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

Return of Private Foundation

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

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

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 07-01-2019 , and ending 06-30-2020

Name of foundation
EVERGREEN FOUNDATION

A Employer identification number
56-1351883

Number and street (or P.O. box number if mail is not delivered to street address)
28 A OAK STREET

Room/suite

B Telephone number (see instructions)
(828) 456-8005

City or town, state or province, country, and ZIP or foreign postal code
WAYNESVILLE, NC 28786

C If exemption application is pending, check here ▶ ☐

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

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

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

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

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 32,610,578

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

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

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

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ▶ ☑ if the foundation is **not** required to attach Sch. B				
	3	Interest on savings and temporary cash investments	34	34		
	4	Dividends and interest from securities	449,788	449,788		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	305,132			
	b	Gross sales price for all assets on line 6a 4,286,083				
	7	Capital gain net income (from Part IV, line 2)		305,132		
	8	Net short-term capital gain				
	9	Income modifications			613	
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	632,764	10,226	622,538	
	12	**Total.** Add lines 1 through 11	1,387,718	765,180	623,151	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	0	0	0	0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)	720	0	0	0
	b	Accounting fees (attach schedule)	42,835	0	0	0
	c	Other professional fees (attach schedule)	134,547	0	0	44,945
	17	Interest	57	0	0	0
	18	Taxes (attach schedule) (see instructions)	16,122	0	0	0
	19	Depreciation (attach schedule) and depletion	337,112	0	0	
	20	Occupancy	75,613	0	0	0
	21	Travel, conferences, and meetings	4,418	0	0	0
	22	Printing and publications				
	23	Other expenses (attach schedule)	100,725	30,811	0	0
	24	**Total operating and administrative expenses.** Add lines 13 through 23	712,149	30,811	0	44,945
	25	Contributions, gifts, grants paid	724,008			724,621
	26	**Total expenses and disbursements.** Add lines 24 and 25	1,436,157	30,811	0	769,566
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	-48,439			
	b	**Net investment income** (if negative, enter -0-)		734,369		
	c	**Adjusted net income** (if negative, enter -0-)			623,151	

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

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	268,483	215,523	215,523
	2 Savings and temporary cash investments	5,127	5,129	5,129
	3 Accounts receivable ▶ 3,659			
	Less: allowance for doubtful accounts ▶	2,468	3,659	3,659
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ 142,358			
	Less: allowance for doubtful accounts ▶ 0	149,158	142,358	142,358
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	17,702,779	18,072,125	18,072,125
	14 Land, buildings, and equipment: basis ▶ 10,379,097			
	Less: accumulated depreciation (attach schedule) ▶ 6,876,300	3,735,674	3,502,797	14,170,935
	15 Other assets (describe ▶)	8,089	849	849
	16 **Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	21,871,778	21,942,440	32,610,578
Liabilities	17 Accounts payable and accrued expenses	39,853	13,073	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)	18,713	19,356	
	23 **Total liabilities**(add lines 17 through 22)	58,566	32,429	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☑ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions	21,813,212	21,910,011	
	25 Net assets with donor restrictions			
	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)	21,813,212	21,910,011	
	30 **Total liabilities and net assets/fund balances** (see instructions)	21,871,778	21,942,440	

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)	1	21,813,212
2	Enter amount from Part I, line 27a	2	-48,439
3	Other increases not included in line 2 (itemize) ▶	3	145,238
4	Add lines 1, 2, and 3	4	21,910,011
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	21,910,011

Part IV Capital Gains and Losses for Tax on Investment Income

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

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	4,286,083		3,980,951	305,132
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** Losses (from col.(h))
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a				305,132
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	305,132
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	712,531	17,003,302	0.041905
2017	673,980	17,159,634	0.039277
2016	675,773	15,730,212	0.042960
2015	816,694	15,080,656	0.054155
2014	741,587	15,812,193	0.046900

2	**Total** of line 1, column (d)	2	0.225197
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.045039
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	17,665,263
5	Multiply line 4 by line 3	5	795,626
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	7,344
7	Add lines 5 and 6	7	802,970
8	Enter qualifying distributions from Part XII, line 4	8	769,566

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	14,687
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	14,687
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-	5	14,687
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 — 6a: 10,800		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments. Add lines 6a through 6d	7	10,800
8	Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	3,887
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be: **Credited to 2020 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0 **(2)** On foundation managers. ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NC			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ EVERGREENFOUNDATIONNC.ORG

14 The books are in care of ▶ DENISE COLEMAN Telephone no. ▶ (828) 456-8005

Located at ▶ 28 A OAK STREET WAYNESVILLE NC ZIP+4 ▶ 28786

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

16	At any time during calendar year 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		No

See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

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

1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		☐ Yes ☑ No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		☐ Yes ☑ No	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		☐ Yes ☑ No	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		☐ Yes ☑ No	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		☐ Yes ☑ No	
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		☐ Yes ☑ No	
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019?		☐ Yes ☑ No	
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		☐ Yes ☑ No	
b	If "Yes," did it have excess business holdings in 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

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

			Yes	No
5a	During the year did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☑ No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☑ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☑ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No			
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year? ☐ Yes ☑ No			

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

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

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
See Additional Data Table				

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

(a) Name and address of each employee paid more than $50,000	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

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

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

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
DENISE COLEMAN 28A OAK STREET WAYNESVILLE, NC 28786	MANAGEMENT	92,736
Total number of others receiving over $50,000 for professional services. ▶		0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	17,669,140
b	Average of monthly cash balances	1b	265,137
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	17,934,277
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	17,934,277
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	269,014
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17,665,263
6	**Minimum investment return.** Enter 5% of line 5	6	883,263

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

1	Minimum investment return from Part X, line 6			1	883,263
2a	Tax on investment income for 2019 from Part VI, line 5	2a	14,687		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b			
c	Add lines 2a and 2b			2c	14,687
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	868,576
4	Recoveries of amounts treated as qualifying distributions			4	613
5	Add lines 3 and 4			5	869,189
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1			7	869,189

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	769,566
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	769,566
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	0
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	769,566

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				869,189
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			356,652	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f **Total** of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ $ 769,566				
a Applied to 2018, but not more than line 2a			356,652	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				412,914
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019.	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount —see instructions		0		
e 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				456,275
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 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:				
a Excess from 2015. . . .				
b Excess from 2016. . . .				
c Excess from 2017. . . .				
d Excess from 2018. . . .				
e Excess from 2019. . . .				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon: **a** "Assets" alternative test—enter: **(1)** Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c "Support" alternative test—enter: **(1)** Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

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

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

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

DENISE COLEMAN
28 A OAK STREET
WAYNESVILLE, NC 28786
(828) 456-8005
DCOLEMAN@EVERGREENNC.ORG

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

THEY SHOULD FILL OUT THE GRANT APPLICATION PACKAGE AND SUBMIT TO THE ORGANIZATION. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED NOR RETURNED TO THE APPLICANT. APPROPRIATELY COMPLETED GRANT APPLICATIONS WILL BE PRESENTED TO THE BOARD FOR REVIEW AND CONSIDERATION AT REGULARLY SCHEDULED BOARD MEETINGS.

c Any submission deadlines:

NONE

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

THE FUNDING WILL BE USED TO DIRECTLY SUPPORT THE MENTAL HEALTH, SUBSTANCE ABUSE OR DEVELOPMENTALLY DISABLED POPULATIONS. THE FUNDING WILL BE UTILIZED IN ONE OR MORE OF THE FOLLOWING COUNTIES: CHEROKEE, CLAY, GRAHAM, HAYWOOD, JACKSON, MACON OR SWAIN.

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				724,621
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a EXEMPT PURPOSE RENTAL INCOME					622,538
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	34	
4 Dividends and interest from securities			14	449,788	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	10,226	
8 Gain or (loss) from sales of assets other than inventory			18	305,132	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		765,180	622,538
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				**13**	1,387,718

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
1A	FACILITY AND HOUSING PROVIDED AT LOW RENT TO MENTAL HEALTH COMMUNITY

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

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

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

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

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

b If "Yes," complete the following schedule.

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

Sign Here

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

******	2020-10-28	******
Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
APRIL WESTMORELAND		2020-10-27		P01245071
Firm's name ▶ JOHNSON PRICE SPRINKLE PA				Firm's EIN ▶56-1169449
Firm's address ▶ 500 NORTH MAIN STREET SUITE 16 MARION, NC 28752				Phone no. (828) 652-7044

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
JOHN BAUKNIGHT 175 HIDEAWAY TRAIL HIGHLANDS, NC 28741	BOARD MEMBER 2.00	0	0	0
JOHN FEIL 765 GOLDMINE ROAD ROBBINSVILLE, NC 28771	SECRETARY 4.00	0	0	0
VICKI GORDON 52 DEER GLADE LANE WAYNESVILLE, NC 28786	TREASURER 4.00	0	0	0
MARTY HYDAKER 300 JITTERBUG LANE CULLOWHEE, NC 28723	PRESIDENT 4.00	0	0	0
RALPH MURPHY 2757 COOPERS CREEK ROAD BRYSON CITY, NC 28713	VICE PRESIDENT 2.00	0	0	0
GLENN JONES P O BOX 87 BRYSON CITY, NC 28713	BOARD MEMBER 2.00	0	0	0
DAVID BADGER 228 HILTON ST MURPHY, NC 28906	BOARD MEMBER 2.00	0	0	0
JANICE WRIGHT P O BOX 1203 CULLOWHEE, NC 28723	BOARD MEMBER 2.00	0	0	0
CHARLES PENLAND 386 OAK FOREST ROAD HAYESVILLE, NC 28904	BOARD MEMBER 2.00	0	0	0
TAMMY KEEZER P O BOX 1718 FRANKLIN, NC 28744	BOARD MEMBER 2.00	0	0	0

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
30TH JUDICIAL DISTRCIT DVSA ALLIANCE PO BOX 554 WAYNESVILLE, NC 28786	NONE	PC	A PARTIAL MATCH FOR A GOVERNOR'S CRIME COMMISSION GRANT WHICH SUPPORTS VETERANS AND OTHER INDIVIDUALS WITH DISABILITIES.	10,000
30TH JUDICIAL DISTRCIT DVSA ALLIANCE PO BOX 554 WAYNESVILLE, NC 28786	NONE	PC	FUNDING TO ASSIST WITH SETTING UP AN MDMA ASSISTED THERAPY CLINIC TO HELP PEEOPLE WHO HAVE PTSD.	14,155
ASHEVILLE-BUNCOMBE COUMMUNITY CHRISTIAN MINISTRY INC 20 TWENTIETH ST ASHEVILLE, NC 28806	NONE	PC	CONTINUATION FUNDING FOR THE NC SERVES VETERANS PROGRAM IN CHEROKEE, CLAY, GRAHAM AND SWAIN COUNTIES.	30,000
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AWAKEPO BOX 755 SYLVA, NC 28779	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	3,000
AWAKEPO BOX 755 SYLVA, NC 28779	NONE	PC	SPONSORSHIP FOR THE POP A CORK FUNDRAISING EVENT WHICH SUPPORTS THE OPERATION OF THE CHILD ADVOCACY CENTER.	1,000
CAMP ABILITY OF WNC28 VILLA COURT WAYNESVILLE, NC 28786	NONE	PC	FUNDING TO PROVIDE STAFF AND EQUIPMENT FOR A TWO WEEK SUMMER CAMP PROGRAM FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES.	4,133
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CENTER FOR DOMESTIC PEACE 26 RIDGEWAY ST SYLVA, NC 28723	NONE	PC	FUNDING TO COVER THE CRISIS HOTLINE FOR DOMESTIC VIOLENCE AND SEXUAL ASSAULT VICTIMS.	17,670
CHILDREN'S HOPE ALLIANCEPO BOX 1 BARIUM SPRINGS, NC 28010	NONE	PC	FUNDING TO HELP SUPPORT A POST ADOPTION CONFERENCE AND ALSO COVER FOSTER CARE TRAINING.	15,000
DISABILITY PARTNERS2775 US 74 EAST SYLVA, NC 28779	NONE	PC	FUNDING TOWARD AN ELECTRONIC MEDICAL RECORD PROGRAM WHICH IS BEING REQUIRED BY PROVIDERS OF STATE AND MEDICAID SERVICES.	10,000
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HAVEN CHILD ADVOCACY CENTER 4297 E US 64 ALT MURPHY, NC 28906	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	3,000
HAYWOOD COMMUNITY COLLEGE-CAREER COLLEGE 1660 TOW STRING RD CHEROKEE, NC 28719	NONE	GOV	FUNDING TO PURCHASE IPADS FOR THE CAREER COLLEGE PROGRAM WHICH SERVES INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES.	7,290
HERE IN JACKSON COPO BOX 403 SYLVA, NC 28723	NONE	PC	FUNDING TO PROVIDE WINTER SHELTER FOR INDIVIDUALS WITH SEVERE MENTAL ILLNESS.	45,000
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HERE IN JACKSON COPO BOX 403 SYLVA, NC 28723	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	7,000
HIGHTS INCPO BOX 2543 CULLOWHEE, NC 28723	NONE	PC	FUNDING TO COVER A YOUTH SPECIALIST POSITION IN ORDER TO HAVE THE PROPER RATIOS IN THE PROGRAM SERVING VULNERABLE YOUTH.	50,830
HIGHTS INCPO BOX 2543 CULLOWHEE, NC 28723	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	10,000
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HINTON RURAL LIFE CENTER INC 2330 HINTON CENTER RD HAYESVILLE, NC 28904	NONE	PC	FUNDING TO INCORPORATE SUBSTANCE USE AWARENESS AND PREVENTION IN THE SAFE AND HEALTHY HOME INITIATIVE.	12,500
HINTON RURAL LIFE CENTER INC 2330 HINTON CENTER RD HAYESVILLE, NC 28904	NONE	PC	FUNDING TO SUPPORT FUND-RAISING EVENT TO SUPPORT THE SANCTUARY GARDENS AT THE CENTER.	1,000
KARE INC1159 N MAIN ST WAYNESVILLE, NC 28786	NONE	PC	FUNDING TO ASSIST WITH THERAPY SERVICES FOR CHILD VICTIMS OF ABUSE.	12,265
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
KARE INC1159 N MAIN ST WAYNESVILLE, NC 28786	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	3,000
LIBERTY CORNER ENTERPRISES INC 119 TUNNEL ROAD SUITE 120 ASHEVILLE, NC 28805	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	2,700
MACON TRACSPO BOX 101 OTTO, NC 28763	NONE	PC	SPONSORSHIP FOR THE BLUE JEAN BALL WHICH SUPPORTS THE THERAPEUTIC HORSEBACK RIDING PROGRAM FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES.	1,000
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MERIDAIN BEHAVIORAL HEALTH 44 BONNIE LANE SYLVA, NC 28779	NONE	PC	FUNDING FOR CONTINUED SUPPORT OF AN INTEGRATED CARE PILOT PROGRAM AT THE CHEROKEE HEALTH DEPARTMENT.	29,783
MERIDAIN BEHAVIORAL HEALTH 44 BONNIE LANE SYLVA, NC 28779	NONE	PC	FUNDING FOR CONTINUED SUPPORT OF THE PATIENT ASSISTANCE PROGRAM WHICH PROVIDES OVER ONE MILLION DOLLARS IN FREE MEDICATION TO INDIVIDUALS IN THE SEVEN-COUNTY AREA EACH YEAR.	52,200
MERIDAIN BEHAVIORAL HEALTH 44 BONNIE LANE SYLVA, NC 28779	NONE	PC	FUNDING TO UPGRADE COMPUTERS AND TECHNOLOGY FOR THE AGENCY IN THE SEVEN WNC COUNTIES.	55,308
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MERIDAIN BEHAVIORAL HEALTH 44 BONNIE LANE SYLVA, NC 28779	NONE	PC	FUNDING TO DEVELOP AND TEST A PILOT MODEL SERVICE CALLED COMPREHENSIVE COMMUNITY SUPPORT SERVICES FOR INDIVIDUALS WITH MENTAL HEALTH AND SUBSTANCE USE ISSUES IN CHEROKEE, HAYWOOD, JACKSON, AND MACON COUNTIES.	125,000
MERIDAIN BEHAVIORAL HEALTH 44 BONNIE LANE SYLVA, NC 28779	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	10,000
MOUNTAIN PROJECTS 2177 ASHEVILLE RD WAYNESVILLE, NC 28786	NONE	PC	FUNDING TO PURCHASE COMPUTERS AND OTHER TECHNOLOGY FOR THE CIRCLES OF HOPE PROGRAM IN JACKSON COUNTY.	5,119
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MOUNTAIN PROJECTS 2177 ASHEVILLE RD WAYNESVILLE, NC 28786	NONE	PC	FUNDING TO ASSIST WITH THE RESILIENCE MODEL TRAINING IN CHEROKEE, CLAY, SWAIN AND GRAHAM COUNTIES.	50,000
NO WRONG DOOR177 SLOAN RD FRANKLIN, NC 28734	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	3,000
RENEWED HOPEPO BOX 1340 MURPHY, NC 28906	NONE	PC	FUNDING TO ASSIST WITH UPGRADES TO STORAGE AND ADDITIONAL EQUIPMENT FOR THE SAW MILL PROGRAM WHICH ASSISTS MEN RECOVERING FROM SUBSTANCE USE ISSUES IN WNC.	4,884
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SOUTHWESTERN CHILD DEVELOPMENT PO BOX 250 WEBSTER, NC 28788	NONE	PC	FUNDING FOR THE EXPANSION OF THE FAMILY NURSE PARTNERSHIP PROGRAM INTO CHEROKEE, CLAY AND GRAHAM COUNTIES TO ASSIST HIGH RISK, FIRST TIME MOTHERS.	50,000
SOUTHWESTERN CHILD DEVELOPMENT PO BOX 250 WEBSTER, NC 28788	NONE	PC	EMERGENCY FUNDING TO SUPPORT TECHNOLOGY NEEDS DURING THE COVID 19 PANDEMIC.	3,000
THE ARC OF HAYWOOD CO 407 WELCH ST WAYNESVILLE, NC 28786	NONE	PC	FUNDING TOWARD THE PURCHASE OF A VAN FOR THE GROUP HOME FOR INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES.	18,584
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE ARC OF HAYWOOD CO 407 WELCH ST WAYNESVILLE, NC 28786	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE CLIENTS DURING THE COVID 19 PANDEMIC.	2,700
UMAR SERVICES 5350 77 CENTER DR STE 201 CHARLOTTE, NC 28217	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	1,000
UMAR SERVICES 5350 77 CENTER DR STE 201 CHARLOTTE, NC 28217	NONE	PC	FUNDING TO UPGRADE THE WIRING IN THE HAYESVILLE GROUP HOME TO BE ABLE TO BILL ELECTRONICALLY.	2,500
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WCU FOUNDATION1 UNIVERSITY DRIVE CULLOWHEE, NC 28723	NONE	PC	SCHOLARSHIP FOR A YOUNG MAN WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES TO ATTEND THE UNIVERSITY PARTICIPANT PROGRAM AT WCU.	5,000
WEBSTER ENTERPRISES 140 LITTLE SAVANNAH RD SYLVA, NC 28779	NONE	PC	FUNDING TO COVER SOME OF THE COSTS OF A NEW HVAC SYSTEM IN THE VOCATIONAL TRAINING FACILITY FOR INDIVIDUALS WITH DISABILITIES AND OTHER BARRIERS TO EMPLOYMENT.	8,000
WESTERN CAROLINA PACE SETTERS PO BOX 88 BRASTOWN, NC 28902	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	10,000
Total . . . . . ▶ **3a**				724,621

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
YOUTH VILLAGES367 DELLWOOD RD WAYNESVILLE, NC 28786	NONE	PC	MATCH FUNDING TO PROVIDE CASE MANAGEMENT FOR YOUTH AS THEY EXIT FOSTER CARE AND LOOK AT HOUSING, EMPLOYMENT, AND HIGHER EDUCATION.	20,000
YOUTH VILLAGES367 DELLWOOD RD WAYNESVILLE, NC 28786	NONE	PC	EMERGENCY FUNDS TO ADDRESS NEEDS OF THE ORGANIZATION AND CLIENTS DURING THE COVID 19 PANDEMIC.	8,000
Total . . . . . ▶ **3a**				724,621

TY 2019 Accounting Fees Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	42,835	0	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491314013620

TY 2019 Investments - Other Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	18,072,125	18,072,125

TY 2019 Land, Etc. Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDINGS	9,006,690	6,550,206	2,456,484	10,923,200
EQUIPMENT	332,687	223,551	109,136	119,596
OTHER FIXED ASSETS	418,107	102,543	315,564	397,339
LAND	621,613	0	621,613	2,730,800

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491314013620

TY 2019 Legal Fees Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	720	0	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491314013620

TY 2019 Other Assets Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEPOSIT	8,089	849	849

TY 2019 Other Expenses Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REPAIRS	67,182	0	0	0
OFFICE EXPENSE	2,363	0	0	0
INVESTMENT FEES	30,811	30,811	0	0
DUES	353	0	0	0
MISCELLANEOUS EXPENSE	16	0	0	0

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TY 2019 Other Income Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INTEREST INCOME BRITTAN TRACE	3,526	3,526	
INTEREST INCOME HAMPTON	6,700	6,700	
EXEMPT PURPOSE RENTAL INCOME	622,538		622,538

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TY 2019 Other Increases Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Description	Amount
NET UNREALIZED GAINS ON INVESTMENTS	145,238

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TY 2019 Other Liabilities Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Description	Beginning of Year - Book Value	End of Year - Book Value
LEASE DEPOSIT	17,054	15,469
EXCISE TAX PAYABLE	1,659	3,887

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Other Notes/Loans Receivable Long Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
HAMPTON PROMISSORY NOTE		141,000	0	2002-08	2007-11	179 EQUAL INSTALLMENTS AND ONE FINAL BALLOON PYMT	700.0000000000 %	PURCHASE MONEY DEED OF TRUST	PURCHASE OF FORMER HAMPTON PROPERTY		0
BRITTAIN TRACE PROPERTY		72,250	0	2003-05	2018-05	179 EQUAL INSTALLMENTS AND ONE FINAL BALLOON PYMT	700.0000000000 %	PURCHASE MONEY DEED OF TRUST	PURCHASE OF FORMER BRITTAIN TRACE PROPERTY		0

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TY 2019 Other Professional Fees Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATION CONTRACT	92,736	0	0	44,945
PROPERTY MAINTENANCE	41,811	0	0	0

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TY 2019 Taxes Schedule

Name: EVERGREEN FOUNDATION

EIN: 56-1351883

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY TAX	1,435	0	0	0
EXCISE TAX	14,687	0	0	0