17		
	in Regulations section 53 4945 or in a current no								5b		×
	Organizations relying on a current notice regards	ng disa	ister assistan	ce, che	ck here .			▶ []		,
C	If the answer is "Yes" to question 5a(4), does to			exem	ption from	the tax	_				, (
	because it maintained expenditure responsibility				•		Yes	No	١ ,	3.8.	*
_	If "Yes," attach the statement required by Regul									8.1	,
6a	Did the foundation, during the year, receive any on a personal benefit contract?	tunas,	airectly or in	airectiy	, to pay pre	miums	□ v	(V)	1. 5	1 7	
L	Did the foundation, during the year, pay premiur		othy or indire	athu on	a porcopal	bonofit	☐ Yes	X No ∙2	6b	٠ ا	×
b	If "Yes" to 6b, file Form 8870	ns, dire	ctly or mone	Juy, On	a personai	Deneni	COITHACI		- 00		
7a	At any time during the tax year, was the foundation	a narty	to a probibit	ed tax s	helter trans	action?	Yes	X No	, [· ·
b	If "Yes," did the foundation receive any proceed								7ĥ		
8	Is the foundation subject to the section 4960 ta								733		
	remuneration or excess parachute payment(s) d						Yes Yes	X No	1 41	- 3	<u> 206</u>
Par	VIII Information About Officers, Direct	tors, 1	Trustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found						ontribution		1		
	(a) Name and address	hou	e, and average rs per week ed to position	(If r	mpensation not paid, iter -0-)	emplo	yee benefit erred compa	plans	(e) Expe	nse acc allowan	
Pau	l E Castelloe Jr	Pres.	ident					_			_
	Ashley Road Asheville NC 28805		1.00		21,337.			0.			0.
	ir Castelloe Vanhook	Vice-Pres	s,Secretary,Treas 1.00		0.			0.			0.
4431	Laurel Hills Road Raleigh NC 27612	 	1.00					•			_
2	Compensation of five highest-paid employe "NONE."	es (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uction	s). If n	one,	enter
			(b) Title, and a	verage	•		(d) Contribi employee	utions to	(e) Expe	inse an	COLINE
	(a) Name and address of each employee paid more than \$50,00	00	hours per videvoted to p		(c) Comper	nsation	plans and	deferred		allowar	
							compen				
None)										
			 				-				
			<u> </u>	-							
										·····	
F - 4 - 1	The state of other completes and successful of the state				L			. >			
otal	number of other employees paid over \$50,000	···	•			• • •			0 Form 9 9	O-PE	(2010)
DAA		05	V 10/27/20 PBO						101111 33	- r r	(EU 13)

3	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
ota	I number of others receiving over \$50,000 for professional services	0
श्व	Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of particular particular distributions and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Teacher retention support at Emma Elementary in Asheville, NC. Develop and stock a staff lounge (food	
	and drinks) and a staff supply closet (teacher supplies) at Emma Elementary. The goal here is to	
	improve teacher retention and prevent turnover in diverse schools in marginalized communities.	7,725
2	Research on Positive Childhood Experiences (planning stages): Planning for a major, multi-year	
	community-based research project on positive childhood experiences as a buffer to childhood trauma /	
	adverse childhood experiences (an emerging area of research in public health / education / social work)	2,901.
3	Community self-development support with PODER Emma Community Ownership (www.poderemma.org). Technical	
	assistance, research, coaching, and facilitation related to network development, worker-owned business	2 442
	development, and youth development / educational development.	2,443.
4		
251	Summary of Program-Related Investments (see instructions)	1
**********	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	La Esperanza, LLC: 0% 10-year loan to a resident-owned community (cooperatively-owned	
	mobile home community) in the Emma community of Asheville, NC (to preserve affordable	
	housing in a diverse, low-wealth, marginalized community).	25,000
2		
	<u></u>	
	other program-related investments. See instructions	
3		
Fota	I. Add lines 1 through 3	25,000.
	n / do miloo i dirougho	Form 990-PF (2019
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Pelac	see instructions.)	gn iou	indations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а	Average monthly fair market value of securities	1a	1,834,215.
b	Average of monthly cash balances	1b	888,275.
С	Fair market value of all other assets (see instructions)	1c	25,000.
d	Total (add lines 1a, b, and c)	1d	2,747,490.
e	Reduction claimed for blockage or other factors reported on lines 1a and		***************************************
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,747,490.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	41,212.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,706,278.
6	Minimum investment return. Enter 5% of line 5	6	135,314.
Part.		ounda	
1	Minimum investment return from Part X, line 6	1	135,314.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 646.	7	
b	Income tax for 2019. (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	646.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	134,668.
4	Recoveries of amounts treated as qualifying distributions	4	··· ··· ··· ··· ··· ··· ··· ··· ··· ··
5	Add lines 3 and 4	5	134,668.
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	134,668.
Part	Qualifying Distributions (see instructions)	.t	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	22.4	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	279,841.
b	Program-related investments — total from Part IX-B	1b	25,000.
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	11	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	304,841.
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	646.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	304,195.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	g whot	her the foundation

Part	VIII Undistributed Income (see instruction	ons)	·		-90
E200.2400000		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				134,668.
2 a	Undistributed income, if any, as of the end of 2019. Enter amount for 2018 only			35,992.	
b	Total for prior years. 20, 20, 20				````
3	Excess distributions carryover, if any, to 2019.	Range Andries &	e e elementalismo in c	1 31 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1	woodning and sugare
а	From 2014		S S minimumin 2		A vic. n. Fondininging i
b	From 2015		Continue migras, Case		Maria California e de Caración
C	From 2016 .		Odni james	医双氯 医重复法	Mg. Diguiquianian
d	From 2017		1.3 2.1 (2)		3300
е	From 2018	[34 13 25 3			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
f	Total of lines 3a through e		P3 3/3/3/3/3/	19 14 19 19 19 19 19 19 19 19 19 19 19 19 19	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
4	Qualifying distributions for 2019 from Part XII, line 4. ▶ \$ 304,841.				
а	Applied to 2018, but not more than line 2a	***		35,992.	
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				134,668.
е	Remaining amount distributed out of corpus	134,181.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
5	Excess distributions carryover applied to 2019 (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:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	134,181.	19 1 18 18 18 18 18 18 18 18 18 18 18 18 1	(
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		3000 (S)
С	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 .		0.		
е	Undistributed income for 2018 Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f	Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				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 2014 not applied on line 5 or line 7 (see instructions)	0.	ann 2 18 4		andanan hangingan mas s
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	134,181.			
10	Analysis of line 9.	980 * 44	9.5 (6) 3 2 2 3	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
а	Excess from 2015 0.	The same than	1		
b	Excess from 2016 0.	kûr yî dinê			493 (3.2)
C	Excess from 2017 0.			Madala galangig an XX	
d	Excess from 2018 . 0.	The common tight in the control of t			ran fur ur na marka standilir ana mur r
•	Excess from 2019 134 181		13 7 83 9 87 1	2 (2)	retorit til til til til til til til til til t

	90-PF (2019)					Page 10
Part			***************************************	····	9)	N/A/
1a	If the foundation has received a ruling foundation, and the ruling is effective fo			private operating		
b	Check box to indicate whether the four		_	ation described in s	section 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d),2016	(e) Total
b	85% of line 2a	•••••				
С	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					
е	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.					
а	"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					
С	"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)					
	(a) Largest amount of support from an exempt organization					
	(4) Gross investment income				1	L
Part				the foundation	had \$5,000 or m	iore in assets at
	any time during the year-		ons.)		· 	
1 a	Information Regarding Foundation List any managers of the foundation of before the close of any tax year (but of	who have centrib				by the foundation
b	List any managers of the foundation ownership of a partnership or other el					arge portion of the
2	Information Regarding Contribution Check here ▶ ☒ if the foundation unsolicited requests for funds If the f complete items 2a, b, c, and d. See in	only makes con oundation makes	tributions to pres	elected charitable		
а	The name, address, and telephone nu	imber or email ac	ddress of the pers	on to whom applic	ations should be a	ddressed.
	See Supplementary Informat	ion Stateme	nt			
	The form in which applications should			d materials they sh	ould include.	
С	Any submission deadlines.					
d	Any restrictions or limitations on av	vards, such as	by geographical a	areas, charitable	fields, kinds of ins	stitutions, or other

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to any foundation manager Purpose of grant or status of Amount contribution recipient Name and address (home or business) or substantial contributor a Paid during the year National Eating Disorders Association NONE 1500 Broadway Ste 1101 PC Charity 80,000. New York NY 10036 Ronald McDonald House Durham & Wake NONE 506 Alexander Ave Charity Durham NC 27705 PC 30,000. YMCA of the Triangle Area, Inc NONE 801 Corporate Center Dr Ste 200 PC Charity 4,000. Raleigh NC 27607 Transitions Guilding Lights Caregiver Support Center | NONE 3739 National Dr Ste 204 Raleigh NC 27612 PC 8,000. Charity CIMA -Companeors Inmigrantes de las Montanas Accion NONE 528 Emma Road 76,000. PC Charity Asheville NC 28806 Emma Elementary School Teacher Love Fund | NONE 37 Brickyard Road NC 3,297. Asheville NC 28806 Charity 201,297. b Approved for future payment

Total

BAA

*******	analysis of Income-Producing Act gross amounts unless otherwise indicated.	T	siness income	Excluded by section	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempti function income (See instructions)
1	Program service revenue					(CCC Mistractions)
	a					
	b					
	C		······································			
	d					
	e					
	g Fees and contracts from government agencies					
2	g Fees and contracts from government agencies Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	223.	
4	Dividends and interest from securities .			14	65,553.	
5	Net rental income or (loss) from real estate.	N 2 3 13 1				18 - 18 AN 18 A 18 A 18 A 18 A 18 A 18 A 18
•	a Debt-financed property			1		
	b Not debt-financed property					
6	Net rental income or (loss) from personal property			İ İ		
7						
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	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
	Cubtatal Add salumns (b) (d) and (s)	\$1327312 ~ ·		## 157 T	65,776.	l,
	Subtotal Add columns (b), (d), and (e)	5,84. 1 27		bww./		L
13	Total. Add line 12, columns (b), (d), and (e)			P###X*** ** 1	13	65,776.
13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)				65,776.
13 See 2 a	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
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13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
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13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	
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13 See Pa Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes	13	mportantly to the

		Organization	ons						
1	ın se organ	ction 501(c) (o	ther than section	engage in any of the foll 501(c)(3) organizations	s) or in secti	ion 527, relating			Yes No
а	(1) C	ash	orting foundation to	a noncharitable exemp	ot organization	O1.		1a(1)	X
b		ther assets . transactions.	•	• • • •				1a(2)	<u>x</u>
				mpt organization able exempt organizatio			•	1b(1) 1b(2)	×
			equipment, or othe	•				1b(2)	
		eimbursement ai						1b(4)	×
		oans or loan gua	_					1b(5)	×
	(6) P	erformance of se	rvices or membersh	ip or fundraising solicit	ations			1b(6)	×
		_		sts, other assets, or paid			•	1c	×
d				s," complete the follow					
				ces given by the reporte ement, show in column					
(a) Line		b) Amount involved		naritable exempt organization		ription of transfers, trans			
(a) Line	110 (b) Amount involved	(c) Name of Hones	antable exempt organization	(d) Desc	inplion of transfers, trans			
	+								
			· · · · · · · · · · · · · · · · · · ·						
20	la the	foundation dis	actly or indirectly of	filiated with, or related	to one or m	ora tax-avamat a	raanizatione		
Za				ction 501(c)(3)) or in sec		ore tax-exempt o		☐ Ye	s 🗵 No
b			following schedule.						٠٠
		(a) Name of organ		(b) Type of organi	zation	(c) Des	cription of relatio	nship	
							<u> </u>		
	Unde	penalties of perium 1	declare that I have examine	d this return, including accompa	nying schedules and	d statements, and to the b	est of my knowled	ige and b	elief, it is true.
Sign				an taxpayer) is based on all inform				***************************************	s this return
Here) 9	1205/11h		1 11/30/20	Presiden	t	with the p	reparer sh	nown below?
		ature of officer of trus	stee	Date	Title		See instru	ctions 2	Yes ∏No
Paid		Print/Type preparer	's name	Preparer's signature		Date	Check If	PTIN	
Prepa	arer	Stephen C	Corliss	Stephen C Corl	ıss		self-employed		
Use (Firm's name ►	CORLISS & SO			Firm's	EIN ▶ 20-25		
		Firm's address ▶		E ST SUITE #1	VO 20021	Phone			
BAA			ASHEVILLE		NC 28801	•	F	orm 49 ()-PF (2019)

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

Schedule B

(Farm 990, 990-EZ, or 990-PF)

Castelloe Family Foundation

Organization type (check one).

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service

Partment of the Treasury Internal Revenue Service

Part

Employer identification number

56-2148069

•							
Filers o	f:	Section:					
Form 99	0 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF						
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	nly a section 501(c)(7	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See					
Genera	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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special	Rules						
	regulations under set 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½% support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II.					
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-FZ that received from any one he year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
	contributor, during t contributions totaled during the year for a	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, contributions exclusively for religious, charitable, etc., purposes, but no such di more than \$1,000. If this box is checked, enter here the total contributions that were received in exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the less to this organization because it received nonexclusively religious, charitable, etc., contributions ore during the year.					

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule 8 (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 8 (Form 990, 990-FZ, or 990-PF)

Schedule B (10111 990, 990-12) (2019)	rage
Name of organization	Employer identification number
Castelloe Family Foundation	56-2148069

Part I	Contributors (see instructions) Use duplicate co	pies of Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Estate of Paul Edgar Castelloe 251 Jones Cove Rd Asheville NC 28805	\$ 3,991,980.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Description Payroll Description Des
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Moncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

Name of organization
Castelloe Family Foundation

Employer identification number

56-2148069

Part II	Noncash Property (see instructions).	Use duplicate copies	of Part II it 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
		\$	

ratile or or				Employer Identification number				
	loe Family Foundation		,	56-2148069				
Part III	Exclusively religious, charitable, etc.							
				Complete columns (a) through (e) and				
				of exclusively religious, charitable, etc.,				
	contributions of \$1,000 or less for the		nation once Se	e instructions) > \$				
	Use duplicate copies of Part III if add	tional space is needed						
(a) No. from	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held				
Part I	(b) Fulpose of gat	(c) Use or gi	"	(a) Description of now gires held				
}								
Ī		(a) Transfer a						
		(e) Transfer o	gnt					
	Transferee's name, address, an	Relation	ship of transferor to transferee					
Ī								
-								
(a) No.	(b) Diverse and mile	/a\ fa = = 4 = i	44	(d) December of heart with its heart				
from Part I	(b) Purpose of gift	(c) Use of gi	F C	(d) Description of how gift is held				
1		•••••						

Ī	(a) Transfer of 24							
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
Ī								
	•••••••••••••••••••••••••••••••••••••••			·				
(a) No. from	(b) Purpose of gift (c) Use of gift		4	/-! Management to a side in half				
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
			******	***************************************				
	(-) 7							
	(e) Transfer of gift							
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transforee				
Ī	-							

(a) No.	(h) Durnos of sift	(a) 15aa a4	<u></u>	(d) Description of how soft is held				
from Part I	(b) Purpose of gift	(c) Use of gi	1	(d) Description of how gift is held				
İ		***************************************						
r	L_							
		(e) Transfer of	r gift					
	Transferee's name, address, an	d ZIP + 4	Relations	ship of transferor to transferee				
ŀ								
1								
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Form 990-PF: Return of Private Foundation Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.	Contribution, Grant, Gift, Loan, Scholars		Continuation Statement
Name and Address Information	Form Information	Submission Information	Restrictions
Castelloe Family Foundation, Inc c/o Paul E Castelloe Jr 39 Ashley Road Asheville, NC 28805 919-571-8863	Requests must specify the purpose None for which the funds will be used	None	Grantee to furnish periodic accounting to show that the funds were expended for the purposes which were approved by the Board of
			Directors

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Payroll Taxes	3,925.			3,925.
Total	3,925.			3,925.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Continuation Statement

Description		Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Office Expenses		1,160.	0.		1,160.
Information Technology		2,217.			2,217.
Dues, Subscriptions & Literature		2,255.	0.		2,255.
Staff Development		1,000.			1,000.
	Total	6,632.	0.		6,632.

Form 990-PF: Return of Private Foundation

Other Decreases

Continuation Statement

Description	Amount
Stock Sales Losses	5,780.
Foreign Tax	114.
Total	5,894.

Form 990-PF: Return of Private Foundation

Late Filing Explanation

Explanation Statement

Explanation

Dear Sir/Madam:

We are writing to request an abatement of potential late filing penalties being assessed on belhalf of our client, Castelloe Family Foundation. We acknowledge and deeply apologize for the late filing, however due to circumstances caused by the COVID-19 pandemic there was an inability to obtain relevant documents within the appropriate window to allow for a timely filed return.

Again, we sincerely apologize and hope that you will consider the abatement of penalties owed for reasonable cause, as we made a good faith effort to file on time. Please also consider that we have promptly filed and made all other previous payments before the deadline. We are glad to provide any further clarification you may require. Please feel free to contact us at (828) 236-0206. Sincerely,

Corliss & Solomon

Form 990-PF Part II, Lines 6 and 7

Receivables

Name Castelloe Family Foundation	Employer Identification No 56-2148069
Lender Information:	
Loan Receivable Type 4	
Borrowers Name La Esperanza LLC	
Borrower's Title Managing Member	
Check Box, if Borrower is a Business . X	
Relationship of Borrower (Other loans only) NONE	7
Repayment Terms 10 year interest free	
•	balloon
Borrower's Security None	
Purpose of Loan Bridge loan	a 520 Emma Pd
Description of Consideration Property purchase	e 528 Emuna Rd
Original Amount 25,000.	V
Beginning Year Balance 0.	Year End Balance 25,000.
FMV at Year End 25,000.	FMV of Consideration 25,000.
Allowance for Doubtful Accounts(other loans only)	0.
Date of Note 04/15/19 Maturity Date	04/15/29 Interest Rate 0.00
Loan Receivable Type	
Borrowers Name	
Borrower's Title	
Check Box, if Borrower is a Business .	
Relationship of Borrower (Other loans only)	<u> </u>
Repayment Terms	
Borrower's Security	
Purpose of Loan	
Description of Consideration	
Original Amount	
Beginning Year Balance	Year End Balance
FMV at Year End	FMV of Consideration
Allowance for Doubtful Accounts(other loans only)	
Date of Note Maturity Date	Interest Rate
Loan Receivable Type	
Borrowers Name	
Borrower's Title	
Check Box, if Borrower is a Business	
Relationship of Borrower (Other loans only)	
Repayment Terms	
Borrower's Security	
Purpose of Loan	
Description of Consideration	
Original Amount	
Beginning Year Balance	Year End Balance
FMV at Year End	FMV of Consideration
Allowance for Doubtful Accounts(other loans only)	
,	

Name Castelloe Family Foundat	Employer Identification No 56-2148069					
	End o	f Year		End o	f Year	
1 in a 40 a 1 in a salar a salar		,			US Government	
Line 10a - Investments -	State and Local	State and Local	US Govern			
US and State Government	Obligations	Obligations	Obligati	ons	Obligations	
	-	•	_		_	
Obligations:	Book Value	FMV	Book Va	aiue	FMV	
						
	•					
<u></u>						
Tot to Fm 990-PF, Pt II, Ln 10a						
· · · · · · · · · · · · · · · · · · ·						
				End o	f Year	
Line 10b - Investme	ente - Cornorate	Stock:	Book	,	Fair Market	
Line Tob - investing	ents - Corporate	Stock.		•		
			Value	•	Value	
		. –				
Altein Commun Ton			366	024	240 270	
Altria Group Inc				924.	349,370.	
American Express Co			124,	010.	124,490.	
Bank of America Corp				271.	556,476.	
See L-10b Stmt			1,820,		2,220,618.	
Totals to Form 990-PF, Part II, L	.ine 10b		2,660,	902.	3,250,954.	
			End of Year			
Line 10c - Investme	nts - Corporate I	Bonds:	Book		Fair Market	
2	o co.porato.	3011401				
			Value	•	Value	
		···				

Totals to Form 990-PF, Part II, L	ine 10c					
			Ļ			
				F- 1	(
				End o		
Line 12 - Investme	ents - Mortgage I	oans:	Book	(Fair Market	
			Value		Value	
			Value	•	Value	
						
Totals to Form 990-PF, Part II, L	ino 12					
Totals to Form 990-PF, Part II, L						
					· · · · · · · · · · · · · · · · · · ·	
						
				End o	f Vaar	
					1	
Line 13 - Inve	estments - Other:	:	Book	(Fair Market	
			Value		Value	
			4 aiue	•	10100	
	· · · · · · · · · · · · · · · · · · ·					
Totals to Form 990-PF, Part II, L	ine 13					
- ivala w i vin Javer, raft II. L						

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF: Return of Private Foundation

Line 1(a)

Itemization Statement

Description		Amount	
Transfers In - Schwab Treasury Bonds		1,322,611.	
Transfers In - Schwab Stock Equities		1,617,084.	
Transfers In - Schwab Stock Equities		1,052,285.	
	Total	3,991,980.	

Form 990-PF Part II Line 10, 12 and 13 Investments

L-10b Stmt

Continuation Statement

Line 10b Description	Line 10b Book	Line 10b FMV
Boston Scientific Co	419,350.	452,200.
Charles Schwab Corp	40,335.	47,560.
Chesapeake Energy Co	3,799.	1,651.
Duke Energy Co	5,776.	15,141.
Fifth Third Bancorp	219,040.	245,920.
Freeport-McMoran Inc	30,185.	26,240.
Keycorp Inc	305,029.	384,560.
Morgan Stanley	87,060.	102,240.
Nike Inc	333,130.	405,240.
Pfizer Inc	52,092.	47,016.
Philip Morris Intl	143,473.	170,180.
Teck Resources Ltd	73,942.	69,480.
Truist Financial Corp	72,077.	112,640.
Wabtec	736.	778.
Waste Management Inc	14,780.	113,960.
Wells Fargo Bk NA	9,238.	10,706.
Western Digital Corp	10,655.	15,106.
Tota	1,820,697.	2,220,618.