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JOHNSON PRICE SPRINKLE PA  
500 N. MAIN STREET, SUITE 16  
MARION, NORTH CAROLINA 28752

(828) 652-7044

SEPTEMBER 26, 2016

EVERGREEN FOUNDATION  
28 A OAK STREET  
WAYNESVILLE, NC 28786

EVERGREEN FOUNDATION:

ENCLOSED ARE THE ORGANIZATION'S 2015 EXEMPT ORGANIZATION RETURN AND 2016 ESTIMATED TAX PAYMENT INFORMATION. THE RETURN SHOULD BE SIGNED, DATED, AND MAILED.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990-PF RETURN:

FORM 990-PF HAS AN OVERPAYMENT OF \$777. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

NO AMOUNT IS DUE ON FORM 990-PF.

PLEASE SIGN AND MAIL ON OR BEFORE NOVEMBER 15, 2016.

MAIL TO - DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE CENTER  
OGDEN, UT 84201-0027

ESTIMATED TAX PAYMENTS FOR FORM 990-PF:

FOR YOUR REFERENCE WE HAVE LISTED ALL ESTIMATED TAX PAYMENTS AND THEIR ORIGINAL DUE DATES BELOW.

INSTALLMENT NO. 1	BY 11/15/16	.....	\$154
INSTALLMENT NO. 2	BY 12/15/16	.....	\$931
INSTALLMENT NO. 3	BY 03/15/17	.....	\$931
INSTALLMENT NO. 4	BY 06/15/17	.....	\$931

PAYMENTS SHOULD BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENT SYSTEM (EFTPS). TAXPAYERS CAN MAKE DEPOSITS ONLINE AT [WWW.EFTPS.GOV](http://WWW.EFTPS.GOV) OR BY CALLING EFTPS CUSTOMER SERVICE AT 1-800-555-4477. FOR DEPOSITS MADE BY EFTPS TO BE ON TIME, THE ORGANIZATION MUST INITIATE THE TRANSACTION DURING BUSINESS HOURS AT LEAST 1 BUSINESS DAY BEFORE THE DATE THE DEPOSIT IS DUE. IF YOU ARE USING ACH CREDIT OR SAME-DAY FEDWIRE METHODS, PLEASE CHECK WITH THE APPROPRIATE FINANCIAL

INSTITUTION FOR THE DEADLINE TO ENSURE TIMELY TRANSMISSION OF FUNDS.

PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS DISTRIBUTION CARRYOVER OF \$46,174. THIS MAY BE APPLIED TO TAX YEAR 2016 AND SUBSEQUENT YEARS.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

VERY TRULY YOURS,

KATHRYN M. ATKINSON

## Filing Instructions

**Prepared for:**

EVERGREEN FOUNDATION  
28 A OAK STREET  
WAYNESVILLE, NC 28786

**Prepared by:**

JOHNSON PRICE SPRINKLE PA  
500 NORTH MAIN STREET, SUITE 16  
MARION, NC 28752

2015 FORM 990-PF

PLEASE SIGN AND MAIL ON OR BEFORE NOVEMBER 15, 2016.

FORM 990-PF HAS AN OVERPAYMENT OF \$777. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

MAIL TO - DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE CENTER  
OGDEN, UT 84201-0027

2016 FORM 990-PF ESTIMATED TAX

ESTIMATED TAX INSTALLMENTS ARE DUE AS FOLLOWS:

\$	154	DUE BY	NOVEMBER 15, 2016
\$	931	DUE BY	DECEMBER 15, 2016
\$	931	DUE BY	MARCH 15, 2017
\$	931	DUE BY	JUNE 15, 2017

PAYMENTS SHOULD BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENT SYSTEM (EFTPS). TAXPAYERS CAN MAKE DEPOSITS ONLINE AT WWW.EFTPS.GOV OR BY CALLING EFTPS CUSTOMER SERVICE AT 1-800-555-4477. FOR DEPOSITS MADE BY EFTPS TO BE ON TIME, THE ORGANIZATION MUST INITIATE THE TRANSACTION DURING BUSINESS HOURS AT LEAST 1 BUSINESS DAY BEFORE THE DATE THE DEPOSIT IS DUE. IF YOU ARE USING ACH CREDIT OR SAME-DAY FEDWIRE METHODS, PLEASE CHECK WITH THE APPROPRIATE FINANCIAL INSTITUTION FOR THE DEADLINE TO ENSURE TIMELY TRANSMISSION OF FUNDS.

Form **990-W**

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

(Worksheet)  
Department of the Treasury  
Internal Revenue Service

(and on Investment Income for Private Foundations) **FORM 990-PF**  
(Keep for your records. Do not send to the Internal Revenue Service.)

**2016**

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1. See instructions for tax computation .....	2	
3	Alternative minimum tax (see instructions) .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits (see instructions) .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes (see instructions) .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels (see instructions) .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions .....	10a	
b	Enter the tax shown on the 2015 return (see instructions). <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	3,723.
c	<b>2016 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	3,724.

		(a)	(b)	(c)	(d)	
11	Installment due dates (see instructions) .....	11	11/15/16	12/15/16	03/15/17	06/15/17
12	Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions) .....	12	931.	931.	931.	931.
13	2015 Overpayment (see instructions) .....	13	777.			
14	Payment due (Subtract line 13 from line 12) .....	14	154.	931.	931.	931.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2016)

**ESTIMATED TAX** 3,724.  
**OVERPAYMENT APPLIED** 777.  
**AMOUNT DUE** 2,947.

**Return of Private Foundation**

Department of the Treasury  
Internal Revenue Service

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

**2015**

Do not enter social security numbers on this form as it may be made public.  
Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2015 or tax year beginning **JUL 1, 2015**, and ending **JUN 30, 2016**

Name of foundation <b>EVERGREEN FOUNDATION</b>		A Employer identification number <b>56-1351883</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>28 A OAK STREET</b>	Room/suite	B Telephone number <b>(828) 456-8005</b>
City or town, state or province, country, and ZIP or foreign postal code <b>WAYNESVILLE, NC 28786</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>29,805,709.</b>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received .....				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments .....	57.	57.		STATEMENT 1
	4 Dividends and interest from securities .....	380,417.	380,417.		STATEMENT 2
	5a Gross rents .....				
	b Net rental income or (loss) .....				
	6a Net gain or (loss) from sale of assets not on line 10 .....	<14,799.>			
	b Gross sales price for all assets on line 6a .....	269,517.			
	7 Capital gain net income (from Part IV, line 2) .....		0.		
	8 Net short-term capital gain .....				
	9 Income modifications .....			35,311.	
	10a Gross sales less returns and allowances .....				
b Less: Cost of goods sold .....					
c Gross profit or (loss) .....					
11 Other income .....	566,207.	11,882.	554,325.	STATEMENT 3	
12 <b>Total.</b> Add lines 1 through 11 .....	931,882.	392,356.	589,636.		
<b>Operating and Administrative Expenses</b>	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 .....	5,879.	0.	0.	0.
	b Accounting fees .....	32,220.	0.	0.	0.
	c Other professional fees .....	216,007.	0.	0.	119,080.
	17 Interest .....	450.	0.	0.	0.
	18 Taxes .....	4,691.	0.	0.	0.
	19 Depreciation and depletion .....	311,059.	0.	0.	
	20 Occupancy .....	80,807.	0.	0.	0.
	21 Travel, conferences, and meetings .....	5,773.	0.	0.	1,214.
	22 Printing and publications .....				
	23 Other expenses .....	131,343.	20,060.	0.	506.
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 .....	788,229.	20,060.	0.	120,800.
	25 Contributions, gifts, grants paid .....	664,306.			699,617.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25 .....	1,452,535.	20,060.	0.	820,417.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements .....	<520,653.>				
b <b>Net investment income</b> (if negative, enter -0-) .....		372,296.			
c <b>Adjusted net income</b> (if negative, enter -0-) .....			589,636.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	1,842,482.	118,210.	118,210.
	2 Savings and temporary cash investments	5,117.	5,119.	5,119.
	3 Accounts receivable	10,109.		
	Less: allowance for doubtful accounts	1,086.	10,109.	10,109.
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable	166,928.		
	Less: allowance for doubtful accounts	0.	172,070.	166,928.
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations	84,822.		
	b Investments - corporate stock	STMT 9	0.	8,707,198.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other	STMT 10	13,938,746.	6,540,543.	
14 Land, buildings, and equipment: basis	10,402,662.			
Less: accumulated depreciation	5,879,888.	4,571,334.	4,522,774.	
15 Other assets (describe)	STATEMENT 11	262,600.	877.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		20,878,257.	20,071,758.	
Liabilities	17 Accounts payable and accrued expenses	9,694.	81,302.	
	18 Grants payable			
	19 Deferred revenue	1,419.		
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)	STATEMENT 12	46,858.	17,004.
	23 Total liabilities (add lines 17 through 22)		57,971.	98,306.
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here	<input checked="" type="checkbox"/>		
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted		20,820,286.	19,973,452.
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here	<input type="checkbox"/>		
	and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds				
28 Paid-in or capital surplus, or land, bldg., and equipment fund				
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances		20,820,286.	19,973,452.	
31 Total liabilities and net assets/fund balances		20,878,257.	20,071,758.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	20,820,286.
2 Enter amount from Part I, line 27a	2	<520,653.>
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	20,299,633.
5 Decreases not included in line 2 (itemize) <b>NET UNREALIZED LOSSES ON INVESTMENTS</b>	5	326,181.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	19,973,452.



**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.)
<b>1a PUBLICLY TRADED SECURITIES</b>	P		
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 269,517.		284,316.	<14,799.>
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			<14,799.>
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	<14,799.>
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). If (loss), enter -0- in Part I, line 8	}	3	N/A

**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 the 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))
2014	741,587.	15,812,193.	.046900
2013	809,833.	16,413,338.	.049340
2012			
2011			
2010			

2 Total of line 1, column (d)	2	.096240
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.048120
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	15,080,656.
5 Multiply line 4 by line 3	5	725,681.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,723.
7 Add lines 5 and 6	7	729,404.
8 Enter qualifying distributions from Part XII, line 4	8	820,417.

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

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	3,723.
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	3,723.
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	3,723.
6 Credits/Payments:			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	4,500.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	4,500.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	777.	
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax 777. Refunded	11	0.	

**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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 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.		X
c Did the foundation file Form 1120-POL for this year?		X
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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?	X	
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	X	
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	X	
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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)
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address: EVERGREENFOUNDATIONNC.ORG
14 The books are in care of: THOMAS W. MCDEVITT 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
16 At any time during calendar year 2015, 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?

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?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) 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?
(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?
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)?
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 2015?
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?
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?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2015 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?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2015?

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

**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)?  Yes  No **N/A**  
 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 **N/A**  
 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?  Yes  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?  Yes  No **N/A**

5b		
6b		X
7b		

**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.**

(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 STATEMENT 13		0.	0.	0.

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
TOM MCDEVITT 28A OAK STREET, WAYNESVILLE, NC 28786	MANAGEMENT	98,400.
DENISE COLEMAN 28A OAK STREET, WAYNESVILLE, NC 28786	MANAGEMENT	75,600.

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 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> 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	15,003,477.
b	Average of monthly cash balances .....	1b	306,834.
c	Fair market value of all other assets .....	1c	
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	15,310,311.
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	15,310,311.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) .....	4	229,655.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	5	15,080,656.
6	<b>Minimum investment return.</b> Enter 5% of line 5 .....	6	754,033.

**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	754,033.
2a	Tax on investment income for 2015 from Part VI, line 5 .....	2a	3,723.
b	Income tax for 2015. (This does not include the tax from Part VI.) .....	2b	
c	Add lines 2a and 2b .....	2c	3,723.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	750,310.
4	Recoveries of amounts treated as qualifying distributions .....	4	35,311.
5	Add lines 3 and 4 .....	5	785,621.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	7	785,621.

**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	820,417.
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	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .....	4	820,417.
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 .....	5	3,723.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 .....	6	816,694.

**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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				785,621.
2 Undistributed income, if any, as of the end of 2015:				
a Enter amount for 2014 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013		6,925.		
e From 2014		4,453.		
f Total of lines 3a through e	11,378.			
4 Qualifying distributions for 2015 from Part XII, line 4: ▶ \$	820,417.			
a Applied to 2014, but not more than line 2a			0.	
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 2015 distributable amount				785,621.
e Remaining amount distributed out of corpus	34,796.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	46,174.			
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 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	46,174.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013		6,925.		
d Excess from 2014		4,453.		
e Excess from 2015		34,796.		

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

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test - enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> "Support" alternative test - enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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).)

NONE

**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.

NONE

**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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

**SEE STATEMENT 14**

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

**c** Any submission deadlines:

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



**Part XV** Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
APPALACHIAN ACCESS P.O. BOX 144 MURPHY, NC 28906	NONE	PC	\$67,000 TO MAKE IMPROVEMENTS AND CHANGES TO THE BALSAM CENTER TO CHANGE THE USE FROM A LEVEL 2	67,000.
ASPIRE 33 SHARON LYNN WAY CLYDE, NC 28721	NONE	PC	\$10,000 TO PROVIDE ALTERNATIVE EDUCATIONAL OPPORTUNITIES FOR NON-COURT INVOLVED	10,000.
AWAKE P.O. BOX 755 SYLVA, NC 28779	NONE	PC	\$500 IN FUND RAISING SUPPORT.	500.
AWAKE CAC P.O. BOX 755 SYLVA, NC 28779	NONE	PC	\$2,786 TO PROVIDE CONTRACTED FORENSIC INTERVIEWS FOR CHILDREN WHO ARE VICTIMS OF ABUSE AND	2,786.
CHILDREN'S HOPE ALLIANCE P.O. BOX 1 BARIUM SPRINGS, NC 28010	NONE	PC	\$40,000 IN FUNDS TO FINISH THE BASEMENT OF THE CHILD AND ADOLESCENT SHELTER IN BRYSON CITY.	40,000.
<b>Total</b> ..... SEE CONTINUATION SHEET(S) ..... ▶ <b>3a</b>				<b>699,617.</b>
<b>b Approved for future payment</b>				
NONE				
<b>Total</b> ..... ▶ <b>3b</b>				<b>0.</b>





**Part XV** Supplementary Information

**3 Grants and Contributions Paid 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
CHILDREN'S HOPE ALLIANCE P.O. BOX 1 BARIUM SPRINGS, NC 28010	NONE	PC	\$1000 IN SUPPORT FOR THE GIVING THEM HOPE FUND RAISING LUNCHEON.	1,000.
CLEAN SLATE COALITION P O BOX 455 WEBSTER, NC 28788	NONE	PC	\$1,000 TO SUPPORT THEIR FUND RAISER.	1,000.
ELIADA HOMES 2 COMPTON DRIVE ASHEVILLE, NC 28806	NONE	PC	\$1,000 TO SUPPORT THEIR FUND RAISING LUNCHEON.	1,000.
FAMILY RESOUC E CENTER OF CHEROKEE P. O. BOX 1216 MURPHY, NC 28906	NONE	PC	\$10,150 TO PROVIDE PARENTING EDUCATION CLASSES IN CHEROKEE COUNTY.	10,150.
FAMILY RESOURCE CENTER OF CHEROKEE COUNTY 70 CENTRAL STREET MURPHY, NC 28906	NONE	PC	\$20,000 FOR THE PROVISION OF TRANSPORTATION FOR INDIVIDUALS WHO ARE BEING VOLUNTARILY	20,000.
FAMILY RESOURCE CENTER OF CHEROKEE COUNTY 70 CENTRAL STREET MURPHY, NC 28906	NONE	PC	\$67,500 TO PROVIDE JAIL TREATMENT PROGRAMS IN CHEROKEE, CLAY, GRAHAM, MACON AND SWAIN COUNTIES	67,500.
FAMILY RESOURCE CENTER OF CHEROKEE COUNTY 70 CENTRAL STREET MURPHY, NC 28906	NONE	PC	\$39,366 TO PROVIDE FOR THE CONTINUATION OF THE ALTERNATIVE SERVICE FOR MH & SA CONSUMERS REPLACING	39,366.
H.A.V.E.N 4297 EAST US 64 ALTERNATE MURPHY, NC 28906	NONE	PC	\$8,000 TO PROVIDE FORENSIC INTERVIEW TRAINING TO SERVICE PROVIDERS IN CHEROKEE, CLAY AND GRAHAM	8,000.
H.A.V.E.N 4297 EAST US 64 ALTERNATE MURPHY, NC 28906	NONE	PC	\$500 IN FUND RAISING SUPPORT.	500.
HAYWOOD PATHWAYS PROJECT 179 HEMLOCK ST WAYNESVILLE, NC 28786	NONE	PC	\$31,140 TO SUPPORT THEIR EXPANSION OF THE HOMELESS SHELTER TO SERVE WOMEN AND CHILDREN.	31,140.
<b>Total from continuation sheets</b>				<b>579,331.</b>

**Part XV** Supplementary Information

**3 Grants and Contributions Paid 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
LIFESPAN SERVICES 2143 ASHEVILLE RD. WAYNESVILLE, NC 28786	NONE	PC	\$6260 TO ENHANCE SERVICES FOR ADULTS WITH AUTISM SPECTRUM DISORDER AT THEIR WAYNESVILLE SITE. THE	6,260.
MACON TRAKS P. O. BOX 101 OTTO, NC 28763, NC 28763	NONE	PC	\$7723 TO EXPAND THERAPEUTIC HORSEBACK RIDING IN MACON, CLAY, HAYWOOD, JACKSON AND SWAIN. FUNDS AWARDED	7,723.
MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC 154 MEDICAL PARK LOOP SYLVA, NC 28779	NONE	PC	\$3,000 TO SUPPORT THE NATIONAL SAFETY COUNCIL PROJECT IN HAYWOOD COUNTY TO PROVIDE BLISTER PACKS	3,000.
MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC 154 MEDICAL PARK LOOP SYLVA, NC 28779	NONE	PC	\$150,000 IN FUNDING TO SUPPORT PSYCHIATRIC SERVICES AND THE PATIENT ASSISTANCE PROGRAM WHICH PROVIDES	150,000.
MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC 154 MEDICAL PARK LOOP SYLVA, NC 28779	NONE	PC	\$27,000 FOR THE JAIL TREATMENT PROGRAMS IN HAYWOOD AND JACKSON COUNTIES. SERVICES INCLUDE ASSESSMENT AND	27,000.
MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC 154 MEDICAL PARK LOOP SYLVA, NC 28779	NONE	PC	\$3500 TOWARD THE COSTS OF SENDING THE SEXUAL OFFENDER SERVICES TEAM TO THE NATIONAL CONVENTION IN QUEBEC,	3,500.
MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC 154 MEDICAL PARK LOOP SYLVA, NC 28779	NONE	PC	\$100,000 IN FUNDING TO OFF-SET THE COST OF ACQUIRING JACKSON/HAYWOOD/MACON PSYCH.	100,000.
MOUNTAIN PROJECTS 2251 OLD BALSAM RD WAYNESVILLE, NC 28786	NONE	PC	\$23,497 TO PROVIDE NALOXONE KITS TO SITES IN WNC AND BIO-HAZARD BOXES FOR EACH COUNTY FOR IV DRUG NEEDLES.	23,497.
SOUTHWESTERN CHILD DEVELOPMENT P O BOX 250 WEBSTER, NC 28788	NONE	PC	\$16,470 TO PROVIDE CONTINUATION OF THE COLD WEATHER SHELTER PROGRAM FOR INDIVIDUALS WHO ARE	16,470.
SOUTHWESTERN CHILD DEVELOPMENT P O BOX 250 WEBSTER, NC 28788	NONE	PC	\$50,000 TO PROVIDE CONTINUATION FUNDING FOR THE NURSE FAMILY PARTNERSHIP PROGRAM (HOME VISITING NURSES	50,000.
<b>Total from continuation sheets</b> .....				



**Part XV** Supplementary Information

## 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - APPALACHIAN ACCESS

\$67,000 TO MAKE IMPROVEMENTS AND CHANGES TO THE BALSAM CENTER TO CHANGE THE USE FROM A LEVEL 2 FACILITY TO A LEVEL 3, WHICH WILL PROVIDE CRISIS SERVICES FOR THE WESTERN COUNTIES.

NAME OF RECIPIENT - ASPIRE

\$10,000 TO PROVIDE ALTERNATIVE EDUCATIONAL OPPORTUNITIES FOR NON-COURT INVOLVED YOUTH THAT HAVE SEVERE MH HEALTH NEEDS AND ARE UNABLE TO ATTEND REGULAR SCHOOLS.

NAME OF RECIPIENT - AWAKE CAC

\$2,786 TO PROVIDE CONTRACTED FORENSIC INTERVIEWS FOR CHILDREN WHO ARE VICTIMS OF ABUSE AND PARTIAL FUNDING FOR STAFF TO ATTEND THE NATIONAL CHILDREN'S ADVOCACY CONFERENCE IN WASHINGTON, DC.

NAME OF RECIPIENT - FAMILY RESOURCE CENTER OF CHEROKEE COUNTY

\$20,000 FOR THE PROVISION OF TRANSPORTATION FOR INDIVIDUALS WHO ARE BEING VOLUNTARILY COMMITTED TO PSYCHIATRIC HOSPITALS AND NEED TRANSPORTATION TO AND FROM THE HOSPITAL. SERVICES WILL BE COORDINATED THROUGH ACS.

NAME OF RECIPIENT - FAMILY RESOURCE CENTER OF CHEROKEE COUNTY

\$67,500 TO PROVIDE JAIL TREATMENT PROGRAMS IN CHEROKEE, CLAY, GRAHAM, MACON AND SWAIN COUNTIES THROUGH ACS. PROGRAM INCLUDES ASSESSMENT AND GROUP THERAPY IN EACH COUNTY.

NAME OF RECIPIENT - FAMILY RESOURCE CENTER OF CHEROKEE COUNTY

\$39,366 TO PROVIDE FOR THE CONTINUATION OF THE ALTERNATIVE SERVICE FOR

**Part XV** Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

MH & SA CONSUMERS REPLACING STATE FUNDED COMMUNITY SUPPORT TEAM  
ELIMINATED BY THE MCO 8/23/12. THE SERVICES WILL CONTRACTED THROUGH  
ACS.

NAME OF RECIPIENT - H.A.V.E.N

\$8,000 TO PROVIDE FORENSIC INTERVIEW TRAINING TO SERVICE PROVIDERS IN  
CHEROKEE, CLAY AND GRAHAM COUNTIES.

NAME OF RECIPIENT - LIFESPAN SERVICES

\$6260 TO ENHANCE SERVICES FOR ADULTS WITH AUTISM SPECTRUM DISORDER AT  
THEIR WAYNESVILLE SITE. THE AWARD INCLUDED FUNDS FOR STAFF TO  
PARTICIPATE IN TEACCH TRAINING AT UNC AND ENHANCE THE SENSORY ROOM AT  
THEIR SITE.

NAME OF RECIPIENT - MACON TRAKS

\$7723 TO EXPAND THERAPEUTIC HORSEBACK RIDING IN MACON, CLAY, HAYWOOD,  
JACKSON AND SWAIN. FUNDS AWARDED WERE FOR SCHOLARSHIPS AND TO PURCHASE  
A PORTABLE RAMP THAT WILL ENABLE THEM TO GET OUT MORE INTO THE OTHER  
COUNTIES.

NAME OF RECIPIENT - MERIDIAN BEHAVIORIAL HEALTH SERVICES ,INC

\$3,000 TO SUPPORT THE NATIONAL SAFETY COUNCIL PROJECT IN HAYWOOD COUNTY  
TO PROVIDE BLISTER PACKS OF NON-NARCOTIC MEDICATIONS FOR PHYSICIANS TO  
DISPENSE TO REDUCE THE NUMBER OF OPIOIDS PRESCRIBED. GOAL IS TO  
DECREASE THE NUMBER OF OPIOID OVERDOSE DEATHS IN THE COUNTY BY 50%  
(CURRENTLY 15 IN HAYWOOD COUNTY) AND REDUCE THE NUMBER OF OPIOID  
PRESCRIPTIONS BY 15%.



**Part XV** Supplementary Information

## 3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC

\$150,000 IN FUNDING TO SUPPORT PSYCHIATRIC SERVICES AND THE PATIENT ASSISTANCE PROGRAM WHICH PROVIDES FREE PSYCHIATRIC MEDICATIONS.

NAME OF RECIPIENT - MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC

\$27,000 FOR THE JAIL TREATMENT PROGRAMS IN HAYWOOD AND JACKSON COUNTIES. SERVICES INCLUDE ASSESSMENT AND GROUP THERAPY FOR INDIVIDUALS WITH PSYCHIATRIC AND SUBSTANCE ABUSE ISSUES.

NAME OF RECIPIENT - MERIDIAN BEHAVIORIAL HEALTH SERVICES , INC

\$3500 TOWARD THE COSTS OF SENDING THE SEXUAL OFFENDER SERVICES TEAM TO THE NATIONAL CONVENTION IN QUEBEC, CANADA IN OCTOBER. A TEAM OF 4 INDIVIDUALS: 3 CLINICIANS AND THE OFFENDER SERVICES MANAGER.

NAME OF RECIPIENT - MOUNTAIN PROJECTS

\$23,497 TO PROVIDE NALOXONE KITS TO SITES IN WNC AND BIO-HAZARD BOXES FOR EACH COUNTY FOR IV DRUG NEEDLES. REQUEST IS TO SET UP SITES FOR DISTRIBUTION, REPLENISH KITS AS NEEDED AND MEDIA PROMOTION TO EDUCATE COMMUNITY.

NAME OF RECIPIENT - SOUTHWESTERN CHILD DEVELOPMENT

\$16,470 TO PROVIDE CONTINUATION OF THE COLD WEATHER SHELTER PROGRAM FOR INDIVIDUALS WHO ARE HOMELESS AND HAVE DISABILITIES.

NAME OF RECIPIENT - SOUTHWESTERN CHILD DEVELOPMENT

\$50,000 TO PROVIDE CONTINUATION FUNDING FOR THE NURSE FAMILY PARTNERSHIP PROGRAM (HOME VISITING NURSES FOR FIRST TIME MOTHERS BELOW POVERTY LEVEL) IN PARTNERSHIP WITH KATE B. REYNOLDS AND WNCCF. THESE

**Part XV** | **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

MOTHERS HAVE VERY HIGH RATES OF MENTAL HEALTH AND S/A, AND CHILDREN OF POOR SINGLE MOTHERS ARE AT HIGHEST RISK OF MH/SA/DD ISSUES LATER IN LIFE.

NAME OF RECIPIENT - THE ARC OF HAYWOOD CO.

\$9000 TO PROVIDE ADDITIONAL HOURS OF SERVICE AND SUPPORTS FOR THE INDEPENDENT LIVING AND SUPPORTED EMPLOYMENT PROGRAM FOR HOURS IN ADDITION TO WHAT IS FUNDED BY THE MCO AND VR, BUT NEEDED TO ENABLE INDIVIDUALS TO MAINTAIN THEIR INDEPENDENT LIVING AND EMPLOYMENT. EVIDENCE BASED SERVICES.

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FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

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SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME - BANK	57.	57.	57.
TOTAL TO PART I, LINE 3	57.	57.	57.

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FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
WELLS FARGO	380,417.	0.	380,417.	380,417.	380,417.
TO PART I, LINE 4	380,417.	0.	380,417.	380,417.	380,417.

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FORM 990-PF OTHER INCOME STATEMENT 3

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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME BRITTAN TRACE	4,072.	4,072.	0.
INTEREST INCOME HAMPTON	7,810.	7,810.	0.
EXEMPT PURPOSE RENTAL INCOME	554,323.	0.	554,323.
MISC INC FROM RENTALS	2.	0.	2.
TOTAL TO FORM 990-PF, PART I, LINE 11	566,207.	11,882.	554,325.

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FORM 990-PF	LEGAL FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL	5,879.	0.	0.	0.	
TO FM 990-PF, PG 1, LN 16A	5,879.	0.	0.	0.	

FORM 990-PF	ACCOUNTING FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	32,220.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16B	32,220.	0.	0.	0.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMINISTRATION CONTRACT	136,480.	0.	0.	119,080.	
PROPERTY MAINTENANCE	39,720.	0.	0.	0.	
INDEPENDENT CONTRACTORS	39,807.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16C	216,007.	0.	0.	119,080.	

FORM 990-PF	TAXES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROPERTY TAX	672.	0.	0.	0.	
EXCISE TAX	4,019.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	4,691.	0.	0.	0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
REPAIRS	108,499.	0.	0.	0.	
OFFICE EXPENSE	922.	0.	0.	0.	
INVESTMENT FEES	20,060.	20,060.	0.	0.	
DUES	1,258.	0.	0.	0.	
MISCELLANEOUS EXPENSE	604.	0.	0.	0.	506.
TO FORM 990-PF, PG 1, LN 23	131,343.	20,060.	0.	0.	506.

FORM 990-PF	CORPORATE STOCK		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCK		8,707,198.	8,707,198.	
TOTAL TO FORM 990-PF, PART II, LINE 10B		8,707,198.	8,707,198.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
MUTUAL FUNDS	FMV	6,540,543.	6,540,543.	
TOTAL TO FORM 990-PF, PART II, LINE 13		6,540,543.	6,540,543.	

FORM 990-PF	OTHER ASSETS			STATEMENT	11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE		
DEPOSIT	100.	100.	100.	100.	
CONTRIBUTION RECEIVABLE	262,500.	0.	0.	0.	
PREPAID INCOME TAX	0.	777.	777.	777.	
TO FORM 990-PF, PART II, LINE 15	262,600.	877.	877.	877.	

FORM 990-PF	OTHER LIABILITIES	STATEMENT	12
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
LEASE DEPOSIT		15,704.	17,004.
INCOME TAX PAYABLE		31,154.	0.
TOTAL TO FORM 990-PF, PART II, LINE 22		46,858.	17,004.

FORM 990-PF                      PART VIII - LIST OF OFFICERS, DIRECTORS  
 TRUSTEES AND FOUNDATION MANAGERS                      STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOHN BAUKNIGHT 175 HIDEWAY TRAIL HIGHLANDS, NC 28741	BOARD MEMBER 2.00	0.	0.	0.
JOHN FEIL 765 GOLDMINE ROAD ROBBINSVILLE, NC 28771	BOARD MEMBER 2.00	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.
JIMMY JOHNSON 518 HIGHWAY 64 EAST HAYESVILLE, NC 28904	BOARD MEMBER 2.00	0.	0.	0.
RALPH MURPHY 2757 COOPER'S CREEK ROAD BRYSON CITY, NC 28713	VICE PRESIDENT 2.00	0.	0.	0.
BILL TEAGUE 105 GALLOWAY STREET WAYNESVILLE, NC 28786	SECRETARY 2.00	0.	0.	0.
RON YOWELL 385 COWAN VALLEY ESTATES SYLVA, NC 28779	BOARD MEMBER 2.00	0.	0.	0.

EVERGREEN FOUNDATION

56-1351883

GLENN JONES  
P O BOX 87  
BRYSON CITY, NC 28713

BOARD MEMBER  
2.00

0. 0. 0.

DANA JONES  
1755 HEALEY FIELDS RD  
ANDREWS, NC 28901

BOARD MEMBER  
2.00

0. 0. 0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

0. 0. 0.





**EVERGREEN FOUNDATION**  
**FIXED ASSETS - SCHEDULE**  
7/1/15-6/30/16

<b>Land, Buildings, and Equipment</b>	<b>Original Cost</b>	<b>Accumulated Depreciation 6/30/2016</b>	<b>Ending Book Value 6/30/2016</b>
<b>Buildings</b>			
Buildings - 2183 Airport Road	\$618,292.11	\$485,736.56	\$132,555.55
Buildings - 1254 Church Street	427,487.09	427,487.09	0.00
Buildings - 131 Walnut Street	265,330.00	260,462.91	4,867.09
Buildings - 154 Medical Park Loop	1,479,089.23	973,733.54	505,355.69
Buildings - 100 Thomas Heights Road	447,283.03	396,728.41	50,554.62
Buildings - 44 Bonnie Lane	2,134,119.17	1,250,943.65	883,175.52
Buildings - 35 Aquifer Brae Lane	113,676.00	70,609.01	43,066.99
Buildings - 719 Fisher Creek	159,260.50	95,556.24	63,704.26
Buildings - 5696 Old Clyde Road	98,816.00	60,936.71	37,879.29
Buildings - 33 Sharon Lynn Way	149,427.38	89,658.03	59,769.35
Buildings - 211 Nellie John Drive	137,941.50	82,764.77	55,176.73
Buildings - 244 South Painter Road	149,136.50	89,482.21	59,654.29
Buildings - 28 A&B Oak Street	74,508.85	45,933.81	28,575.04
Buildings - 30 Arlington Extension	136,147.97	81,688.98	54,458.99
Buildings - 38, 40 & 42 Oak Street	99,291.00	56,540.96	42,750.04
Buildings - 205 Hazelwood Avenue	129,119.37	71,733.44	57,385.93
Buildings - 7 Gabriel Lane	106,050.19	53,613.69	52,436.50
Renovation - 33 Sharon Lynn Way	77,966.65	35,950.68	42,015.97
Buildings - 27 Aquifer Brae Road	93,123.55	38,543.29	54,580.26
Buildings - 91 Timberlane Road	1,073,054.09	463,500.38	609,553.71
Buildings - 144 Falls Circle Road	309,600.00	122,120.00	187,480.00
Renov - 33 Sharon Lynn Way	75,476.00	30,191.02	45,284.98
Renov - 91 Timberlane Road	447,089.82	158,344.77	288,745.05
Renov - 91 Timberlane Road	183,742.01	55,632.51	128,109.50
Sprinkler - 91 Timberlane Road	395,957.70	143,864.74	252,092.96
Renovation 719 Fisher Creek	78,656.66	16,168.26	62,488.40
Roof - 719 Fisher Creek	8,400.00	745.47	7,654.53
Renov - 1254 Church Street	53,450.00	4,008.69	49,441.31
<b>Total Buildings</b>	<b>\$9,521,492.37</b>	<b>\$5,662,679.83</b>	<b>\$3,858,812.54</b>
<b>Equipment</b>			
Equipment - 1998	\$4,628.78	\$4,628.78	\$0.00
Telephones	1,900.00	1,900.00	0.00
HVAC	4,100.00	4,100.00	0.00
Telephone System - Cherokee Center	25,812.00	25,812.00	0.00
Telephone System - Clay Center	22,985.00	22,985.00	0.00
Telephone System - Haywood Center	28,308.75	28,308.75	0.00
Telephone System - Macon Center	24,507.33	24,507.33	0.00
Telephone System - Swain Center	21,510.96	21,510.96	0.00
Telephone System - Haywood Child & Family	27,868.00	27,868.00	0.00
HVAC-Bonnie Lane Computer Room	6,000.00	4,928.67	1,071.33
Commerecail Washer - Balsam Center	6,050.00	1,944.54	4,105.46
Heat Pump - Walnut Street	6,000.00	2,142.90	3,857.10
4 Ton Heat Pump - Jackson	6,796.00	2,103.66	4,692.34
<b>Total Equipment</b>	<b>\$186,466.82</b>	<b>\$172,740.59</b>	<b>\$13,726.23</b>

**EVERGREEN FOUNDATION**  
**FIXED ASSETS - SCHEDULE**  
**7/1/15-6/30/16**

<b>Land, Buildings, and Equipment</b>	<b>Original Cost</b>	<b>Accumulated Depreciation 6/30/2016</b>	<b>Ending Book Value 6/30/2016</b>
<b>Other Fixed Assets</b>			
Parking Lot	\$16,381.00	\$16,381.00	\$0.00
Additions - 1997	7,550.18	7,550.18	0.00
Leasehold Improvements - Jackson	10,850.00	10,850.00	0.00
Parking Lot - 33 Sharon Lynn Way	13,837.00	9,686.04	4,150.96
<b>Total Other Fixed Assets</b>	<b>\$48,618.18</b>	<b>\$44,467.22</b>	<b>\$4,150.96</b>
<b>Land</b>			
Land - 7 Gabriel Heights	\$6,755.40	\$0.00	\$6,755.40
Land - 91 Timberlane Road	50,000.00	0.00	50,000.00
Land - 144 Falls Circle Road	17,600.00	0.00	17,600.00
Land - 2183 Airport Road	8,006.36	0.00	8,006.36
Land - 1254 Church Street	31,442.58	0.00	31,442.58
Land - 131 Walnut Street	110,239.21	0.00	110,239.21
Land - 100 Thomas Heights Road	48,866.37	0.00	48,866.37
Land - 44 Bonnie Lane	36,994.88	0.00	36,994.88
Land - 35 Aquifer Brae Lane	6,135.14	0.00	6,135.14
Land - 719 Fisher Creek	6,871.35	0.00	6,871.35
Land - 5696 Old Clyde Road	5,852.31	0.00	5,852.31
Land - 33 Sharon Lynn Way (Stamey)	14,496.10	0.00	14,496.10
Land - 211 Nellie John Drive	9,953.95	0.00	9,953.95
Land - 244 South Painter Road	5,368.24	0.00	5,368.24
Land - 28 A & B Oak Street	2,484.73	0.00	2,484.73
Land - 30 Arlington Extension	5,368.24	0.00	5,368.24
Land - 25,38, 40 Oak Street	4,244.90	0.00	4,244.90
Land - 205 Hazelwood Avenue	6,253.55	0.00	6,253.55
Land - 27 Aquifer Brae Raod	6,651.41	0.00	6,651.41
Land - 154 Medical Park Loop	262,500.00	0.00	262,500.00
<b>Total Land</b>	<b>\$646,084.72</b>	<b>\$0.00</b>	<b>\$646,084.72</b>
<b>Amount reported Part II line 14 of Form 990-PF</b>	<b>\$10,402,662.09</b>	<b>\$5,879,887.64</b>	<b>\$4,522,774.45</b>