Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2019
Open to Public Inspection

Fo	r calen	dar year 2019 or tax year beginning		9, and ending		, 20
Na	ne of fou	ndation		A Employe	er identification numbe	er
N	CFI/B	ARNHARDT FOUNDATION ////		56-6	068247	
Nu	mber and	street (or P O box number if mail is not delivered to street address)	Room	/suite B Telephoi	ne number (see instruct	ions)
Р	O. B	OX 34276		(704)376-0380	
City	or town	state or province, country, and ZIP or foreign postal code			tion application is pend	ing check here
		TTE NC 28234-4276		O il exemp	don application is pend	ing, check here
_			of a former public	chartty B 4 5		
u	Cileck			Charity D 1. Foreig	n organizations, check	here . ▶ 🛄
			-		n organizations meeting	
λ 	- CI - I	<u></u>			here and attach compu	
ΛH		type of organization: Section 501(c)(3) exempt p			foundation status was 507(b)(1)(A), check here	
ᆜ		n 4947(a)(1) nonexempt charitable trust		allori	or (b)(I)(A), clieck liefe	
ı		narket value of all assets at J Accounting method	: 🔀 Cash 📙 A		indation is in a 60-mont	h termination
		f year (from Part II, col. (c), Other (specify)	••••	under se	ction 507(b)(1)(B), chec	k here ▶ [_]
_	line 16	·	e on cash basis.)			
Li	art	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) Not invoctment	(a) Adjusted not	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net investment income	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions).)	DOOKS			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	171,891.		· ·	1
	2	Check ► ☐ if the foundation is not required to attach Sch. B				<u> </u>
	3	Interest on savings and temporary cash investments				Ī
	4	Dividends and interest from securities	216,579.	216,579.		Ī
	5a	Gross rents				i i
	b	Net rental income or (loss)	•			
ø)		Net gain or (loss) from sale of assets not on line 10	1		-	
Revenue	b	Gross sales price for all assets on line 6a			 	
ē	7	Capital gain net income (from Part IV, line 2)		688,742.	 	
ě	8	Net short-term capital gain		000,142.	0.	
_	9				0.	
		Income modifications				
	10a					
	b	Less: Cost of goods sold				
,	C	Gross profit or (loss) (attach schedule)				
,	11	Other income (attach schedule) See . Stmt	150.	205 201		
·	12	Total. Add lines 1 through 11	388,620.	905,321.	0.	<u></u>
S	13	Compensation of officers, directors, trustees, etc.				
cpenses	14	Other employee salaries and wages				
ē	15	Pension plans, employee benefits				
		Legal fees (attach schedule)				
٥	b	Accounting fees (attach schedule)				
:≥	C	Other professional fees (attach schedule) L-16c .Stmt	43,522.	43,522.		
Ē	17	Interest				
ĬŠ.	18	Taxes (attach schedule) (see instructions) See. Stmt	2,010.	2,010.		
ı <u>i</u>	19	Depreciation (attach schedule) and depletion				1
Operating and Administrative Ex	20	Occupancy				
7	21	Travel, conferences, and meetings				
Ě	22	Printing and publications				
Ö	23	Other expenses (attach schedule) See.Stmt .	50.	50.		
멽	24	Total operating and administrative expenses.				
ē	1	Add lines 13 through 23	45,582.	45,582.		
ğ	25	Contributions, gifts, grants paid	473,200.			
O	26	Total expenses and disbursements. Add lines 24 and 25	518,782.	45,582.		
_	27	Subtract line 26 from line 12:			 	ī
	a	Excess of revenue over expenses and disbursements	-130,162.			
	Ь	Net investment income (if negative, enter -0-) .	130,102.	859,739.	 	i
	C	Adjusted net income (if negative, enter -0-)			0.	
	┷	· · · · · · · · · · · · · · · · · · ·		L	<u> </u>	<u> </u>

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Pá	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d of year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
'	2	Savings and temporary cash investments	166,055.	186,239	. 186,239.
	3	Accounts receivable ▶	5, , - 2, -, 2, -	, s 4 V A.	
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	1		
		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 ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)	3,197,745.	3,436,091	. 3,436,091.
	b	Investments—corporate stock (attach schedule)	4,597,118.	5,556,063	
	С	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)			
	14	Land, buildings, and equipment: basis ▶			. 1
		Less. accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►			
i	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item l)	7,960,918.	9,178,393	. 9,178,393.
	17	Accounts payable and accrued expenses			
(C)	18	Grants payable	-		
Ē.	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1
jat	21	Mortgages and other notes payable (attach schedule)			"
_	22	Other liabilities (describe ▶)			, 1
	23	Total liabilities (add lines 17 through 22)			
S		Foundations that follow FASB ASC 958, check here			
Balances		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions			
Bã	25	Net assets with donor restrictions			
Net Assets or Fund		Foundations that do not follow FASB ASC 958, check here ▶ 🗵			. 1
Ē		and complete lines 26 through 30.			
ō	26	Capital stock, trust principal, or current funds	7,960,918.	<u>9,</u> 178,393	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
se	28	Retained earnings, accumulated income, endowment, or other funds			
As	29	Total net assets or fund balances (see instructions)	7,960,918.	9,178,393	
et	30	Total liabilities and net assets/fund balances (see			
		instructions)	7,960,918.	9,178,393	<u>, </u>
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colu			
		-of-year figure reported on prior year's return)			
2					
3		er increases not included in line 2 (itemize) FMV ADJUSTMEN			
4		lines 1, 2, and 3		4	
5		reases not included in line 2 (itemize) ▶	<u></u>	5	
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 29 6	9,178,393.

Par	IV Capital Gains and L	osses for Tax on Investmen	t Income			
	(a) List and describe the kind(s	s) of property sold (for example, real estate or common stock, 200 shs. MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr)	d (d) Date sold (mo , day, yr)
1a	CAPITAL GAIN DISTRIB	UTIONS		P	Various	12/31/2019
b	SEE ATTACHED SCHEDUL	E		P	Various	Various
<u>c</u>						
<u>d</u>						
<u> e</u>				L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		Gain or (loss) lus (f) minus (g))
<u>a</u>	53,455.			0.		53,455.
<u>b</u>	1,349,222.			713,935.		635,287.
<u>c</u>						
d						
е	Complete only for poorts above	and a column (b) and according to	h a far malak a a	10/01/00		
	Complete only for assets snowin	ng gain in column (h) and owned by the				(Col. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t not less than -0-) or es (from col. (h))
<u>a</u>	0.	0.		0.		53,455 <u>.</u>
<u>b</u>	0.	0.		0.	<u>.</u>	635,287 <u>.</u>
<u>c</u>						
d						
e					· · · · · · · · · · · · · · · · · · ·	
2	Capital gain net income or (r	iei Cabital 1088i 🔞 💮	enter in Pa			
		, , ,	ter -0- ın Pa	· · · · · ·	2	688,742.
3	If gain, also enter in Part I,	or (loss) as defined in sections 12: line 8, column (c). See instructio	ns. If (loss)		_	
		 		<u></u> . <u>! </u>	3	
Par	Qualification Under	Section 4940(e) for Reduce	d Tax on N	let investment	Income	
Was		ction 4942 tax on the distributable		• •	pase period?	☐ Yes 🏿 No
1		alify under section 4940(e). Do no nt in each column for each year; s			akına any entri	
<u>-</u> '-	(a)		T T T T T T T T T T T T T T T T T T T		aking any entri	es. (d)
Cal	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use as	ssets (col	Distribution ratio (b) divided by col (c))
	2018	384,676.		8,330,2		0.046178
	2017	545,295.		8,150,8		0.066901
	2016	304,350		7,536,4		0.040384
	2015	276,050		7,289,3		0.037870
	2014	251,600	<u>- </u>	7,265,7	57.	0.034628
2	Total of line 1, column (d)				. 2	0.225961
3	Average distribution ratio for	r the 5-year base period—divide	the total on	line 2 by 5.0, or	· by	
	the number of years the four	ndation has been in existence if le	ess than 5 ye	ears	3	0.045192
4	Enter the net value of nonch	aritable-use assets for 2019 from	Part X, line	5	. 4	8,662,082.
5	Multiply line 4 by line 3 .				1 - 1	391,457 <u>.</u>
					. 5	
6	Enter 1% of net investment i	income (1% of Part I, line 27b)			. 6	
6 7						8,597. 400,054.
	Add lines 5 and 6	income (1% of Part I, line 27b)			. 6	8,597.

3

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	ee inst	ructio	ns)			
1a`	Exempt operating foundations described in section 4940(d)(2), check here ▶□ and enter "N/A" on line 1.)	,			7		
,	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	_			╛		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		8,	597.	_		
	here ► 🗵 and enter 1% of Part I, line 27b				Ī		
С	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-)	.		0.			
3	Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		8,	597.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	-	Ω	<u>0.</u> 597.	_		
6	Credits/Payments:	+	• • •	391.	7		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 3,526.				1		
b	Exempt foreign organizations—tax withheld at source	-			1		
C	Tax paid with application for extension of time to file (Form 8868) 6c	İ					
d	Backup withholding erroneously withheld	İ			1		
7	Total credits and payments. Add lines 6a through 6d		3	526.	.1		
8	Enter any penalty for underpayment of estimated tax. Check here				-		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		5	071.	-		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			0.	_		
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 0 . Refunded ▶ 11			<u> </u>	_		
Part	VII-A Statements Regarding Activities	<u></u>			_		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it	Yes	No	_		
	participate or intervene in any political campaign?	1a		×	_		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	he 🗍		×	-		
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any material published or distributed by the foundation in connection with the activities.				Ī		
c	Did the foundation file Form 1120-POL for this year?	10	_	- -	7		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10	<u> </u>	 ^	7		
_	(1) On the foundation. ► \$ (2) On foundation managers. ► \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-			1		
_	on foundation managers. ► \$	'			1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	×	7		
	If "Yes," attach a detailed description of the activities.				Ī		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	es	-	×]		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	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	-	X	- 1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	-			1		
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions th	at			ı		
	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 >	(V 7	×		-		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ NC			,	Ī		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener	 'al					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×		<i>-</i>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of	or			ر ا		
	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 the names and addresses			×			

Part	VII-A Statements Regarding Activities (continued)			
•			Yes	No
. 11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of 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	40		
13	person had advisory privileges? If "Yes," attach statement. See instructions	12	×	×
	Website address ► N/A		_~	—
14	The books are in care of ▶ BRAGG FINANCIAL ADVISORS, INC. Telephone no. ▶ (704)	377 –	0261	·
	Located at ▶ 1031 S. CALDWELL ST., STE. 200 CHARLOTTE NC ZIP+4 ▶ 28203			
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		Yes	Na
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Tes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	10	L	
	the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	,		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		×
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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 2019?	1c		
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)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		İ	
	6d and 6e) for tax year(s) beginning before 2019?	3		
h	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	(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		×
С	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?	١.		
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			
	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			
_	foundation had excess business holdings in 2019.)	3b	<u> </u>	-
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		X
D	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		×

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Par	VIE: Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	Require	ed (contil	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt			on (sec	tion 4945(e))?	Yes	⊠ No	,		
	(2) Influence the outcome of any specific public	c electi	on (see sect	ion [`] 495	55); or to c	<i></i> arrv on					
	directly or indirectly, any voter registration di	ıve?					Yes	⊠ No	,		٠ أ
	(3) Provide a grant to an individual for travel, stu	ıdv. or	other similar	purpos	es?			⊠ No	i .		
	(4) Provide a grant to an organization other than										1
	section 4945(d)(4)(A)? See instructions							⊠ No	.		
	(5) Provide for any purpose other than religious							<u> </u>			
	purposes, or for the prevention of cruelty to							X No	.		
b	If any answer is "Yes" to 5a(1)-(5), did any of the										ĺ
	in Regulations section 53.4945 or in a current no								5b		
	Organizations relying on a current notice regardi		-					▶□			1
С	If the answer is "Yes" to question 5a(4), does t							- 🗆	' I I		1
	because it maintained expenditure responsibility							□No			1
	If "Yes," attach the statement required by Regula						□ 163				Ì
6a	Did the foundation, during the year, receive any					emiums	:				- {
	on a personal benefit contract?						□Yes	X No			l
b	Did the foundation, during the year, pay premiun							_	6b		'
	If "Yes" to 6b, file Form 8870.	•	,	, ,				•			1
7a	At any time during the tax year, was the foundation	a party	to a prohibite	ed tax s	helter trans	action?	Yes	⊠ No		.	j
b	If "Yes," did the foundation receive any proceed								7b		
8	Is the foundation subject to the section 4960 ta	x on pa	ayment(s) of i	more t	han \$1,000	0,000 in	1				1
	remuneration or excess parachute payment(s) de							☐ No			
Par	VIII Information About Officers, Direct	tors, 1	Trustees, F	ounda	tion Man	agers,	Highly F	aid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found								· .		
	(a) Name and address		e, and average rs per week		mpensation not paid,		Contribution: byee benefit		(e) Expe	nse acc	ount,
			ed to position		ter -0-)		erred compe		other a	allowan	ces
	PH FALERO	TRUS				İ					
1100	HAWTHORNE AVENUE CHARLOTTE NC 28205		3.00		0.			0.			0.
		-									
						1					
2	Compensation of five highest-paid employee	es (oth	er than thos	e incl	uded on li	ne 1 —	see instr	uctions	e) If no	200	nter
-	"NONE."	- ,			 !!				-,		
		_	(b) Title, and a	Werses			(d) Contribu	rtions to			
	(a) Name and address of each employee paid more than \$50,00	10	hours per w	/eek Č	(c) Compe	nsation	employee plans and c	benefit leferred	(e) Exper	nse acc	
			devoted to po	osition			compens		0		
NONE			-								
						- · <u> </u>				-	
Total	number of other employees paid over \$50,000.							. >	0	n_DE	

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3 Five h	ighest-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
NONE		
•		
T-A-1	Φ50 000 for a reference and a	<u> </u>
	r of others receiving over \$50,000 for professional services]0
Part IX-A	Summary of Direct Charitable Activities	T
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 NONE		
NONE		
		0
2		
	······································	
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		0.
All other prod	gram-related investments. See instructions	
3		
-		
Total. Add lir	nes 1 through 3	0.
		Form 990-PF (2019

BAA

Part	see instructions.)	ign toi	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes:		9 603 406
а	Average monthly fair market value of securities	1a	8,693,406.
b	Average of monthly cash balances	1b	100,586.
C	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	8,793,992.
е	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	8,793,99 <u>2.</u>
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	<u>131,91</u> 0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	<u>8,662,082.</u>
6	Minimum investment return. Enter 5% of line 5	6	433,104.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	433,104.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	8,597.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	424,507.
4	Recoveries of amounts treated as qualifying distributions	4	150.
5	Add lines 3 and 4	5	424,657.
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	424,657.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	II	
· a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	473,200.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	· · ·	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	473,200.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		1,3,200.
-	Enter 1% of Part I, line 27b. See instructions	5	8,597.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	464,603.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	ــــــــــــــــــــــــــــــــــــــ	
	qualifies for the section 4940(e) reduction of tax in those years	9 WILE	mer the loundation

Part	VIII Undistributed Income (see instruction	ons)			
-		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				424,657.
2	Undistributed income, if any, as of the end of 2019:				424,037.
а	Enter amount for 2018 only			174,884.	
b	Total for prior years: 20 , 20 , 20			21170011	
3	Excess distributions carryover, if any, to 2019:	·			
а	From 2014 0 .				
b	From 2015 0.	1			
С	From 2016 0 .	1 ,			
d	From 2017	1		-	
е	From 2018 0.			ρ Τ	
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$ 473, 200.				
а	Applied to 2018, but not more than line 2a .			174,884.	
b	Applied to undistributed income of prior years (Election required—see instructions)				
c	Treated as distributions out of corpus (Flection required—see instructions)			٠.	
d	Applied to 2019 distributable amount				298,316.
e	Remaining amount distributed out of corpus	υ.	1.5 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	0.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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				126,341.
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)		e e gan		Par o .
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:	<u></u>			
а	Excess from 2015 0 .			_	1
b	Excess from 2016 0.	-	1	•	
С	Excess from 2017 0 .				•
d	Excess from 2018 0 .	}			
е	Excess from 2019 0 .				,

	90-PF (2019)					Page 10
Part 1a	If the foundation has received a rulin foundation, and the ruling is effective for	g or determination	letter that it is a	a private operating		N/A
Ь	Check box to indicate whether the four					(0)
2a	Enter the lesser of the adjusted net	Tax year	e operating tourid	Prior 3 years	section	(3) or 🔲 4942(j)(5 I
	income from Part I or the minimum investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	each year listed					
b	85% of line 2a				d d	
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	<u> </u>	/			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) .					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income	17				- '
Part	• • • • • • • • • • • • • • • • • • • •			the foundation	had \$5,000 or m	ore in assets at
	any time during the year-		ns.)			
	Information Regarding Foundation List any managers of the foundation before the close of any tax year (but on N/A)	who have contribu	uted more than 2 ontributed more t	% of the total con than \$5,000). (See	tributions received section 507(d)(2).)	by the foundation
	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporation	on (or an equally la	rge portion of the
	ownership of a partnership or other e					.go portion or 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 controundation makes	ributions to pres	elected charitable	organizations and organizations under	does not accept other conditions
а	The name, address, and telephone no		dress of the person	on to whom applic	ations should be ac	ldressed:
b	The form in which applications should	d be submitted and	d information and	materials they sho	ould include:	
С	Any submission deadlines:		-			

Form **990-PF** (2019)

factors:

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

Part XV Supplementary Information (continued)

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

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	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	Contribution					
a Paid during the year								
PROVIDENCE MINISTRIES	NONE							
711 S. HAMILTON ST		PUBLIC						
DALTON GA 30720		CHARITY	GENERAL SUPPORT	300.				
ARTS & SCIENCE COUNCIL	NONE							
P.O. BOX 602720		PUBLIC						
CHARLOTTE NC 28260		CHARITY	GENERAL SUPPORT	5,000.				
KAY YOW CANCER FUND	NONE							
5121 KINGDOM WAY, STE. 305		PUBLIC		ļ				
RALEIGH NC 27607			GENERAL SUPPORT	500.				
COVENANT PRESBYTERIAN CHURCH	NONE							
1000 EAST MOREHEAD ST		PUBLIC						
CHARLOTTE NC 28204		ł	GENERAL SUPPORT	50,000.				
MENS SHELTER OF CHARLOTTE	NONE		CENERAL SOLICICI					
P.O. BOX 36471	1.01.2	PUBLIC						
CHARLOTTE NC 28236			GENERAL SUPPORT	1,000.				
GOODWILL INDUSTRIES OF SOUTHERN PIEDMONT	NONE		CENTRIE BOTTON	1,000.				
P.O. BOX 668768	NONE	PUBLIC						
CHARLOTTE NC 28266			GENERAL SUPPORT	1,000.				
JOHNSON C SMITH UNIVERSITY	NONE	CHARTIT	GENERAL SOLLOKI	1,000.				
100 BEATTIES FORD ROAD	NONE	PUBLIC						
CHARLOTTE NC 28216		I.	GENERAL SUPPORT	5,000.				
NORTH CAROLINA CHAMBER FOUNDATION	NONE	CIMITI	GENERAL SOFFORT] 3,000.				
701 CORPORATE CENTER DRIVE, STE. 400	NONE	PUBLIC		ļ				
RALEIGH NC 27607			GENERAL SUPPORT	5,000.				
NC CHARTER EDUCATIONAL FOUNDATION	NONE	CHARIII	GENERAL SUPPORT	3,000.				
	INONE	DIIDI TO						
154 FOUNDATION COURT		PUBLIC	CENEDAL CUDDODE	2 000				
MOORESVILLE NC 28817		CHARITY	GENERAL SUPPORT	2,000.				
See Statement								
				402 400				
		,		403,400.				
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	473,200.				
b Approved for future payment				1 2 3 7 2 3 3 4				
b / pp/evea for latare payment								
				İ				
	•							
•				·				
· ·								
]					
Tatal	l	L	<u> </u>	 				
Total	<u> </u>	<u> </u>	▶ 3b	<u>'</u>				

	gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 51 <u>3,</u> or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1	Program service revenue:			 		
	a			 		 -
	b			+		
	d			 		
	<u> </u>			1		
	e			+		
	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	216,579.	
5	Net rental income or (loss) from real estate:	, "		1: 7	210/0/5	
-	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			18	688,742.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	С					
	d					
	e					
12	Subtotal. Add columns (b), (d), and (e)				905,321.	
40	- 4 1 4 1 1 1 4 4 1 4 1 4 1 4 1 4 1 4 1					
	Total. Add line 12, columns (b), (d), and (e)				13	905,321.
See	worksheet in line 13 instructions to verify calculation	s.)			13	905,321.
See Par	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
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See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		
See Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplish m	ent of Exemp	ot Purposes		mportantly to the

Part	XVII	ιητοrmaτιο Organizati		nsters to and	Transaction	ns and F	lelationships With	n Nonchai	ritable	e Exe	mpt
. 1	Did t	he organization of	directly or indirectly	engage in any	of the followin	g with an	y other organization	described		Yes	No
	in se	ection 501(c) (c nizations?	ther than section	501(c)(3) orga	anızatıons) or	in secti	on 527, relating to	o political			
а			porting foundation t								
									1a(1)		×
	• •	ther assets .							1a(2)		×
b		r transactions:									
									1b(1)		×
									1b(2)		_×_
			, equipment, or othe						1b(3)		×
			rrangements						1b(4)	$\overline{}$	<u>×</u>
			rantees						1b(5)	-	<u> </u>
									1b(6)		<u>×</u>
C	Snari	ng of facilities, e	quipment, mailing li	sts, other asset	is, or paid emp	oloyees	<u> </u>		1c		×
d	if the	answer to any	of the above is "Ye	s," complete th	ne following so	chedule.	Column (b) should a	ilways show	v the	fair m	arket
	value	un anv transacti	iner assets, or serv	ices given by tr	ne reporting to	undation.	If the foundation re f the goods, other as	ceived less	tnan	tair m	arkei
(a) Line	-	(b) Amount involved		hantable exempt or			iption of transfers, transac				
(0) 2.110	,,,,	b) / tillount intolved	(o) Haric of Horic	mantable exempt on	gamzation	(u) Desci	ipuon oi transiers, transac	tions, and sna	ring arra	angeme	
							· · · · · ·		-		
				<u> </u>							
				-			.				
		-									-
											
					-		· · · · · · <u></u>		-		
								-			
			<u> </u>								
			 								
2a	Is the	e foundation dire	ectly or indirectly a	ffiliated with, o	r related to, o	one or m	ore tax-exempt orga	anizations			
	desci	ribed in section 5	01(c) (other than se	ection 501(c)(3))	or in section 5	527? .			☐ Ye	s 🗵	No
b	If "Ye		following schedule	,	<u> </u>						
		(a) Name of organi	zation	(b) Typ	e of organization		(c) Descrip	otion of relation	ship		
			 								
							- ··				
				<u> </u>	 						
	Unde	r nenalties of periun. I	declare that I have examine	ed this return, includin	a accompanying s	chodulos and	statements, and to the best	of my knowled	go ond b	action in	in true
Sign	qorre	ct, and complete Decl	aration of preparer (other th	an taxpayer) is based	on all information of	of which prep	arer has any knowledge.				
Here		Zala V -	→ 0	14 17	TRI	TOMOR		May the IF with the pr			
. 1616		ature of officer or trus	stee	Date	Trtle	JSTEE	·-	See instruc	tions [X]Yes[]No
	1 9	Print/Type preparer		Preparer's signat			Date		TIN		
Paid		., , ,		ALLA	M.Carre	on (PPA		leck if If		00041	2
Prepa		Dawn M. Ca Firm's name ▶	nnon, CPA BRAGG FINANC	TAI. ADVISO		1,011		v ► 56-17			<u> </u>
Use (חוט	Firm's address >	1031 S. CALD		STE. 200		Phone no				
BAA		0 0001000	CHARLOTTE	OI.,,	NC	28203	1 Friorie no		m 99		(2019)

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Fait Av, Line 3a. Grants and Contributions Faid During the Year Continuation					
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
a Paid during the year					
CHARLOTTE RESCUE MISSION P.O. BOX 33000	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	
CHARLOTTE, NC 28233					
CHARLOTTE LATIN SCHOOL 9502 PROVIDENCE ROAD	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000.	
CHARLOTTE, NC 28277					
YOUNG LIFE P.O. BOX 327	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	
MOUNT AIRY, NC 27030	1				
N. MYRTLE BEACH RESCUE SQUAD P.O. BOX 555 N. MYRTLE BEACH, SC 29597	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250.	
MOUNT AIRY MUSEUM OF REGIONAL HISTORY	NONE	PUBLIC	CENEDAL CURRORS	3,500.	
301 NORTH MAIN STREET MOUNT AIRY, NC 27030	NONE	CHARITY	GENERAL SUPPORT	3,300.	
REEVES COMMUNITY CENTER	NONE	PUBLIC	GENERAL SUPPORT	2,500.	
P.O. BOX 70 MOUNT AIRY, NC 27030		CHARITY		-,	
SURRY COMMUNITY COLLEGE 630 S MAIN STREET DOBSON, NC 27017	NONE	PUBLIC CHARITY	GENERAL SUPPORT	6,650.	
SURRY COUNTY EDF 201 TECHNOLOGY LANE MT AIRY, NC 27030	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000.	
YOKEFELLOW MINISTRY 215 JONES SCHOOL ROAD MT AIRY, NC 27030	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500.	
PAULA TAKACS FOUNDATION FOR SARCOMA RESEARCH P.O. BOX 78416 CHARLOTTE, NC 28271	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	
HABITAT FOR HUMANITY P.O. BOX 6449 Mount Airy, NC 27030	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500.	
UNITED WAY OF NORTHWEST GEORGIA P.O. BOX 566 DALTON, GA 30722	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,500.	
UNITED WAY OF SALT LAKE 257 E 200 SOUTH, STE. 300 SALT LAKE CITY, UT 84111	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,500.	
JUVENILE DIABETES FOUNDATION 205 REGENCY EXECUTIVE DRIVE Charlotte, NC 28217	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	
COLRAIN CENTRAL SCHOOL 22 JACKSONVILLE ROAD COLRAIN, MA 01340	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	
MOHAWK TRAIL HIGH SCHOOL 26 ASHFIELD ROAD SHELBURNE FALLS, MA 01370	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	
COLRAIN VOLUNTEER FIRE DEPT. 51 MAIN ROAD COLRAIN, MA 01340	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.	

Part XV, Line 3a: Grants and Contributions Paid During the Year

art AV, Line 3a. Grants and Contributions Faid During the Tear			Continuat	Continuation Statement		
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
a Paid during the year			· 			
ALLEGRO FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	500.		
419 ARDMORE ROAD		CHARITY				
Charlotte, NC 28209						
HOSPICE OF SURRY & YADKIN COUNTY	NONE	PUBLIC	GENERAL SUPPORT	2,000.		
401 TECHNOLOGY LANE, STE. 200		CHARITY		·		
MT AIRY, NC 27030						
NATIONAL FIRE SAFETY COUNCIL	NONE	PUBLIC	GENERAL SUPPORT	150.		
1218 STATE STREET		CHARITY				
MOUNT AIRY, NC 27030						
SALVATION ARMY OF MT AIRY	NONE	PUBLIC	GENERAL SUPPORT	5,500.		
651 S MAIN STREET		CHARITY		.,		
MT AIRY, NC 27030						
SURRY ARTS COUNCIL	NONE	PUBLIC	GENERAL SUPPORT	40,000.		
P.O. BOX 141		CHARITY		,		
MT AIRY, NC 27030						
BOYS AND GIRLS HOMES OF NC	NONE	PUBLIC	GENERAL SUPPORT	1,500.		
P.O. BOX 127		CHARITY		2,000		
LAKE WACCAMAW, NC 28450						
CHILDRENS CENTER OF SURRY	NONE	PUBLIC	GENERAL SUPPORT	2,000.		
P.O. BOX 692		CHARITY		_,		
DOBSON, NC 27017						
SURRY MEDICAL MINISTRIES CLINIC	NONE	PUBLIC	GENERAL SUPPORT	2,500.		
P.O. BOX 349		CHARITY		-,		
MT AIRY, NC 27030						
GEORGIA SPECIAL OLYMPICS	NONE	PUBLIC	GENERAL SUPPORT	500.		
6046 FINANCIAL DRIVE		CHARITY				
NORCROSS, GA 30071						
THE SALVATION ARMY	NONE	PUBLIC	GENERAL SUPPORT	1,000.		
P.O. BOX 241506		CHARITY		,		
CHARLOTTE, NC 28224		1				
CRISIS ASSISTANCE MINISTRY	NONE	PUBLIC	GENERAL SUPPORT	5,000.		
500-A SPRATT STREET		CHARITY	ŀ			
CHARLOTTE, NC 28206						
FRIENDSHIP TRAYS	NONE	PUBLIC	GENERAL SUPPORT	5,000.		
2401-A DISTRIBUTION STREET	-	CHARITY				
CHARLOTTE, NC 28203						
LOAVES AND FISHES	NONE	PUBLIC	GENERAL SUPPORT	500.		
648 B GRIFFITH NROAD		CHARITY				
CHARLOTTE, NC 28217						
SECOND HARVEST FOOD BANK OF METROLINA	NONE	PUBLIC	GENERAL SUPPORT	1,000.		
500-B SPRATT STREET		CHARITY				
CHARLOTTE, NC 28206						
UNITED WAY OF CENTRAL CAROLINAS	NONE	PUBLIC	GENERAL SUPPORT	25,000.		
301 S. BREVARD STREET		CHARITY				
CHARLOTTE, NC 28202						
UNITED FUND OF SURRY	NONE	PUBLIC	GENERAL SUPPORT	30,000.		
P.O. BOX 409		CHARITY				
MT AIRY, NC 27030		<u></u>				
COLRAIN PRE SCHOOL	NONE	PUBLIC	GENERAL SUPPORT	1,000.		
22 JACKSONVILLE ROAD		CHARITY				
COLRAIN, MA 01340						

Part XV, Line 3a: Grants and Contributions Paid During the Year

,	thono raid baring th			ion otalement
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year		<u> </u>		
BOY SCOUTS OF AMERICA	NONE	PUBLIC	GENERAL SUPPORT	17,500.
6600 SILAS CREEK PARKWAY		CHARITY		
WINSTON-SALEM, NC 27106			1	
GREATER MT AIRY MINSTRY OF HOSPITALITY	NONE	PUBLIC	GENERAL SUPPORT	2,000.
P.O. BOX 1722	1110112	CHARITY	GENERAL SOLIONI	2,000.
MT. AIRY, NC 27030				
YMCA OF GREATER CHARLOTTE	NONE	PUBLIC	GENERAL SUPPORT	2,000.
400 EAST MOREHEAD STREET	I I I I I I I I I I I I I I I I I I I	CHARITY	GENERAL SOFFORT	2,000.
CHARLOTTE, NC 28202				
CORD OF 3 STRANDS	NONE	DUDI TO	CENEDAL CURRORS	1 000
P.O. BOX 12562	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
CHARLOTTE, NC 28209		CHARTI		
YMCA OF GREATER CHARLOTTE CAMP THUNDERBIRD				
ONE THUNDERBIRD LANE	NONE	PUBLIC	GENERAL SUPPORT	50,000.
LAKE WYLIE, SC 29710		CHARITY		
FIRST PRESBYTERIAN CHURCH OF MT AIRY	LIONE -	D.::D.T. T.G.		
P.O. BOX 1286	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
MT AIRY, NC 27030		CHARIII		
SURRY COUNTY AMERICAN RED CROSS				
	NONE	PUBLIC	GENERAL SUPPORT	6,000.
844 WESTLAKE DRIVE		CHARITY		
MT AIRY, NC 27030				
ALEXANDER YOUTH NETWORK	NONE	PUBLIC	GENERAL SUPPORT	1,000.
6220 THERMAL ROAD		CHARITY		
CHARLOTTE, NC 28211				
UNC MEDICAL FOUNDATION OF NC/CASTLE PROGRAM	NONE	PUBLIC	GENERAL SUPPORT	25,000.
123 W. FRANKLIN ST		CHARITY		
CHAPEL HILL, NC 27514				
N.C. SPECIAL OLYMPICS	NONE	PUBLIC	GENERAL SUPPORT	750.
2200 GATEWAY CENTRE BLVD.		CHARITY		
MORRISVILLE, NC 27560				
CHARLOTTE COMMUNITY HEALTH CLINIC	NONE	PUBLIC	GENERAL SUPPORT	1,000.
8401 MEDICAL PLAZA DRIVE, STE. 300		CHARITY		
Charlotte, NC 28262				
HOSPICE & PALLIATIVE CARE	NONE	PUBLIC	GENERAL SUPPORT	5,000.
1420 EAST SEVENTH ST.		CHARITY		
CHARLOTTE, NC 28204				
UNC DENTAL FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	25,000.
1000 FIRST DENTAL BUILDING		CHARITY		20,000
CHAPEL HILL, NC 27514				
	NONE	PUBLIC	GENERAL SUPPORT	1,500.
4350 N FAIRFAX DR., STE. 220		CHARITY	GENERAL GOLLOKI	1,500.
ARLINGTON, VA 22203				
THE LITERACY PROJECT	NONE	PUBLIC	CEMEDAL CUDDODE	1 000
15 BANK ROW, SUITE C	NONE	CHARITY	GENERAL SUPPORT	1,000.
GREENFIELD, MA 01301	\			
HOPE WAY FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	5,000.
6801 FAIRVIEW ROAD, STE. D		CHARITY	 	
CHARLOTTE, NC 28210				
LENOIR COMMITTEE OF 100, INC.	NONE	PUBLIC	GENERAL SUPPORT	1,000.
P.O. BOX 2220		CHARITY		
KINSTON, NC 28501				

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

	Tud During the	· · · · · · · · · · · · · · · · · · ·		CIOII Statement
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year		•		
BETHLEHEM CENTER OF CHARLOTTE 2702 NORFOLK AVENUE CHARLOTTE, NC 28203	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
RIGHT MOVES FOR YOUTH				
2211 W MOREHEAD ST #102 CHARLOTTE, NC 28208	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500.
THE GARRETT TORNEY FOUNDATION P.O. BOX 187	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500.
SUMMERFIELD, NC 27358 UNITED WAY OF FRANKLIN COUNTY 51 DAVIS STREET	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000.
GREENFIELD, MA 01301				
YMCA OF CHARLOTTE - CAMP THUNDERBIRD ONE THUNDERBIRD LANE LAKE WYLIE, SC 29710	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,600.
VETERANS BRIDGE HOME 2200 EAST 7TH ST CHARLOTTE, NC 28204	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000.
CHILDREN'S HOPE ALLIANCE P.O. BOX 1	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,500.
BARIUM SPRINGS, NC 28010 CHARLOTTE FAMILY HOUSING 300 HAWTHORNE LANE	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000.
CHARLOTTE, NC 28204 GREATER ENRICHMENT PROGRAM P.O. BOX 16188	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
CHARLOTTE, NC 28297 YMCA OF GREATER CHARLOTTE - JOHNSTON NIGHT OUT 400 EAST MOREHEAD ST CHARLOTTE, NC 28202	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000.
DILWOTH CENTER 2240 PARK ROAD CHARLOTTE, NC 28203	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
CROSSNORE P.O. BOX 249 CROSSNORE, NC 28216	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500.
AMERICAN RED CROSS 2425 PARK ROAD CHARLOTTE, NC 28203	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000.
PROJECT LIFE MOVEMENT 933 LOUISE AVE., SUITE 101Q CHARLOTTE, NC 28204	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
ALEXANDER CHILDREN'S FOUNDATION 6220 THERMAL DRIVE CHARLOTTE, NC 28211	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000.
DISCOVERY PLACE NATURE MUSEUM 301 N. TRYON STREET CHARLOTTE, NC 28202	NONE	PUBLIC CHARITY	GENERAL SUPPORT	50,000.
	·			

403,400.

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

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	
VOIDED CHECKS	150.			
Total	150.			

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FEDERAL TAXES	2,010.	2,010.		
Total	2,010.	2,010.		

Form 990-PF: Return of Private Foundation

Other Expenses

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
MISCELLANEOUS FEES	50.	50.		
Total	50.	50.		

Legal and Professional Fees

2019

Name	Employer Identification No
NCFI/BARNHARDT FOUNDATION	56-6068247

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
al to Form 990					

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
· · · · · · · · · · · · · · · · · · ·	-				
	-				
otal to Form 990	-PF, Part I, Line 16b				

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BRAGG FINANCIAL ADV.	ADVISORY FEES	43,522.	43,522.		
Total to Form 990-	PF, Part I, Line 16c	43,522.	43,522.		

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

NCFI_	/BARNHARDT FOU	NDATION		56-6068247	
Organization type (check one)					
Filers o	f:	Section:			
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organization		
		4947(a)(1) no	nexempt charitable trust not treated as a private t	foundation	
		☐ 527 political of	organization		
Form 99	orm 990-PF Sol1(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation			dation	
	501(c)(3) taxable private foundation				
	nly a section 501(c)(7	=	neral Rule or a Special Rule. Ization can check boxes for both the General Rule	e and a Special Rule. See	
Genera	l Rule				
X	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules				
	regulations under se 13, 16a, or 16b, and	ections 509(a)(1) an that received from	on 501(c)(3) filing Form 990 or 990-EZ that met the d 170(b)(1)(A)(vi), that checked Schedule A (Form any one contributor, during the year, total contriborm 990, Part VIII, line 1h; or (ii) Form 990-EZ, lin	990 or 990-EZ), Part II, line butions of the greater of (1)	
	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.				
	contributor, during the contributions totaled during the year for all	he year, contribution If more than \$1,000 In exclusively religion If this organization	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ tons exclusively for religious, charitable, etc., purpole. If this box is checked, enter here the total contribus, charitable, etc., purpose. Don't complete any ion because it received nonexclusively religious, contributions.	oses, but no such butions that were received of the parts unless the	

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 NCFI/BARNHARDT FOUNDATION Employer identification number 56-6068247

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	BARNHARDT MANUFACTURING COMPANY 1100 HAWTHORNE LANE / CHARLOTTE NC 28205	\$171,891.	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
NCFI/BARNHARDT FOUNDATION

Employer identification number

56-6068247

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			
		\$				

Schedule B	(Form 990, 990-EZ, or 990-PF) (2019)		Page 4		
Name of o	organization		Employer identification number		
NCFI/B. •Part III	(10) that total more than \$1,000 for t	the year from any one contribute ons completing Part III, enter the t e year. (Enter this information once	56-6068247 s described in section 501(c)(7), (8), or or. Complete columns (a) through (c) and otal of exclusively religious, charitable, etc, s. See instructions.) > \$		
(a) No.	(b) Purpose of gift		(d) Description of how sift is held		
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	tionship of transferor to transferee			
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
	(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		
	Transferee's name, address, and	(e) Transfer of gift	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		
	Transferee's name, address, and	(e) Transfer of gift	tionship of transferor to transferee		

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF: Return of Private Foundation

Line 1(a)

Itemization Statement

Description	Amount
BARNHARDT MANUFACTURING COMPANY	171,891.
To	otal 171,891.