OMB No 1545-0052

2015

Department of the Treasury

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. Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. Internal Revenue Service Inspection , and ending 06-30-2016 For calendar year 2015, or tax year beginning 07-01-2015 Name of foundation A Employer identification number Western North Carolina Community Homes 9 Inc 30-0147138 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 5350 77 Center Drive Suite (704) 659-7640 City or town, state or province, country, and ZIP or foreign postal code Charlotte, NC $\,$ 28217 $\,$ C If exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return A mended return ✓ Address change Name change 2. Foreign organizations meeting the 85% test, check here and attach computation If private foundation status was terminated \checkmark Section 501(c)(3) exempt private foundation **H** Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation IFair market value of all assets at end **J**Accounting method Cash ✓ Accrual F If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) >\$ 385,083 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses Disbursements Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Net investment Adjusted net for charitable expenses per income ıncome purposes books (d) (cash basis only) Contributions, gifts, grants, etc , received (attach 4,740 2 attach Sch B Interest on savings and temporary cash investments 3 4 Dividends and interest from securities Gross rents Net rental income or (loss)_ b Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . . 8 9 Income modifications . 10a Gross sales less returns and allowances b Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) ₩. 14.898 14,898 75 19.002 14.973 12 Total.Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 2.061 1.986 Other employee salaries and wages . . 14 Pension plans, employee benefits . 15 Operating and Administrative Expenses Legal fees (attach schedule). . . 16a ارچە 1.425 Accounting fees (attach schedule). . . b Other professional fees (attach schedule) c 17 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 12,215 12.215 15.433 15.433 20 Occupancy Travel, conferences, and meetings. 21 22 Printing and publications . . . (چە 2.720 2.720 23 Other expenses (attach schedule). Total operating and administrative expenses. 24 33.854 75 32,354 Add lines 13 through 23 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 75 33.854 32.354

Subtract line 26 from line 12

Excess of revenue over expenses and disbursements

Net investment income (If negative, enter -0-) Adjusted net income(if negative, enter -0-)

27

а

b

-14.852

0.5	rt 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 o	f year
-	11.	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	1,458	34	
	2	Savings and temporary cash investments	44,360	44,315	44,315
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶		522	522
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
t s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ă	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶472,753			
		Less accumulated depreciation (attach schedule) ▶ 132,541	351,802	340,212	340,212
	15	Other assets (describe ▶)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	397,620	385,083	385,083
	17	Accounts payable and accrued expenses	1,994	4,778	
	18	Grants payable			
nes	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lla	21	Mortgages and other notes payable (attach schedule)	386,700		
	22	Other liabilities (describe >)	1,385		
	23	Total liabilities(add lines 17 through 22)	390,079	412,196	
S		Foundations that follow SFAS 117, check here			
Ce		and complete lines 24 through 26 and lines 30 and 31.			
19	24	Unrestricted	7,541	-27,113	
ä	25	Temporarily restricted			
Fund Balance	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here			
٥		and complete lines 27 through 31.			
ets	27	Capital stock, trust principal, or current funds			
45.5	28	Paid-in or capital surplus, or land, bldg , and equipment fund Retained earnings , accumulated income , endowment, or other funds			
Net Assets	29	Total net assets or fund balances(see instructions)	7,541	-27,113	
Ž	30	Total liabilities and net assets/fund balances(see instructions)	397,620		1
<u> </u>	31		337,020	303,003	
	rt III		(a) line 30 /mist =	7700	
1		Total net assets or fund balances at beginning of year—Part II, column with end-of-year figure reported on prior year's return)		·	7,541
2		Enter amount from Part I, line 27a			-14,852
3		Other increases not included in line 2 (itemize)			-14,032
4		Add lines 1, 2, and 3			-7,311
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	19,802
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F			-27,113

Part 1	V Capital Gains	and Los	ses for Tax on Inv	estme	ent Income)				
		•) of property sold (e g , common stock, 200 sh			P —	w acquired Purchase -Donation	l Da	te acquired o , day, yr)	Date sold (d) (mo , day, yr
1 a	Washer					, ,	Р	201	2-11-20	2015-07-01
b	Range						Р	201	2-07-01	2016-06-26
	-									
d										
е е										
) Gross sales price		Depreciation allow (f) (or allowable)	ved	Cost (g) plus e	or othe expense				n or (loss) : (f) minus (g)
а				241			65	4		-413
b				400			69	8		-298
С										
d										
е .										
Со	mplete only for assets s	showing ga	ıın ın column (h) and ow	ned by	the foundation	on 12/	31/69		Gains (Col	(h) gaın mınus
	FMV as of 12/31/69						ol (ı)	1	ol (k), but no	ot less than -0-) o
	-		(j) as of 12/31/69		(k) over	rcol (j),	ıfany	(1)	Losses	(from col (h))
a										-413
b										-298
с										
d										
e								ļ		
2	Capital gain net inco	me or (net	capital loss)		ın, also enter ı ss), enter -0-			2		-711
3	Net short-term capita	al dain or (loss) as defined in sect	ions 12	22(5) and (6)	1	•	<u> </u>		, 11
•	·	,	8, column (c) (see inst		, , , , ,		1			
		• •	. , , ,				}	3		
Part	V Qualification I	Inder Se	ection 4940(e) for	Pedu	red Tay on	Not T	vestme		rome	
(For opt		rivate foui	ndations subject to the							
			1942 tax on the distribu				he base pe	eriod?		┌ Yes ┌ No
			n column for each year,				ng any ent	rıes		
	(a)		/h)		(-)				(d))
	period years Calendar or tax year beginning in)	Adjuste	(b) d qualifying distributions	Net	(c) value of nonchar		assets	(4	Distributio col (b) divided	on ratio
750. (2014								101 (b) airiae	2 27 001 (0)
	2013									
	2012									
	2011									
	2010									
2							⊢	2		
3			ne 5-year base period—o tion has been in existen				, or by	3		
4	•		cable-use assets for 20		•		🗕	4		
5					•		<u> </u>	5		
6			ome (1% of Part I, line				<u> </u>	6		
7			,				<u> </u>	7		
7 Add lines 5 and 6					<u> </u>	8				
0			nan line 7, check the bo						ng a 10/2 to	v rate See
	the Part VI instruction		ian fine 7, check the bo.	^ 111 P d l	c v 1, iiile 10, a	anu COIII	piete tilat	part us	niy a 1 70 la	A Tale See

	990-PF (2015)			age 4			
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)				
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			0			
	here ► Tand enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of						
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others						
2	enter -0-)						
3	Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others						
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 5						
6	Credits/Payments						
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a						
b	Exempt foreign organizations—tax withheld at source 6b						
c Tax paid with application for extension of time to file (Form 8868) 6c							
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d						
8	Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached.						
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed 9						
0	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid \Delta 10						
1	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11						
ar	t VII-A Statements Regarding Activities						
а	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No			
	It participate or intervene in any political campaign?	1 a		No			
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions							
for definition)?							
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials						
r	published or distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?	1 c		No			
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			110			
-	(1) On the foundation ► \$ (2) On foundation managers ► \$						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers 🕨 \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No			
	If "Yes," attach a detailed description of the activities						
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			
a	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		No			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No			
_	If "Yes," attach the statement required by General Instruction T						
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or			l			
	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		No			
,	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				
3a	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				
•	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	9		No			
J	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	10		No			
	and addresses	10		No			

Par	rt VII-A Statements Regarding Activities (continued)			age =
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 h	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	n? 13	Yes	
	Website address ►www umarinfo com			
14	The books are in care of ▶Lisa Pardue Telephone no ▶(-4404	
	Located at ►5509-A W Friendly Ave Ste 101 Greensboro NC ZIP+4 ►2741	. 0		
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			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	er	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	al		
В-				
261	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
12	During the year did the foundation (either directly or indirectly)		165	NO
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		i i	
	- diamental final manager	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No	Ì Ì	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No	İİ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ĺ	Ìİ	
	for the benefit or use of a disqualified person)? $ o$ Yes	No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf 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) $ extstyle ext$	i		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation			NI -
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b		No
	Tryanizations relying on a current notice regarding disaster assistance effects field.	ı	1 1	
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?	. 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)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2015?	No		
	If "Yes," list the years > 20, 20, 20		i	
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		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3 -	▶ 20, 20, 20			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	.		
h	any time during the year?	140		
J	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 2015)	3b		No
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			Al-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015	5? 4b		No

	990-PF (2 t VII-B		ardir	a Activities for	Wh	ich Form 4720	May	, Be Required (Con	tinue	d)	Page 6
5a		year did the foundation				10111 4720	114	be itequired (con	· · · · · · · ·		
Ju	-	on propaganda, or oth		•		ıslatıon (section 49	45(e	(*)))? Yes	□ No		
		nce the outcome of an		·	_	,		, les	V N 0	i i	
	• •	ectly or indirectly, any		,		**		· _	√ No		
		e a grant to an individ		_			-	,		ii	
	• •	-		•				Yes	✓ No	1 1	
		e a grant to an organiz tion 4945(d)(4)(A)? (s							√ No		
		e for any purpose othe tional purposes, or for						· · · · TYes	✓ No		
b	If any ans	werıs "Yes" to 5a(1)-	(5), d	ıd any of the transac	tions	fail to qualify unde	the	exceptions described in	1		
	Regulation	ns section 53 4945 or	ın a c	urrent notice regard	ling c	lısaster assıstance	(see	instructions)?		5b	No
	Organizat	ions relying on a curre	nt not	ice regarding disast	eras	sistance check her	e		Г		
c		wer is "Yes" to questio	•	• •		•					
	tax becau	se it maintained exper	diture	responsibility for th	ne gr	ant?		· · · · \ \ \ Yes	✓ No		
	If "Yes," at	tach the statement req	uired b	y Regulations section	n 53	4945-5(d)					
6 a	Did the for	undation, during the ye	ar, red	ceive any funds, dire	ectly	or indirectly, to pay	prei	miums on			
	a persona	benefit contract?						· · · Tes	✓ No		
b	Did the foi	undation, during the ye	ar, pa	y premiums, directly	yorı	ndırectly, on a pers	onal	benefit contract?		6b	No
	If "Yes" to	6b, file Form 8870									
7a	At any tim	e during the tax year,	was th	ne foundation a party	y to a	a prohibited tax she	tert	ransaction?	✓ No		
b	If yes, dıd	the foundation receive	e any į	proceeds or have an	y ne	t income attributabl	e to t	the transaction?		7ь	No
								n Managers, Highly		Empl	oyees,
		and Contractors									
1	List all offi	cers, directors, truste	es, fou	ındation managers a	nd t	heir compensation (see i				
				Title, and average		Compensation(If		(d) Contributions to	E	Expense	account,
	(a) Name and address		(h)	hours per week (b) devoted to position		not paid, enter -0-)		mployee benefit plans	(e)		lowances
			(5)				and	l deferred compensatior	<u> </u>		
See /	Additional [Data ⊤able	_								
			_								
	_										
	Compensat	ion of five highest-pa	d emp	oloyees (other than t 	thos	e included on line 1-	-see	instructions). If none, e	enter "I	NONE."	
Nan		(a) ress of each employee e than \$50,000	paıd	Title, and aver hours per wee (b) devoted to posi	ek	(c) Compensation	n	Contributions to employee benefit plans and deferred (d) compensation		•	e account, lowances
NON	F							(4)			
									+		
				1				I			

Total number of other employees paid over \$50,000.

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7

Tax on investment income for 2015 from Part VI, line 5.

Income tax for 2015 (This does not include the tax from Part VI). . . | 2b

3 Distributable amount before adjustments Subtract line 2c from line 1.

4 5 6

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . **Qualifying Distributions** (see instructions)

Part XII 1

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

2

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

3а 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4

2c

3 4

5

6

7

1a

1b

2

5 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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Undistributed Income (see instructions)

		(a)	(b)	(c)	(d)
_	Distributable analysis for 2045 form Bart VI. Inc. 7	Corpus	Years prior to 2014	2014	2015
	Distributable amount for 2015 from Part XI, line 7				<u> </u>
	Undistributed income, if any, as of the end of 2015 Enter amount for 2014 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
b	From 2011				
c	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part				
	XII, line 4 ▶ \$				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
d	Applied to 2015 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
_	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	Undistributed income for 2016 Subtract				
•	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				0
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
_	be required - see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
۵	Excess distributions carryover to 2016.				
7	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
е	Excess from 2015				
				F	orm 990-PF (2015)

	m 990-PF (2015)			NATE A SUSSESSES	0)	Page 1 0
	Part XIV Private Operating Founda	•		'''	9)	
la	If the foundation has received a ruling or dete foundation, and the ruling is effective for 2015			. •		
	Check box to indicate whether the organization	n is a private opera	ting foundation de		4942(J)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(-)
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	of minimum investment return shown in					
_	Part X, line 6 for each year listed "Support" alternative test—enter					
Č	(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					
Đ.	art XV Supplementary Information	(Complete this	part only if th	e organization	had \$5,000 o	r more in
	assets at any time during the				α. ψο,σσσ σ.	
L	Information Regarding Foundation Managers:					
а	List any managers of the foundation who have before the close of any tax year (but only if th					ation
b	List any managers of the foundation who own :		•		large portion of the	9
	ownership of a partnership or other entity) of v	which the foundation	n has a 10% or gre	eater interest		
2	Information Regarding Contribution, Grant, G	ift, Loan, Scholarsh	ip, etc., Programs:			
	Check here ► if the foundation only makes unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and	on makes gifts, grar		_		
а	The name, address, and telephone number or	email address of th	e person to whom	applications shoul	d be addressed	
	The form in which applications should be sub-	mitted and informat	ion and materials t	they should include	<u> </u>	
	The form in which applications should be sub-	mitted and informat	ion and materials (they should include	:	
c	: Any submission deadlines					
_						
d	I Any restrictions or limitations on awards, suc	th as by deographic	al areas : charitabl	e fields, kinds of in	stitutions, or other	-
-	factors	== =, goograpine				

Form 990-PF (2015)	matica (continued)			Page 11
Part XV Supplementary Infor 3 Grants and Contributions Paid		royed for F	uture Payment	
	If recipient is an individual,		uture rayment	
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor	recipient		
a Faid during the year	I			
Total			▶ 3a	Γ
b Approved for future payment				
Total			▶ 3b	Form 990 PE (2015)

	S amounts unless otherwise indicated	Γ	usiness income	Excluded by section	. 512 513 or 514	(e)
inter gros	s amounts unless otherwise marcated	(a)	(b)	(c)	(d)	Related or exemp function income
1 Progran	n service revenue	Business code	A mount	Exclusion code	A mount	(See Instructions)
a Rental	ıncome					14,898
						,
е						
f						
g Fees	and contracts from government agencies					
3 Interes	ership dues and assessments st on savings and temporary cash ments			14	75	
	nds and interest from securities			1	, ,	
	ntal income or (loss) from real estate					
	-financed property					
	lebt-financed property					
	ntal income or (loss) from personal ty					
8 Gain o	nvestment income r (loss) from sales of assets other than					
	ory					-71
O Gross	profit or (loss) from sales of inventory					
	revenue a					
	al Add columns (b), (d), and (e).				75	14,18
	an Add Columns (b), (d), and (e)				L 3	14,262
(See v	vorksheet in line 13 instructions to verify i	calculations)			'	,
Part XV	I-B Relationship of Activities to	the Accom	plishment of I	Exempt Purpos	es	
Line No. ▼	Explain below how each activity for whithe accomplishment of the foundation's instructions.)					
	Provided residential care and services for	or developmenta	illy disabled adult	:S		

ronn 99	10-P	F (2013)										Pag	ge 1 .
Part	XVI:	Information Re Noncharitable					saction	ns and I	Relationships	With			
1 Did	the o	organization directly or i	-				th any o	ther orgar	nization described	l in			
		501(c) of the Code (othe	r than se	ction 50	1(c)(3)	organizations) (rın seci	tion 527,	relating to politic	al		Yes	No
		tions?	dation to				at. an af						1
		s from the reporting four h									1a(1)		No
		erassets								•	1a(1)		No
		ansactions									10(1)		
		es of assets to a noncha	rıtable ex	empt or	ganizatio	n					1b(1)		No
		chases of assets from a			-						1b(2)		No
		tal of facilities, equipme									1b(3)		No
(4)	Rein	nbursement arrangemer	ts								1b(4)		No
(5)	Loar	ns or loan guarantees.									1b(5)		No
(6) P	erfor	rmance of services or m	embershi	p or fund	draising s	olicitations.					1b(6)		No
c Shai	rıng d	of facilities , equipment, i	mailing lis	sts, othe	rassets	or paid employ	ees				1 c		No
		swer to any of the above											
		ods, other assets, or se ansaction or sharing arra											
iii di	iy cic	ansaction or snaming and	angement	., 3110W 11	ii colulliii	(d) the value of	Title got	ous, other	assets, or service	.cs receive	u		
(a) Line	No	(b) Amount involved	(c) Name	of nonch	antable ex	empt organization	(d)	Description	of transfers, transact	ons, and sha	rıng arra	ngemer	nts
	_												
	-												
2n Ic th	ao foi	undation directly or indi	coctly offul	listed w	th or rol	atad to ano or	moro tav	avamnt	organizations				
		d in section 501(c) of th	,		•	•		'	_		. Гүе	es	
✓ N						(-)(-),					. ,		
b If "Y	es,"	complete the following	schedule										
		(a) Name of organization	1		(l) Type of organiz	ition		(c) Descrip	tion of relation	nship		
		der penalties of perjury,											
		best of my knowledge a ormation of which prepar				t, and complete	Declar	ation of p	reparer (other tha	n taxpayer) is bas	ed on	all
Sign	IIIIC		ei ilas ali	y KIIOWIC	euge	I				May th	ne IRS di	scuss th	IIS
Here	k.	*****				2017-05-09	_ k	*****		retúrn	ne prepar		
		Signature of officer or t	rustoo			Date	— y ,	Title		below	ie prepar	el silow	"
		Signature of officer of t	iustee			Date		Title		(see ir	nstr)?	Yes	ИO
		Print/Type preparer's	name	Prepar	er's Sign	ature	Date		Check if self-	PTIN			
		Vicki L Kendrick CP			9.				employed ▶ ☐	P(00347	68	
									<u> </u>				
Paid		Firm's name ▶							Firm's EIN ▶				
Prepa Use	ırer	Apple Koceja & Assoc	iates PA										
Ose Only		Firm's address ▶											_
Jy		445 Dolley Madison R	dSte202	Greensl	boro, NC				Phone no (336)854-427	7		
		27410											

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation ${\bf r}$

(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
Theresa Hall	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Parks Hunter	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Tom Lawson	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Andy Starzeckı	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Morry Johnston	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Donna Frye	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Max Daniel	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Tom Hollowell	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Edward Imbrogno	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Frances Mabry	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Pat Mırabellı	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Billy Morton	Trustee	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Gil Middlebrooks	Chair/Secretary	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			
Dan Warren	Treasurer	0		
5350 77 Center Drive Suite 201 Charlotte, NC 28217	0 00			

efile GRAPHIC print - DO NO	T PROCESS	As	Filed Data -		DLN: 93491129010677					
TY 2015 Accounting Fees Schedule										
	Name:	West	tern North Carolina C	ommunity						
		Homes 9 Inc								
	EIN:	30-0147138								
Sof	ftware ID:	15000324								
Software	e Version:	2015v3.0								
Category	Amount		Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Compile financial statements	1,125	0	0	0	

300

Prepare 990-PF

DLN: 93491129010677

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

TY 2015 Depreciation Schedule

Name: Western North Carolina Community

Homes 9 Inc.

EIN: 30-0147138

Software ID: 15000324

Software Version: 2015v3.0

Description of Date Cost or Other Prior Years' **Computation Method** Rate / **Current Year's** Net Investment Adjusted Net Cost of Goods Basis Life (# of years) Sold Not Property Acquired Depreciation Depreciation Income Income Included Expense Building 2004-11-10 428,737 114,364 SL 40 0000 10,718 Closing costs on home 2005-07-01 14,000 3,500 SL 40 0000 350 Additional closing costs 2005-07-01 1,000 150 SL 40 0000 25 Hardwood flooring 2012-07-01 10,000 1,500 SL 20 0000 500 698 300 SL Range 2012-07-01 7 0000 100 Refrigerator 2012-07-01 1,569 672 SL 7 0000 224 Dryer 2013-07-01 528 152 SL 7 0000 75 807 SL Dishwasher 2014-10-02 86 7 0000 115 754 SL Washer 2015-07-01 7 0000 108

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TY 2015 Land, Etc. Schedule					
Nam		h Carolina Commu	nıty		
	Homes 9 Inc				
EIN: 30-0147138					
Software ID: 15000324					
Software Version: 2015v3.0					
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value	
Machinery and Equipment	4,242	1,432	2,810	2,810	
Buildings	453,737	131,109	322,628	322,628	
Land	14,774		14,774	14,774	

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TY 2015 Mortgages and Notes Payable Schedule					
Name: Western	North Carolina Community				
Homes 9	•				
EIN: 30-0147					
Software ID: 1500032					
Software Version: 2015v3.					
Total Mortgage Amount: 386,700					
Item No.	1				
Lender's Name					
Lender's Title					
Relationship to Insider					
Original Amount of Loan					
Balance Due	386,700				
Date of Note					
Maturity Date					
Repayment Terms					
Interest Rate					
Security Provided by Borrower					
Purpose of Loan					
Description of Lender Consideration					
Consideration FMV					

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TY 2015 Other Decreases Sche	edule	
Name:	Western North Carolina	Community
	Homes 9 Inc	
EIN:	30-0147138	
Software ID:	15000324	
Software Version:	2015v3.0	
Des	cription	Amount
HUD PRAC excess residual receipts expe	nse	19,802

TY 2015 Other Expenses Schedule					
Name:	Western No	rth Carolina Commi	unity		
	Homes 9 Inc				
EIN:	30-0147138	}			
Software ID: 15000324					
Software Version: 2015v3.0					
· ·	ue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

2,233

487

DLN: 93491129010677

2,233

487

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Management fee

Miscellaneous administrative

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TY 2015 Other Income Schedule						
Name:	: Western North Carolina Community					
	Homes 9 Inc					
EIN:	V: 30-0147138					
Software ID:	ID: 15000324					
Software Version:	n: 2015v3.0					
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
Rental income		14,898				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491129010677
TY 2015 Other Liabilities Sche	dule		
Name:	Western North Carolin	na Community	
	Homes 9 Inc		
EIN:	30-0147138		
Software ID:	15000324		
Software Version:	2015v3.0		
Description		Beginning of Year - Book Value	End of Year - Book Value
Tenant security deposits held in trust		1,385	916
HUD PRAC excess residual rec liability			19,802