Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. \overline{A} For the 2016 calendar year, or tax year beginning . 20 2016, and ending D Employer identification number C Name of organization SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC. Check if applicable: Address change Doing business as 20-2749954 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Initial return C/O KEITH W. VAUGHAN, ONE WEST FOURTH STREET 1200 336-721-3600 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ WINSTON-SALEM, NC 27101-3806 1,252,964. Amended return H(a) Is this a group return for subordinates? Yes No Application pending F Name and address of principal officer: **KEITH W. VAUGHAN AT ABOVE ADDRESS** H(b) Are all subordinates included? Tyes No If "No," attach a list, (see instructions) √ 501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status: H(c) Group exemption number ▶ Website: ▶ smithshaverscholarship.org Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 2005 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: TO PROMOTE AND ENCOURAGE EDUCATIONAL OPPORTUNITY AND EXCELLENCE THROUGH SCHOLARSHIPS, BASED PRIMARILY ON NEED, FOR NORTH CAROLINA Activities & Governance RESIDENTS ATTENDING SUPPORTED NORTH CAROLINA LAW SCHOOLS. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 3 Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) 4 7 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 6 7 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -0-Net unrelated business taxable income from Form 990-T, line 34 7b -0-**Current Year** 8 Contributions and grants (Part VIII, line 1h) . -0--0-Revenue Program service revenue (Part VIII, line 2g) -0--0-10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 40,034. 316,399. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . -0-12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 40,034 316,399. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 300,000. 300,000. 14 Benefits paid to or for members (Part IX, column (A), line 4) -0--0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) -0--0-16a Professional fundraising fees (Part IX, column (A), line 11e) -0--0-Total fundraising expenses (Part IX, column (D), line 25) ▶ h 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 31,055 30,327. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 331,055. 330,327. 19 Revenue less expenses. Subtract line 18 from line 12 (291,021.) (13,928.)End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) 6,046,960. 6,175,793. 21 Total liabilities (Part X, line 26) . . . 300,000. 300,000. 22 Net assets or fund balances. Subtract line 21 from line 20 5,746,960. 5,875,793. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of office Sign W. Wavid Secretary and Irecsurer. Here Type or print name and title Print/Type preparer's name Preparer's signature Check [if **Paid** self-employed Preparer Firm's EIN ▶ Firm's name Use Only Firm's address ▶ Phone no.

Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

Part	Ш	Statement of Program Service Accomplishments	
		Check if Schedule O contains a response or note to any line in this Part III	🗸
1		fly describe the organization's mission:	
	TO P	PROMOTE AND ENCOURAGE EDUCATIONAL OPPORTUNITY AND EXCELLENCE THROUGH SCHOLARSHIPS BASE	D PRIMARILY
	ON N	NEED FOR NORTH CAROLINA RESIDENTS ATTENDING THE LAW SCHOOLS AT CAMPBELL UNIVERSITY, DUKE UN	IIVERSITY,
	NOR	TH CAROLINA CENTRAL UNIVERSITY, THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL, AND WAKE FOR	EST
		/ERSITY.	
2		the organization undertake any significant program services during the year which were not listed on the	_
	•		Yes 🗹 No
		es," describe these new services on Schedule O.	
3		the organization cease conducting, or make significant changes in how it conducts, any program	
			Yes 🗹 No
		es," describe these changes on Schedule O.	
4		cribe the organization's program service accomplishments for each of its three largest program services, as	
		enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ons to others
	the t	total expenses, and revenue, if any, for each program service reported.	
4a	(Cod		-0-)
	THE	SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC., THROUGH ITS SUPPORTED ORGANIZATIONS, AWARD	ED NEW
	SCH	OLARSHIPS TO NORTH CAROLINA RESIDENTS IN THE AMOUNT OF \$300,000, PAYABLE OVER THREE YEARS OF	
	LAW	/ SCHOOL (\$100,000 PER YEAR).	
	DUR	ING 2016, THE SCHOLARSHIP FUND PAID \$300,000 IN SCHOLARSHIPS FOR OVER FIFTY STUDENTS ATTENDING T	HE
	SUPF	PORTED LAW SCHOOLS.	********
	FOR	THE PERIOD 2006-2016, THE SCHOLARSHIP FUND PAID \$3,000,000 FOR SCHOLARSHIPS TO THE SUPPORTED	
	LAW	SCHOOLS.	
	201200		
4b	(Cod	de:) (Expenses \$including grants of \$) (Revenue \$)

	2002270		
	F33574785		
	9500000		
4c	(Cod	de:) (Expenses \$including grants of \$) (Revenue \$)

	-		
4d		er program services (Describe in Schedule O.)	
4d	(Expe	er program services (Describe in Schedule O.) enses \$ including grants of \$) (Revenue \$) I program service expenses \$ 300,000.	

Form 990 (2016)

Part	Checklist of Required Schedules			
4	le the expenientian described in section E01(a)(2) or 4047(a)(1) (ather than a private foundation)? If #Vec."		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		✓
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
1750 1850	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		· ✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
			000	

Part	Checklist of Required Schedules (continued)			
			Yes	No
		20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
С	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	S (1)		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	/	

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Official in Contential Contential a response of flote to any line in this reactive.	÷	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0-			1,10
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b -0-	0	May.	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a -0-			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		emps.	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
Ь	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
e -	(FBAR).			,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		1
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b		- Vu		-
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			85
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	No.	VE W	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	en en en en	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		10-225	
_	sponsoring organization have excess business holdings at any time during the year?	8	0.000	
9	Sponsoring organizations maintaining donor advised funds.	00	HIN	
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:	N. Sur		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	e ill		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			e D
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	net.		in the
C	Enter the amount of reserves on hand	44-		,
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		V
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.. 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE REQUIRED Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ☐ Another's website Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ W. DAVID EDWARDS, PRIVATE ADDRESS (SEE SCHEDULE O FOR CONTACT INFORMATION)

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☑ Check this box if neither the organization n	or any relate	d org	aniz	atio	on c	ompe	nsa	ated any currer	nt officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	Position (do not check more that box, unless person is both officer and a director/tru					an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) G. EUGENE BOYCE	1.2									
DIRECTOR, VICE PRESIDENT, BD VICE CHAIR		1		1				-0-	-0-	-0-
(2) KEITH W. VAUGHAN	0.5	1000								
DIRECTOR, PRESIDENT, BOARD CHAIR		1		1				-0-	-0-	-0-
(3) W. DAVID EDWARDS	2.5									
DIRECTOR, SECRETARY, TREASURER	W	1		1				-0-	-0-	-0-
(4) ARCH T. ALLEN	0.5									
DIRECTOR		1						-0-	-0-	-0-
(5) WANDA G. BRYANT	0.5									
DIRECTOR		1						-0-	-0-	-0-
(6) COLON WILLOUGHBY, JR.	0.5									
DIRECTOR		✓						-0-	-0-	-0-
(7) JOHN MARTIN	0.5									
DIRECTOR		1						-0-	-0-	-0-
(8)										
(9)										
(10)										-31 - H - 175 - H
<u>(11)</u>										
(12)	1									
(13)										
(14)										

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	/ees	s, aı	nd F	lighe	st C	ompensated E	mployees (c	ontinue	ed)	
	(A) Name and title	(B) Average hours per						Reportable	(E) Reportable compensation from		(F Estim amou	ated	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatior (W-2/1099-Mi		oth comper from organiz and re organiz	sation the ration lated
(15)													
(16)													
(17)													
(18)													
(19)													
(20)											+		
(21)													
(22)					71 7								
(23)												-	
(24)												-7	
(25)											+		
1b c	Sub-total						•	> > >	-0- -0-	2011032	-0-		-0- -0-
d	Total (add lines 1b and 1c)	not limited					above	▶ e) w	ho received me		0,000	of	-0-
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8	ficer, direct							oloyee, or high	est compen	sated	3	res No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	greater that	an \$1	50,	000	? //	"Ye	s, "	complete Sch			4	1
5	Did any person listed on line 1a receive of for services rendered to the organization											5	1
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.												's tax
	(A) Name and business add	ress		et excen					(B) Description of s	ervices	C	(C) compensat	ion
NONE													
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who			

Par	t VIII	Statement of Rev Check if Schedule (a roor	onee or note to	any line in this	Part VIII		
		Check ii Schedule (o contains	a res	Jonse of Hote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
ts	1a	Federated campaign	s	1a	-0-				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	-0-				
S, G	С	Fundraising events .		1c	-0-				
Sift lar	d	Related organization	s	1d	-0-				
in is	e	Government grants (co		1e	-0-				
tior sr S	f	All other contributions, (
đ š		and similar amounts not in		1f	-0-				
d de	g	Noncash contributions inclu		107073	-0-				
<u>5 5</u>	h	Total. Add lines 1a-	if		>	-0-			
Program Service Revenue					Business Code			SOV, ES SEDENIN	Brewin
eve	2a	***************************************							
9	b	***************************************							
Ž	d	***************************************							
Š	e								
gra	f	All other program ser	rvice reveni	ie .	-0-	-0-	-0-	-0-	-0-
P	g	Total. Add lines 2a-2				-0-	National State of	TW THEFT	
-	3	Investment income							
		and other similar amo			>	179,281.	-0-	-0-	179,281.
	4	Income from investmen	nt of tax-exe	mpt bo	nd proceeds ►	-0-	-0-	-0-	-0-
	5	Royalties			▶	-0-	-0-	-0-	-0-
			(i) Rea		(ii) Personal				
	6a	Gross rents		-0-	-0-				
	b	Less: rental expenses		-0-	-0-				
	С	Rental income or (loss)		-0-	-0-	avertices and the second	Str Beats S		
	_d	Net rental income or				-0-	-0-	-0-	-0-
	7a	Gross amount from sales of	(i) Securit	(6.00	(ii) Other	NV PIN COL			
		assets other than inventory Less: cost or other basis	1,07	3,683.	-0-				
	ь	and sales expenses					Stan Stan		
	c	Gain or (loss)		6,565. 7,118.	-0- -0-				
	d	Net gain or (loss)			▶	137,118.	-0-	-0-	137,118.
	ľ	rect gain or (1033)				137,116.		ETAIL CALLS	137,110
venue	8a	Gross income from freevents (not including \$							
Other Re		of contributions report See Part IV, line 18		c).	-0-				
¥	b	Less: direct expense	s	. b	-0-				
•		Net income or (loss)			events . ►	-0-		-0-	-0-
	9a	Gross income from g	_	19					
				-	-0-				
		Less: direct expense			-0-		FIRST	ASSESSED FOR STREET	
		Net income or (loss)	-		/ities ▶	-0-	-0-	-0-	-0-
	10a	Gross sales of in returns and allowance							
	·			а	-0-				
	Ь	Less: cost of goods :			-0-				
	С	Net income or (loss): Miscellaneous F		OI IIIVE	Business Code	-0-	-0-	-0-	-0-
	11a				Saumess Code				
	b	***************************************							
	C								
	ď	All other revenue .			-0-	-0-	-0-	-0-	-0-
	e	Total. Add lines 11a-				-0-			OF THE PARTY OF TH
1	12	Total revenue. See i			▶	316 300	0		316 399

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must com	piete ali columns. /	Ali otner organizatioi	ns must complete co	olumn (A).
Check if Schedule O contains a respons	se or note to any li	ine in this Part IX		
Do not include amounts reported on lines 6b, 7b, 8b. 9b. and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraisi

	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	-0-	-0-		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	300,000.	300,000.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	-0-	-0-		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	-0-	-0-	-0-	-0-
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	-0-	-0-	-0-	-0-
7 8	Other salaries and wages	-0-	-O- -O-	-0-	-0-
9	Other employee benefits	-0- -0-	-0-	-0-	-0-
10 11	Payroll taxes	-0-	-0-	-0-	-0-
a	Management	-0- -0-	-0-	-0-	-0- -0-
b b	Accounting	-0-	-0-	-0-	-0-
d	Lobbying	-0-	-0-	-0-	-0-
e	Professional fundraising services. See Part IV, line 17	-0-			-0-
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column	30,275	-0-	30,275.	-0-
	(A) amount, list line 11g expenses on Schedule O.)	-0-	-0-	-0-	-0-
12	Advertising and promotion	-0-	-0-	-0-	-0-
13	Office expenses	-0-	-0-	-0-	-0-
14	Information technology	-0-	-0-	-0-	-0-
15	Royalties	-0-	-0-	-0-	-0-
16	Occupancy	-0- -0-	-0-	-0- -0-	-0- -0-
17 18	Payments of travel or entertainment expenses	-0-	-0-	-0-	-0-
	for any federal, state, or local public officials	-0-	-0-	-0-	-0-
19	Conferences, conventions, and meetings	-0-	-0-	-0-	-0-
20	Interest	-0-	-0-	-0-	-0-
21	Payments to affiliates	-0-	-0-	-0-	-0-
22	Depreciation, depletion, and amortization	-0-	-0-	-0-	-0-
23	Insurance	-0-	-0-	-0-	-0-
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b	WEBSITE DOMAIN EXPENSE	52.	-0-	52.	-0-
c d					
e	All other expenses	-0-	-0-	-0-	-0-
25	Total functional expenses. Add lines 1 through 24e	330,327.	300,000.	30,327.	-0-
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				5 900 (0010)

34

6,175,793. Form **990** (2016)

6,046,960.

34

Total liabilities and net assets/fund balances . . .

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1 763. 711. 2 2 187,257. 108,660. 3 3 -0--0-4 4 -0--0-Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 -0--0-Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 -0--0-Assets 7 -0-7 -0-8 8 -0--0-Prepaid expenses and deferred charges . . . 9 9 -0--0-Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c b -0--0--0-Investments-publicly traded securities 11 11 5,858,940. 6.066,422. 12 12 Investments—other securities. See Part IV, line 11 . . . -0--0-13 Investments—program-related. See Part IV, line 11 13 -0--0--0-14 14 -0-15 15 Other assets. See Part IV, line 11 -0--0-16 Total assets. Add lines 1 through 15 (must equal line 34) . . 16 6,046,960. 6,175,793 17 17 Accounts payable and accrued expenses -0--0-18 18 300,000. 300,000. 19 19 -0--0-20 20 -0--0-Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 -0--0-Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 n. -0-23 Secured mortgages and notes payable to unrelated third parties . . . 23 -0--0-24 24 Unsecured notes and loans payable to unrelated third parties . . . -0--0-25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 -0--0-Total liabilities. Add lines 17 through 25 . . . 26 26 300,000. 300,000. Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 Net Assets or Fund 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 -0--0-31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . -0--0-32 Retained earnings, endowment, accumulated income, or other funds. 32 5,746,960. 5,875,793. 33 33 5,746,960. 5,875,793.

Page	~
1 040	

7 Investment expenses	Par	XI Reconciliation of Net Assets				
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Solution of the deciding of the structure of the		Check if Schedule O contains a response or note to any line in this Part XI				
Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Net unrealized gains (losses) on investments Donated services and use of facilities Prior period adjustments Prior period adjustments Net assets or fund balances (explain in Schedule O) Net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis ☐ Consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis ☐ Consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization und	1	Total revenue (must equal Part VIII, column (A), line 12)	1		31	6,399.
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)	2		33	0,327.
Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 1 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2 Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis, or both: ☐ Separate basis ☐ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis, or both: ☐ Separate basis ☐ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis ☐ Both consolidated and separate basis ☐ If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 5 If "Yes," did the organiza	3		-		(13	3,928.)
6 Donated services and use of facilities	4				5,74	6,960.
7 Investment expenses	5	Net unrealized gains (losses) on investments			14	2,761.
8 Prior period adjustments	6					-0-
9 Other changes in net assets or fund balances (explain in Schedule O)	7					-0-
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	8					-0-
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	9	Other changes in net assets or fund balances (explain in Schedule O)	9			-0-
Check if Schedule O contains a response or note to any line in this Part XII	10					
Check if Schedule O contains a response or note to any line in this Part XII			10		5,87	5,793.
Accounting method used to prepare the Form 990:	Part					_
1 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?		Check if Schedule O contains a response or note to any line in this Part XII				
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: □ Separate basis □ Consolidated basis □ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?					Yes	No
Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: □ Separate basis □ Consolidated basis □ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?	1	Accounting method used to prepare the Form 990: ✓ Cash			1	
Were the organization's financial statements compiled or reviewed by an independent accountant?			kpiain in			
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: □ Separate basis □ Consolidated basis □ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: □ Separate basis □ Consolidated basis □ Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.				0		,
reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	2a			2a	Rule	_
 Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?			iplied or			
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		_		1000		
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?. b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.				04		,
separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	b		od on a	20	10000	_
Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		· ·	eu on a	0.0		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.				weight.		
of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			versiaht	R. IIII SAV	SHOULE	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	С	of the audit review or compilation of its financial statements and selection of an independent acco	untant?	20		
Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?. 5 If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b				20	(ASSE)	EUS
 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?. b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b 			Apiaiiriii	V-10-20		
the Single Audit Act and OMB Circular A-133?	20		forth in	200000		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b	Ja			30		1
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	E.			Ja		-
	D			3b		
				For	n 990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

open to Public Inspection

Employer identification number

				_					
SMIT		VER LAW SCHOOL SCHOLAR Reason for Public Cha			comple	te this n	art) See instruction		
1000	CONTRACTOR OF THE PARTY OF THE	zation is not a private founda						113.	
1116		church, convention of churc							
,		school described in section							
2									
3		hospital or a cooperative hos medical research organization	spital service or	ganization described i	n sectio i	n 170(D)(seibad is r	i)(A)(iii). Sootion 170/b)/1\/A\/	iii) Enter the	
4	_	_	-	conjunction with a nos	pital desc	indea in s	section 170(D)(1)(A)(iii). Enter the	
_		ospital's name, city, and state					d by a gavernment	al unit doogrib	od in
5		organization operated for		college or university	owned c	or operate	ed by a government	ai uniit descrit	eu III
		ection 170(b)(1)(A)(iv). (Com							
6		federal, state, or local gover							
7		organization that normally			port from	n a gover	nmental unit or from	the general i	public
	de	escribed in section 170(b)(1)	(A)(vi). (Comple	ete Part II.)					
8		community trust described i							
9	☐ Ar	n agricultural research organ	ization describe	ed in section 170(b)(1)	(A)(ix) op	erated in	conjunction with a l	and-grant coll	ege
		university or a non-land-gra	nt college of ag	riculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or	•
		niversity:							
10	☐ Ar	organization that normally	receives: (1) mo	re than 331/3% of its si	upport fro	om contri	butions, membershi	fees, and gro	oss
	rec	ceipts from activities related	to its exempt fu	unctions—subject to c	ertain exi	ceptions,	and (2) no more that	1 331/3% Of Its	i
		equired by the organization a						Dualileasea	
11		n organization organized and							
		organization organized and						ry out the pur	noses
	of	one or more publicly suppo	orted organizatio	ons described in sect	ion 509(s	a)(1) or se	ection 509(a)(2). Se	section 509	(a)(3).
	Cr	neck the box in lines 12a thro	ugh 12d that de	escribes the type of sur	porting	organizati	on and complete line	s 12e, 12f, and	d 12g.
_			-			_			
а	! ✓	the supported organization							virig
		supporting organization. Ye					the directors or trust	ses of the	
			-						_
b	Ш	Type II. A supporting organ							
		control or management of				e persons	that control or man	age the suppo	rieu
	_	organization(s). You must	-	_				N !441	! & L
С	لــا	Type III functionally integ						uly integrated	witn,
	_	its supported organization(•					
d		Type III non-functionally i							
		that is not functionally integrated						d an attentive	ness
		requirement (see instructio	ns). You must (complete Part IV, Sec	ctions A	and D, ar	nd Part V.		
е		Check this box if the organ						II, Type III	
		functionally integrated, or	Type III non-fun	ctionally integrated su	pporting	organizat	ion.		
f	Ente	er the number of supported o	organizations .					5	
g		vide the following information							
	(i) Nan	ne of supported organization	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount	
				(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support instructions	
				above (see instructions))	0000	mont.	instructions)	instructions	"
					Yes	No			
/A\									
(A)	AMPRE	ELL UNIVERSITY, INC.	56-0529940	2	1		60,000.		-0-
		The state of the s							
(B)	UKE U	NIVERSITY	56-0532129	2	1		60,000.		-0-
			30 3332 :23						
	NIVER:	CAROLINA CENTRAL	56-6000730	2	1		60,000.		-0-
			00-0000730	-			50,500.		
		SITY OF NORTH CAROLINA	EC C001202	2	1		60,000.		-0-
	CHAI	PEL HILL	56-6001393	2			00,000.		-0-
(E)	AVE	ODEST LINUVERSITY	EC 0520420	2	1		60.000		0
Tota		OREST UNIVERSITY	56-0532138	2			60,000.		-0-

Part	(Complete only if you checked the	ne box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
	Part III. If the organization fails to	qualify und	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support				T		
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support	110010	#1 2040	110011	1 0 0045	1.3.0040	(A T)
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the						
	organization, check this box and stop her						· · · • []
-	on C. Computation of Public Suppor			4 1 (5)		Las I	0/
14	Public support percentage for 2016 (line 6		-			14	<u>%</u>
15 16a	Public support percentage from 2015 Sch 331/3% support test—2016. If the organi box and stop here. The organization qua	ization did not	check the box		nd line 14 is 33	31/3% or more,	check this
þ	331/s% support test—2015. If the organithis box and stop here. The organization	zation did not	check a box o	n line 13 or 16	Sa, and line 15		
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	ets the "facts	-and-circumst	ances" test, cl	heck this box a	and stop here	. Explain in
b 12	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	ntion meets the neets the "fac	ne "facts-and-o ts-and-circums	circumstances stances" test.	" test, check The organizati	this box and a don qualifies as	stop here. s a publicly ► □
18	Private foundation. If the organization di	u not check a	DOX OH TIME 13	, 10a, 100, 178	a, or 170, chec	א נוווס טטג מווט	300

Part	(Complete only if you checked th	e box on line	e 10 of Part I	or if the orga			nder Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	II.)	
	on A. Public Support		T = 1 = 2 = 2	1 110011	(0.0015	(10040	T 10 T 1 1
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge) 					
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.				100		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				•		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)				4		
14	First five years. If the Form 990 is for the organization, check this box and stop her	re		d, third, fourth			
	on C. Computation of Public Suppor			0 1 (5)		T 4= T	
15	Public support percentage for 2016 (line 8		•				%
16	Public support percentage from 2015 Sch					16	%
	on D. Computation of Investment Inc Investment income percentage for 2016 (I			w line 12 octo	mn (fl)	17	%
17 18 19a	Investment income percentage for 2016 (Investment income percentage from 2015 331/2% support tests—2016. If the organi	Schedule A,	Part III, line 17			18	%
b	17 is not more than 33½%, check this box 33½% support tests—2015. If the organiz line 18 is not more than 33½%, check this b	and stop here ation did not d	. The organizati check a box on	on qualifies as line 14 or line	a publicly supp 19a, and line 16	orted organizat 3 is more than	tion . ► [33¹/₃%, and

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

S

ecti	ion A. All Supporting Organizations		1	
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		Yes	No
2	class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	1	1	
3a	organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2	1	
	(b) and (c) below.	За		1
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		1
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		1
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		1
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		1
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		1
9а	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		1
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	l in	1
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		1
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		1

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b

Marie Control				
Part	Supporting Organizations (continued)			
44			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	1000	Ш.	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	2000	1
.	A family member of a person described in (a) above?	11b		-/
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c	-	1
	on B. Type I Supporting Organizations	1110		
	on billypoliouppoling organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	# PK		4
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	in Olive		
		1		1
2	Did the organization operate for the benefit of any supported organization other than the supported			2115
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	•		
Cooti	on C. Type II Supporting Organizations	2		V
Secu	on C. Type it Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	(X)		
	or management of the supporting organization was vested in the same persons that controlled or managed	Healt.		
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations		W	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			14-Si
		1	39.00	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		Mark.
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-	Militar	
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			,
Ь	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see in	struct	ions).
•	Activities Took Anauras (a) and (b) below		Yes	No
2	Activities Test. Answer (a) and (b) below.	800010	162	140
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2.3%	Y oye	
	trustees of each of the supported organizations? Provide details in Part VI.	3a	A CONTRACTOR OF THE PARTY OF TH	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard.	3b		
	TOTALS SUCCESSED DECIDENCE OF THE SECURE OF SUCCESSED FROM THE PROPERTY OF THE OFFICE OF THE OFFICE OF THE SUCCESSED OF THE OFFICE OFFICE OF THE OFFICE OF THE OFFICE OFFI	- 30		

Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
ion A - Adjusted Net Income (A) Prior Year			(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		(2) 2
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly int	tegrated Type III support	ing organization (see

Schedule A (Form 990 or 990-EZ) 2016

Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
-	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
ľ	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016 Page **8**

Part VI Supplemental Information. Provide the explanations required by III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9 B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section lines 2, 5, and 6. Also complete this part for any additional information.	b, 9c, 11a, 11b, and 11c; Part IV, Section 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, n D, lines 5, 6, and 8; and Part V, Section E,
PART I, LINES 12a & 12f. THE JUNE 3, 2005 IRS LETTER RULING PROVIDES THE SCHOLA	ARSHIP FUND WITH PUBLIC CHARITY STATUS
PURSUANT TO INTERNAL REVENUE CODE SECTION 509(a)(3) BUT DOES NOT SPECIFY T	THE TYPE. THE SCHOLARSHIP FUND'S
FORM 1023 SPECIFIED THAT FIVE OF THE SEVEN BOARD MEMBERS WOULD BE APPOIN	ITED BY THE DEANS OF THE SUPPORTED
LAW SCHOOLS. THE SCHOLARSHIP FUND'S FORM 1023 AND THE IRS LETTER RULING.	ARE POSTED ON THE SCHOLARSHIP FUND'S
WEBSITE AT WWW.SMITHSHAVERSCHOLARSHIP.ORG.	
PART IV, SECTION A, LINE 2. THE SUPPORTED ORGANIZATIONS ARE EDUCATIONAL IN	STITUTIONS. THREE OF THE UNIVERSITIES
ARE TAX-EXEMPT 501(c)(3) EDUCATIONAL ORGANIZATIONS CLASSIFIED BY THE IRS AS	PUBLIC CHARITIES. ALL THREE ARE
SECTION 170(b)(1)(A)(ii) ORGANIZATIONS. THE REMAINING ORGANIZATIONS ARE STAT	E UNIVERSITIES. IT IS NOTED THAT
THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL, ALTHOUGH A GOVERNMENT	ENTITY, HAS AN INTERNAL REVENUE SERVICE
LETTER STATING THAT IRS RECORDS INDICATE THAT IT IS NOT A PRIVATE FOUNDATION	ON BECAUSE IT IS DESCRIBED IN SECTIONS
509(a)(1) AND 170(b)(1)(A)(ii). THE IRS, HOWEVER, DOES NOT LIST NORTH CAROLINA CI	ENTRAL UNIVERSITY AS A PUBLIC CHARITY.
IRRESPECTIVE OF WHETHER THE IRS LETTER APPLICABLE TO THE UNIVERSITY OF NO	RTH CAROLINA AT CHAPEL HILL INCLUDES
OTHER MEMBERS OF THE UNIVERSITY OF NORTH CAROLINA SYSTEM, NORTH CAROLI	NA CENTRAL UNIVERSITY ITSELF IS A
STATE UNIVERSITY.	
PART IV, SECTION B, LINE 1. AS PERMITTED BY THE REGULATIONS AND IN ACCORD W	/ITH THE FORM 1023 APPLICATION RESULTING
IN THE JUNE 3, 2005 IRS LETTER RULING GRANTING SUPPORTING ORGANIZATION STA	TUS TO THE SCHOLARSHIP FUND,
FIVE BOARD MEMBERS (OF A TOTAL OF SEVEN BOARD MEMBERS) ARE APPOINTED BY	THE LAW SCHOOL DEANS OF THE
SUPPORTED ORGANIZATIONS. EACH DEAN APPOINTS ONE BOARD MEMBER TO REPR	ESENT HIS OR HER LAW SCHOOL.
THE SCHOLARSHIP FUND'S FORM 1023 AND THE IRS LETTER RULING ARE POSTED ON	THE SCHOLARSHIP FUND'S WEBSITE AT
WWW.SMITHSHAVERSCHOLARSHIP.ORG. FURTHER, EACH LAW SCHOOL RECOMMEND	
SCHOLARSHIP. THE LAW SCHOOL REPRESENTATIVE ON THE SCHOLARSHIP FUND'S B	
STUDENTS RECOMMENDED BY THE RESPECTIVE SUPPORTED LAW SCHOOL.	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC. 20-2749954 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education)
Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of it collection items (check all that apply): a
b
b
c
A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Pai XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
assets to be sold to raise funds rather than to be maintained as part of the organization?
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount
c Beginning balance . 1c
c Beginning balance
d Additions during the year e Distributions during the year f Ending balance
Part V Ending balance
f Ending balance
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. □ Part V
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (for Three
1a Beginning of year balance S,046,960. S,046,960. S,046,960. S,048,152. S,041,593. S,041,594. b Contributions S,046,960. S,046,960. S,046,960. S,046,960. S,046,960. c Net investment earnings, gains, and losses S,046,960. S,046,960. S,046,960. d Grants or scholarships S,000,000. S,000,000. S,000,000. S,000,000. d Grants or scholarships S,046,960. S,0
1a Beginning of year balance 6,046,960. 6,516,500. 6,428,152. 6,213,593. 5,831,594. b Contributions -0-<
b Contributions
c Net investment earnings, gains, and losses
losses
d Grants or scholarships 300,000. 300,000. 300,000. 300,000. 300,000. 300,000. e Other expenditures for facilities and programs
e Other expenditures for facilities and programs
programs
f Administrative expenses . 30,327. 31,055. 31,564. 30,411. 29,305 g End of year balance . 6,175,793. 6,046,960. 6,516,500. 6,428,152. 6,213,593 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100% b Permanent endowment ▶ 0% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
g End of year balance
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ 100% Permanent endowment ▶ 0% Temporarily restricted endowment ▶ 0% The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
a Board designated or quasi-endowment ▶ 100% b Permanent endowment ▶ 0% Temporarily restricted endowment ▶ 0% The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
b Permanent endowment ▶ 0% c Temporarily restricted endowment ▶ 0% The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
c Temporarily restricted endowment ▶ 0% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations Yes No (ii) related organizations 3a(i) ✓
organization by: Yes No (i) unrelated organizations
(i) unrelated organizations
(ii) related organizations
h If "Vee" on line 3a(ii), are the related organizations listed as required on Schedule R?
Describe in Part XIII the intended uses of the organization's endowment funds.
Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other)
1a Land
b Buildings
c Leasehold improvements
d Equipment
e Other

	Complete if the organization a	inswered yes on Fo	orm 990. Part IV. line	11b. See Form 990, Part X, line
	(a) Description of security or cate (including name of security)		(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financia	derivatives	6 36 26 26 26 3		
	neld equity interests			
Other				
(A)				
B)				
C)				
D)				
E)				
(F) (G)				
(G) (H)			-	**************************************
	b) must equal Form 990, Part X, col. (B) line 12.)			
art VIII	Investments—Program Rela			
THE ALLE			orm 990. Part IV. line	11c. See Form 990, Part X, line
	(a) Description of investment		(b) Book value	(c) Method of valuation:
	(-)		*** **************	Cost or end-of-year market value
)				
- HEILER				
)				
)				
)				
)			1	
)				- Co
3)				
327				
9)	h) must equal Form 990, Part X, col. (R) line 13.1			
9)	b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.		orm 990 Part IV line	11d See Form 990 Part X line
) al. (Column (Other Assets.		orm 990, Part IV, line	11d. See Form 990, Part X, line (b) Book value
o) al. (Column (Part IX	Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
) al. (Column (Part IX)	Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
) al. (Column (Part IX	Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
al. (Column (Part IX	Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
al. (Column (Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
) al. (Column (art IX))))	Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
al. (Column (Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
al. (Column (Other Assets.	nswered "Yes" on Fo	orm 990, Part IV, line	
) al. (Column (art IX)))))))	Other Assets. Complete if the organization a	nswered "Yes" on Fo		(b) Book value
al. (Column (Other Assets. Complete if the organization a	nswered "Yes" on Fo		(b) Book value
) al. (Column (art IX)))))))))	Other Assets. Complete if the organization a mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (Other Assets. Complete if the organization a mn (b) must equal Form 990, Part X Other Liabilities.	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (art IX)	Other Assets. Complete if the organization a mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25.	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (art IX))))))))) tal. (Column (co	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (Part IX) art IX art IX art IX art IX art IX art IX bridge art IX	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (Part IX) art IX))))))))) tal. (Column (Part IX) Part X	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (lart IX))))))))))) tal. (Column (lart IX)))))))))))))))))))	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Cool. (B) line 15.)		(b) Book value
al. (Column (lart IX) art IX art IX by column (lart IX) colum	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Col. (B) line 15.)		(b) Book value
al. (Column (lart IX) art IX art IX bridge art IX column (lart IX) bridge art X column (lart IX) bridge bridge column (lart IX) column (lart IX)	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Col. (B) line 15.)		(b) Book value
al. (Column (lart IX) art IX art IX by column (lart IX) colum	mn (b) must equal Form 990, Part X Other Liabilities. Complete if the organization a line 25. (a) Description of liability	(a) Description (c) Col. (B) line 15.)		(b) Book value

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part			Return.
-	Complete if the organization answered "Yes" on Form 990,		T
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	Î a Î	- 70
a	Net unrealized gains (losses) on investments		-
þ	Donated services and use of facilities		-
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	1 . 7	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	(Harmonia)	
_	Add lines 4a and 4b		40
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Stater	nents With Expenses p	er Heturn.
	Complete if the organization answered "Yes" on Form 990,		1.1
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	Te≆ Î	
а	Donated services and use of facilities		
b	Prior year adjustments		-
C	Other losses		_
d	Other (Describe in Part XIII.)		MAN STATE
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	0 . 4	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		omits.
а	Investment expenses not included on Form 990, Part VIII, line 7b		
Ь	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5
	XIII Supplemental Information.	14.5 184.5 45 10	L. D. J.V. Box J. Box V. Box
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar	nd 4; Part IV, lines 1b and 2	b; Part V, line 4; Part X, line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par		
PART	V, LINE 4. THE SCHOLARSHIP FUND WAS ESTABLISHED, AND HAS BEEN U	SED EXCLUSIVELY, TO SUP	PORT THE LAW SCHOOLS
AT CA	MPBELL UNIVERSITY, DUKE UNIVERSITY, NORTH CAROLINA CENTRAL UN	VERSITY, THE UNIVERSITY	OF NORTH CAROLINA AT
CHAPI	EL HILL, AND WAKE FOREST UNIVERSITY, PURSUANT TO THE JUNE 3, 2004	ORDER OF THE HONORAB	LE HOWARD E. MANNING,
JR., N	DRTH CAROLINA SUPERIOR COURT JUDGE, IN THE CONSOLIDATED CLASS	ACTIONS KNOWN AS SMIT	H v. STATE OF
NORTI	I CAROLINA AND SHAVER v. STATE OF NORTH CAROLINA. THE PRIMARY	INTENDED USE OF THE END	OWMENT IS TO
			ans only access to an access to
PROVI	DE SCHOLARSHIPS, BASED PRIMARILY ON NEED, TO NORTH CAROLINA R	ESIDENTS TO ATTEND THE	SUPPORTED
LAW S	SCHOOLS.		

Page 5	lule D (Form 990) 2016	Schedule D (For
	Iule D (Form 990) 2016 XIII Supplemental Information (continued)	Part XIII
	e de la companya de La companya de la comp	
WHAT STORY WHILE PROJECTION SOFTWARE A STORY WAS A STORY OF THE STORY WHILE PROJECTION OF THE ST		

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Open to Public Inspection 2016

Employer identification number 20-2749954

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC.	LARSHIP FUND, IN	C. Assistance					20-2749954	
Does the se	ain records to sub award the grants	stantiate the amou	unt of the grants or	assistance, the g	grantees' eligibility fo	r the grants or assistan	ice, and	<u>8</u>
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ization's procedu	res for monitoring	the use of grant fu	nds in the United	States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Do for any recipient	mestic Organiz that received m	ations and Don ore than \$5,000.	nestic Governm Part II can be d	nents. Complete if uplicated if addition	the organization ans onal space is needed	wered "Yes" on F	orm
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	grant
(1)								
(2)								
(6)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and gor	vernment organiza d in the line 1 table	itions listed in the	line 1 table			.	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ns for Form 990.		S	Cat. No. 50055P		Schedule I (Form 990) (2016)	1 990) (2016)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 SCHOLARSHIPS FOR LAW SCHOOLS	57	300,000.	Ō.	-0- NOT APPLICABLE	NOT APPLICABLE
2					
3					
4					
9					
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, lin	e 2; Part III, columr	(b); and any other addit	ional information.
PART 1, LINES 1 & 2. THE SCHOLARSHIP FUND MAINTAINS RECORDS OF TRANSFERS OF FUNDS AS DIRECTED BY THE FIVE SUPPORTED LAW SCHOOLS, INCLUDING WIRE AND	AINS RECORDS OF	TRANSFERS OF FUND	S AS DIRECTED BY T	HE FIVE SUPPORTED LAW S	CHOOLS, INCLUDING WIRE AND
AUTOMATED CLEARING HOUSE TRANSFERS, AND FINANCIAL	ANCIAL RECORDS	AS WELL AS THE SCH	OLARSHIP FUND'S FIR	RECORDS AS WELL AS THE SCHOLARSHIP FUND'S FINANCIAL INSTITUTION'S MONTHLY STATEMENTS.	NTHLY STATEMENTS. ALL ARE
AVAILABLE TO BOARD MEMBERS. THE SCHOLARSHIP FUND WORKS WITH THE ADMISSIONS OFFICE OF EACH SUPPORTED LAW SCHOOL, WHICH RECOMMENDS SCHOLARSHIP	P FUND WORKS WIT	THE ADMISSIONS O	FFICE OF EACH SUPP	ORTED LAW SCHOOL, WHI	CH RECOMMENDS SCHOLARSHIP
CANDIDATES BASED ON THE CRITERIA PROVIDED BY THE SCHOLARSHIP FUND IN ACCORDANCE WITH THE JUNE 3, 2004 ORDER OF NORTH CAROLINA SUPERIOR COURT JUDGE	THE SCHOLARSHIF	FUND IN ACCORDANG	CE WITH THE JUNE 3,	2004 ORDER OF NORTH CA	ROLINA SUPERIOR COURT JUDGE
HOWARD E. MANNING, JR. THE FINANCIAL INFORMATION PRO	ION PROVIDED BY	SCHOLAR CANDIDATE	S IS MAINTAINED BY	VIDED BY SCHOLAR CANDIDATES IS MAINTAINED BY THE LAW SCHOOLS. BOARD MEMBERS MEET WITH	D MEMBERS MEET WITH
SMITH/SHAVER SCHOLARS FROM TIME TO TIME AND IN MOST	N MOST CASES AR	E PROVIDED UPDATES	REGARDING SCHOL	ARS THROUGH THE LAW SC	CASES ARE PROVIDED UPDATES REGARDING SCHOLARS THROUGH THE LAW SCHOOLS. INDIVIDUAL SCHOLARSHIP
AMOUNTS VARY BY LAW SCHOOL WITH EACH LAW SCHOOL M	CHOOL MAINTAININ	G RECORDS ON ALLO	CATION AMONG SCH	DLARS. INDIVIDUAL SCHOL	AINTAINING RECORDS ON ALLOCATION AMONG SCHOLARS. INDIVIDUAL SCHOLARSHIPS HAVE RANGED FROM
\$5,000.00 PER YEAR TO \$20,000.00 PER YEAR. AWARDS ARE B	S ARE BASED PRIM	MARILY ON NEED, THE	RE ARE NO RESTRIC	TIONS OR LIMITATIONS BAS	ASED PRIMARILY ON NEED. THERE ARE NO RESTRICTIONS OR LIMITATIONS BASED UPON RACE OR EMPLOYMENT
STATUS. EACH LAW SCHOOL MAINTAINS RECORDS ON EACH		FAT THAT LAW SCHOO	OL AND UPDATES THE	FUND WITH RESPECT TO	RECIPIENT AT THAT LAW SCHOOL AND UPDATES THE FUND WITH RESPECT TO ANY SCHOLAR STATUS CHANGE.
PART III, LINE 1(a). INDIVIDUAL SCHOLARSHIPS ARE AWARDED THROUGH THE LAW SCHOOLS. EACH LAW SCHOOL RECEIVES THE SAME AMOUNT OF TOTAL AWARD FUNDS.	WARDED THROUG	H THE LAW SCHOOLS.	EACH LAW SCHOOL	RECEIVES THE SAME AMO	UNT OF TOTAL AWARD FUNDS.
PART III, LINE 1(b). THERE WERE OVER 50 SMITH/SHAVER SCHOLARS IN 2016.	VER SCHOLARS IN		TED DURING THE YEA	SOME GRADUATED DURING THE YEAR AND SOME BECAME STUDENTS DURING THE YEAR	DENTS DURING THE YEAR.

Schedule I (Form 990) (2016)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC. 20-2749954 FORM 990, PART III, LINE 1. THE SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC. WAS ESTABLISHED BY ORDER OF NORTH CAROLINA SUPERIOR COURT JUDGE HOWARD E. MANNING, JR. THROUGH A GRANT FROM THE SETTLEMENT FUND CREATED IN THE CLASS ACTIONS KNOWN AS SMITH V. STATE OF NORTH CAROLINA AND SHAVER V. STATE OF NORTH CAROLINA. THE INITIAL SCHOLARSHIP FUND CONSISTED OF THE \$6 MILLION REMAINING IN THE SETTLEMENT FUND AFTER PAYMENTS TO CLASS MEMBERS IN FULL AND FOR THE COSTS OF SETTLEMENT ADMINISTRATION. THE COURT DIRECTED THAT THE SCHOLARSHIP FUND BE USED TO PROVIDE SCHOLARSHIPS FOR NORTH CAROLINA RESIDENTS WHO ATTEND LAW SCHOOL AT ONE OF THE FOLLOWING: CAMPBELL UNIVERSITY, DUKE UNIVERSITY, NORTH CAROLINA CENTRAL UNIVERSITY, THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL, AND WAKE FOREST UNIVERSITY. SMITH/SHAVER SCHOLARSHIPS ARE BASED PRIMARILY ON NEED. FORM 990, PART VI, LINES 1b AND 7a. FIVE BOARD MEMBERS ARE APPOINTED TO REPRESENT THE LAW SCHOOLS. THE REMAINING TWO BOARD MEMBERS SERVE ON THE BOARD AS DIRECTED BY THE COURT ORDER NOTED ABOVE. FORM 990, PART VI, LINE 11b. EACH BOARD MEMBER RECEIVED A COPY OF FORM 990 AND RELATED SCHEDULES PRIOR TO FILING AND WAS PROVIDED AN OPPORTUNITY TO COMMENT. EACH BOARD MEMBER RECEIVED FINANCIAL UPDATES, INCLUDING AN ANNUAL INCOME STATEMENT, CASH FLOW STATEMENT, AND BALANCE SHEET FOR THE YEAR 2016 PRIOR TO THE FEBRUARY 2017 ANNUAL BOARD MEETING. THE FUND'S INVESTMENT MANAGER BANK APPEARED AT THE BOARD MEETING AND WAS CONSULTED AS NEEDED DURING 2016. AN ATTORNEY SPECIALIZING IN NONPROFIT ORGANIZATIONS LAW WAS ALSO CONSULTED. FORM 990, PART VI, LINE 12c. BOARD MEMBERS ABIDE BY THE CONFLICTS POLICY SET OUT IN THE BY-LAWS, WHICH REQUIRES A BOARD MEMBER, AMONG OTHER THINGS, TO DISCLOSE ANY DIRECT OR INDIRECT MATERIAL FINANCIAL INTEREST CONCERNING ANY TRANSACTION. DURING 2016 THE SCHOLARSHIP FUND ENGAGED IN NO TRANSACTIONS OTHER THAN RETENTION OF ITS INVESTMENT ADVISOR, PAYMENT FOR ITS WEBSITE DOMAIN, THE SETTING OF GENERAL INVESTMENT POLICY, AND TUITION PAYMENTS AS DIRECTED BY THE LAW SCHOOLS. NAMES OF SCHOLARSHIP CANDIDATES, SUBMITTED BY THE LAW SCHOOLS, ARE CIRCULATED AMONG BOARD MEMBERS TO ENSURE NO AWARDS WERE MADE TO POTENTIALLY EXCLUDED RELATIVES AND TO MINIMIZE THE POSSIBILITY OF CONFLICTS ARISING IN THE SELECTION PROCESS. ANY DISCUSSION REGARDING A

POTENTIAL CONFLICT IS MEMORIALIZED.

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC.	20-2749954
FORM 990, PART VI, LINE 13. THE SCHOLARSHIP FUND HAS NO EMPLOYEES. ALL OFFICERS ARE ALS	SO BOARD MEMBERS. FOR
THIS REASON, THE SCHOLARSHIP FUND DOES NOT HAVE A FORMAL WHISTLEBLOWER POLICY.	
FORM 990, PART VI, LINES 15a AND 15b. NO BOARD MEMBER OR OFFICER RECEIVES COMPENSATION	AS NO COMPENSATION IS
PAID, NO PROCESS BY WHICH COMPENSATION IS TO BE DETERMINED IS NEEDED.	
FORM 990, PART VI, LINES 18 &19. THE SCHOLARSHIP FUND'S WEBSITE WWW.SMITHSHAVERSCHOLA	RSHIP.ORG SETS OUT THE
FUND'S ARTICLES OF INCORPORATION, BY-LAWS, FORM 1023, AND THE FUND'S IRS AND NORTH CAR	OLINA EXEMPTION LETTERS.
THE WEBSITE INCLUDES FORM 990s AND RELATED SCHEDULES FOR ALL TAX YEARS OF THE SCHOL	ARSHIP FUND'S EXISTENCE.
THE WEBSITE ALSO PROVIDES A HISTORY OF THE SCHOLARSHIP FUND.	
THE WEBSITE ALSO PROVIDES A HISTORY OF THE SCHOLARSHIP FUND.	
FORM 990, PART VI, LINE 20. MR. EDWARDS MAINTAINS THE SCHOLARSHIP FUND'S RECORDS AT A P	RIVATE RESIDENCE, WHICH
S NOT REQUIRED TO BE DISCLOSED ON FORM 990. MR. EDWARDS MAY BE REACHED THROUGH THE	

CHAIR, KEITH W. VAUGHAN, AT THE SCHOLARSHIP FUND'S MAILING ADDRESS.	

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# SCHEDULE R (Form 990)

Name of the organization

SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC.

Parti

Related Organizations and Unrelated Partnerships

► Attach to Form 990.

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Open to Public 2016

OMB No. 1545-0047

Employer identification number Inspection

20-2749954

(g) Section 512(b)(13) controlled entity? (f) Direct controlling entity Yes No Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity (e) End-of-year assets 2 N/A 2 N/A Ν N/A N/A (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section 501(c)(3) 501(c)(3) GOVT. ENTITY 501(c)(3) GOVT. ENTITY (c) Legal domicile (state or foreign country) (c) Legal domícile (state or foreign country) NORTH CAROLINA NORTH CAROLINA NORTH CAROLINA NORTH CAROLINA NORTH CAROLINA (b) Primary activity (b) Primary activity **EDUCATION** EDUCATION **EDUCATION EDUCATION EDUCATION** (a) Name, address, and EIN (if applicable) of disregarded entity (4) UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL (a)
Name, address, and EIN of related organization (1) CAMPBELL UNIVERSITY INCORPORATED (3) NORTH CAROLINA CENTRAL UNIVERSITY MINSTON-SALEM, NC EIN: 56-0532138 BUIES CREEK, NC EIN: 56-0529940 CHAPEL HILL, NC EIN: 56-6001393 (5) WAKE FOREST UNIVERSITY **DURHAM, NC EIN: 56-0532129 DURHAM, NC EIN: 56-6000730** (2) DUKE UNIVERSITY Part II 2 Ε <u>0</u> € Ξ <u>O</u> 9 9

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016

Name, address, and EIN of related organization						V220V		2000					
(1)	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predo income unrel excluda tax u	Predominant She income (related, unrelated, excluded from tax under sections 512-514)	Share of total Share of total Share of total	(g) Share of end-of- year assets	(fh)  Disproportionate allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	UBI lox 20 e K-1 65)	(i) General or managing partner?	1000	(k) Percentage ownership
(1)					1			Yes	No		Yes No	0	
S													
(2)													
(6)													
(4)													
(5)											+	-	
(9)											+	+	
ø											+	-	
(a) (b) (c) (d) (d) (e) (d) (e) (e) (d) (e) (d) (e) (d) (d) (e) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d		(b)	allons liealed	88 B CO	G)	(e)	d ine lax	æar.	(5)	L	3	150	
Name, address, and EIN of related organization	ization	Primary activity	Legal domicile (state or foreign country)	-	Direct controlling entity	Type (C corp, S		Share of total income	Share of end-of-year assets		tage	Section 512( controlle entity?	Section 512(b)(13) controlled entity?
( <b>5</b> )										_		Yes	£
(2)										-			
(9)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									-			
(4)										-	T		
(5)													
(9)										-			
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Schedule R (Form 990) 2016

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note:	<b>Note:</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ŝ
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts IIIV?	nore related orgar	izations listed in Parts	s II–IV?			
æ ⊥	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	**	* * * * * * * * * * * * * * * * * * * *		-		>
٩	Gift, grant, or capital contribution to related organization(s)				4		>
v	Gift, grant, or capital contribution from related organization(s)				5		>
_ _	Loans or loan guarantees to or for related organization(s)				19		>
•	Loans or loan guarantees by related organization(s)				4		
		•			<u> </u>		>
<b>+</b>	Dividends from related organization(s)				÷		>
<b>5</b> 3	Sale of assets to related organization(s)				19		>
æ	Purchase of assets from related organization(s)				£		>
<u>-</u>	Exchange of assets with related organization(s)				=	Ī	>
j	Lease of facilities, equipment, or other assets to related organization(s)			3	=		>
د	forces of facilities continued or appear accords from values according to						
	Lease of racinities, equipment, or other assets from related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)				=	1	>
. 8	Performance of services or membership or fundraising solicitations by related organization(s)				£	T	-
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				=	İ	>
0	Sharing of paid employees with related organization(s)				Ç		٠/>
		§ • •			2		ı
o.	Reimbursement paid to related organization(s) for expenses		** ** ** ** ** ** ** ** ** ** ** ** **	2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10		>
	Reimbursement paid by related organization(s) for expenses		** ** ** ** **	* * * * * * * * * * * * * * * * * * * *	19		>
	Other transfer of cash or property to related organization(s)	•			÷	`	1
	Other transfer of cash or property from related organization(s)				1s		>
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	elete this line, incli	uding covered relation	ships and transac	tion thre	plouse	ŝ
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	<b>(d)</b> ning amoun	rt involve	<b>1</b> 0
(1) SEE	(1) SEE PART VII BELOW						
8							
(3)							
•							
(2)							
(9)							
				Schedule R (Form 990) 2016	B (Form	1066	2

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity Prim	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(h) Disproportionate	(i) Code V—UBI		(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded from tax under	section 1 501(c)(3) organizations?		end-or-year assets	anocanons?	of Schedule K-1 (Form 1065)	managing partner?	ownership
			sections 512-514)	Yes No			Yes No		Yes No	
(0)										
(2)										
(2)										
(4)										
(5)										
(9)		4								
(7)										
(8)	,									
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(15)										
(16)										
								Sche	Schedule R (Form 990) 2016	n 990) 2016

Part VII	Supplemental Information.  Provide additional information for responses to questions on Schedule R. See Instructions.
PART V. TU	JITION PAYMENTS ARE MADE AT THE DIRECTION OF THE SUPPORTED LAW SCHOOLS. IN 2016, TRANSFERS RELATING TO
SCHOLARS	SHIP AWARDS WERE MADE TO EACH LAW SCHOOL IN THE AMOUNT OF \$60,000.00 FOR A TOTAL OF \$300,000.00
TO ALL SUI	PPORTED LAW SCHOOLS. THE SCHOLARSHIP FUND BOARD OF DIRECTORS DETERMINES THE TOTAL AMOUNT OF NEW
SCHOLARS	THIP MONEY EACH YEAR AT ITS ANNUAL MEETING. THE TOTAL AMOUNT IS DIVIDED EVENLY AMONG THE LAW SCHOOLS
SO THAT E	ACH LAW SCHOOL IS ALLOCATED ONE-FIFTH OF THE NEW AWARD. THIS AMOUNT, COMBINED WITH SCHOLARSHIP
AMOUNTS	PREVIOUSLY COMMITTED BY THE BOARD FROM EARLIER YEARS, IS TRANSFERRED AT THE DIRECTION OF THE LAW
SCHOOLS.	ALLOCATIONS TO THE LAW SCHOOLS ARE EQUAL IN AMOUNT WITH THE NUMBER OF SCHOLARS AT EACH LAW SCHOOL
AND THE A	MOUNT OF INDIVIDUAL SCHOLARSHIPS VARYING BY LAW SCHOOL. PAYMENTS ARE MADE TWICE A YEAR, ONE TRANSFER
FOR FALL	TUITION AND ONE TRANSFER FOR SPRING TUITION. EACH LAW SCHOOL ALLOCATES THE TRANSFER IT RECEIVES WITH
RESPECT T	O THE SMITH/SHAVER SCHOLARS ATTENDING THE LAW SCHOOL. BECAUSE TRANSFERS ARE MADE FOR THE PAYMENT
OF SMITH/S	SHAVER SCHOLAR TUITION ONLY, PART V LINE 1r IS CHECKED IN ORDER THAT THE PROCEDURE FOR PAYING THE
INDIVIDUAL	_ SCHOLARSHIPS CAN BE EXPLAINED HERE.