**Return of Private Foundation** 

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| Fo                                                         | r calen   | dar year 2017 or tax year beginning                                     | ,                             | 2017, and     | ending                |                                                       | , 20                    |
|------------------------------------------------------------|-----------|-------------------------------------------------------------------------|-------------------------------|---------------|-----------------------|-------------------------------------------------------|-------------------------|
|                                                            | ame of fo |                                                                         |                               |               | A Employe             | r identification numbe                                | r                       |
| PC                                                         | ST AND    | COURIER FOUNDATION                                                      |                               |               |                       | 57-6020356                                            |                         |
|                                                            |           | d street (or P O box number if mail is not delivered to street address) |                               | Room/suite    | B Telephon            | e number (see instructi                               | ons)                    |
| 12                                                         | 4 COLUI   | MBUS STREET                                                             |                               |               |                       | 843-937-5605                                          |                         |
|                                                            |           | n, state or province, country, and ZIP or foreign postal code           | <u>L</u>                      |               | C If exempt           | ion application is pendi                              | ng check here▶□         |
| CH                                                         | IADI FS   | TON, SC 29403                                                           |                               |               |                       |                                                       |                         |
|                                                            |           |                                                                         | of a former p                 | ıblıc charity | D 1 Foreign           | n organizations, check i                              | nere ►                  |
| _                                                          | 0110011   | Final return Amended r                                                  |                               |               | -                     | _                                                     | _                       |
|                                                            |           | Address change Name char                                                |                               |               |                       | n organizations meeting<br>here and attach compu      |                         |
| <del>-</del>                                               | Check     | type of organization:  Section 501(c)(3) exempt pi                      |                               | ion 0         | E If private          | foundation status was t                               | erminated under         |
|                                                            |           | on 4947(a)(1) nonexempt charitable trust                                |                               |               | section 5             | 07(b)(1)(A), check here                               | ▶□                      |
| 무                                                          |           | narket value of all assets at J Accounting method                       |                               |               | 1_ ,,, ,              |                                                       |                         |
| -                                                          |           | f year (from Part II, col. (c),  Other (specify)                        |                               | -             |                       | ndation is in a 60-montl<br>ction 507(b)(1)(B), check |                         |
|                                                            | line 16   |                                                                         | on cash basis                 | )             |                       |                                                       | _                       |
|                                                            | art I     |                                                                         |                               |               |                       |                                                       | (d) Disbursements       |
|                                                            |           | amounts in columns (b), (c), and (d) may not necessarily equal          | (a) Revenue au<br>expenses pe | או (ט) ון     | t investment<br>ncome | (c) Adjusted net income                               | for charitable purposes |
|                                                            |           | the amounts in column (a) (see instructions) )                          | books                         | '             | ilicome               | moome                                                 | (cash basis only)       |
| _                                                          | 11        | Contributions, gifts, grants, etc., received (attach schedule)          | 632                           | ,136          |                       |                                                       | Ī                       |
|                                                            | 2         | Check ► ☐ if the foundation is <b>not</b> re                            |                               |               |                       |                                                       |                         |
|                                                            | 3         | Interest on savings and temporar                                        |                               | 175           | 175                   | 175                                                   |                         |
|                                                            | 4         | Dividends and interest from secu                                        | 194                           | ,190          | 194,190               | 194,190                                               | ĺ                       |
|                                                            | 5a        | Gross rents                                                             |                               |               | <u> </u>              |                                                       |                         |
|                                                            | ь         | Net rental income or (loss)                                             | <del></del>                   |               |                       |                                                       |                         |
| <u>a</u>                                                   | 6a        | Net gain or (loss) from sale of as:                                     | *                             |               |                       |                                                       |                         |
| _ <u></u>                                                  | ь         | Gross sales price for all assets on line ba                             |                               |               |                       |                                                       |                         |
| Revenue                                                    | 7         | Capital gain net income (from Part IV, line 2)                          |                               |               | 23,923                |                                                       |                         |
| ď                                                          | 8         | Net short-term capital gain                                             |                               |               |                       | 11,529                                                |                         |
|                                                            | 9         | Income modifications                                                    |                               |               |                       |                                                       |                         |
|                                                            | 10a       | Gross sales less returns and allowances                                 |                               |               | ,                     |                                                       |                         |
| <u>;</u>                                                   | b         | Less: Cost of goods sold                                                |                               |               |                       |                                                       | 1                       |
|                                                            | С         | Gross profit or (loss) (attach schedule)                                |                               |               |                       |                                                       |                         |
|                                                            | 11        | Other income (attach schedule)                                          | _8_                           | ,872          | 8,372                 | 8,872                                                 |                         |
|                                                            | 12        | Total. Add lines 1 through 11                                           | 835                           | ,373          | 226,660               | 214,766                                               |                         |
|                                                            | 13        | Compensation of officers, directors, trustees, etc.                     |                               |               | <u> </u>              |                                                       |                         |
| Expenses                                                   | 14        | Other employee salaries and wages                                       |                               |               |                       |                                                       |                         |
| ē                                                          | 15        | Pension plans, employee benefits                                        |                               |               |                       |                                                       |                         |
| Q.X                                                        | 16a       | Legal fees (attack serectine) V L U                                     |                               |               |                       |                                                       |                         |
| d)                                                         | ם         | Accounting fees (attach schedule)                                       |                               |               |                       |                                                       |                         |
| <b>SCANNED MAR 1.4</b> 2019  Coperating and Administrative | С         | Other professional fees (attach sphedule)                               | 36                            | ,229          | 36,229                | 36,229                                                |                         |
| 5 2                                                        | 17        |                                                                         |                               | -             |                       |                                                       |                         |
| ر ب <u>رة</u>                                              | 18        | Taxes (attach-schedule) (see instructions)                              | 2                             | ,150          | 2,150                 | 2,150                                                 |                         |
| 7 E                                                        | 19        | Depreciation (attagn schedule) and depletion                            |                               |               |                       |                                                       |                         |
| こす                                                         | 20        | Occupano                                                                |                               |               |                       |                                                       |                         |
| ₹₹                                                         | 21        | Travel, conferences, and meetings                                       |                               |               |                       |                                                       | <del></del>             |
| ≥ 6                                                        | 22        | Printing and publications                                               |                               |               |                       |                                                       |                         |
| S                                                          | 23        | Other expenses (attach schedule)                                        | 5                             | ,965          |                       |                                                       | 5,965                   |
| Ž                                                          | 24        | Total operating and administrative expenses.  Add lines 13 through 23   |                               |               |                       |                                                       |                         |
| Z                                                          |           | _                                                                       |                               | ,344          | 38,379                | 38,379                                                | 5,965                   |
| ₹6                                                         | 25        | Contributions, gifts, grants paid                                       |                               | ,663          |                       |                                                       | 791,663                 |
| Š.                                                         | 26        | Total expenses and disbursements. Add lines 24 and 25                   | 836                           | ,007          | 38,379                | 38,379                                                | 797,628                 |
|                                                            | 27        | Subtract line 26 from line 12:                                          | <del></del>                   |               |                       |                                                       |                         |
|                                                            | a         | Excess of revenue over expenses and disbursements                       | <del></del>                   | (634)         | 400.000               |                                                       |                         |
|                                                            | b         | Net investment income (if negative, enter -0-)                          |                               |               | 188,281               |                                                       |                         |
| _                                                          |           | Adjusted net income (if negative, enter -0-)                            | l                             |               |                       | 176,387                                               | rm <b>990-PF</b> (2017) |
| Fα                                                         | r Panen   | work Reduction Act Notice, see instructions.                            | C                             | at No 11289   | X                     | FO                                                    | mm <b>フフリードド</b> (2017) |

| 100           |            | Attached schedules and amounts in the description column                                                                           | Beginning of year                                |               | End o    | i year                |
|---------------|------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------|----------|-----------------------|
| 76            | ırt İl     | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions) | (a) Book Value                                   | (b) Book Valu | ıe e     | (c) Fair Market Value |
|               | 1          | Cash-non-interest-bearing                                                                                                          | 49,121                                           | 29            | 9,785    | 299,785               |
|               | 2          | Savings and temporary cash investments                                                                                             | 87,172                                           |               | 6,001    |                       |
|               | 3          | Accounts receivable ▶                                                                                                              |                                                  |               |          |                       |
|               |            | Less: allowance for doubtful accounts ▶                                                                                            |                                                  |               |          |                       |
|               | 4          | Pledges receivable ▶                                                                                                               | 1                                                |               |          |                       |
|               |            | Less: allowance for doubtful accounts ▶                                                                                            |                                                  | <u> </u>      |          |                       |
|               | 5          | Grants receivable                                                                                                                  |                                                  | -             |          |                       |
|               | 6          | Receivables due from officers, directors, trustees, and other                                                                      |                                                  |               |          |                       |
|               |            | disqualified persons (attach schedule) (see instructions)                                                                          |                                                  |               |          |                       |
|               | 7          | Other notes and loans receivable (attach schedule) ▶                                                                               |                                                  |               |          |                       |
|               |            | Less: allowance for doubtful accounts ▶                                                                                            |                                                  |               |          |                       |
| S             | 8          | Inventories for sale or use                                                                                                        |                                                  |               |          |                       |
| Assets        | 9          | Prepaid expenses and deferred charges                                                                                              |                                                  |               | -        |                       |
| Ą             | 10a        | Investments—U.S. and state government obligations (attach schedule)                                                                |                                                  |               |          |                       |
| •             | b          | Investments—corporate stock (attach schedule)                                                                                      | 3,751,508                                        | 3 40          | 5,880    | 3,898,644             |
|               | c          | Investments—corporate bonds (attach schedule)                                                                                      | 966,665                                          |               | 36,089   |                       |
|               | 11         | Investments—land, buildings, and equipment. basis ▶                                                                                |                                                  |               | ,0,003   | 301,004               |
|               |            | Less: accumulated depreciation (attach schedule) ▶                                                                                 |                                                  |               |          | ·                     |
|               | 12         | Investments—mortgage loans                                                                                                         |                                                  | -             |          |                       |
|               | 13         | Investments—other (attach schedule)                                                                                                | -                                                |               |          |                       |
|               | 14         | Land, buildings, and equipment: basis >                                                                                            |                                                  |               |          | •                     |
|               | 17         | Less: accumulated depreciation (attach schedule) ▶                                                                                 |                                                  |               |          |                       |
|               | 15         | Other assets (describe ► GAZETTE NEWSPAPER )                                                                                       | 190,000                                          | 10            | 0,000    | 190,000               |
|               | 16         | Total assets (to be completed by all filers—see the                                                                                | 130,000                                          | 18            | ,000     |                       |
|               |            | instructions. Also, see page 1, item l)                                                                                            | 5,044,466                                        | 5.06          | 67,755   | 5,446,034             |
|               | 17         | Accounts payable and accrued expenses                                                                                              | 3,044,400                                        | 3,00          | ,,,,,,,, | 3,440,034             |
|               | 18         | Grants payable                                                                                                                     |                                                  |               |          |                       |
| Liabilities   | 19         | Deferred revenue                                                                                                                   |                                                  |               |          |                       |
| ≣             | 20         | Loans from officers, directors, trustees, and other disqualified persons                                                           |                                                  |               |          |                       |
| ap            | 21         | Mortgages and other notes payable (attach schedule)                                                                                |                                                  |               |          |                       |
| Ξ             | 22         | Other liabilities (describe )                                                                                                      |                                                  |               |          |                       |
|               | 23         | Total liabilities (add lines 17 through 22)                                                                                        |                                                  |               |          |                       |
|               |            |                                                                                                                                    |                                                  |               |          |                       |
| es            |            | and complete lines 24 through 26, and lines 30 and 31.  Unrestricted  Temporarily restricted                                       |                                                  |               |          |                       |
| Balances      | 24         | Unrestricted 4 2010                                                                                                                | 4,458,939                                        | 4.40          | 1,763    | i                     |
| <u>Ha</u>     | 25         | Temporarily restricted DEC 3                                                                                                       | 4,430,939                                        | 4,40          | 71,703   | i                     |
|               | 26         | Permanently restricted                                                                                                             | 585,527                                          | 66            | 55,992   | i                     |
| 2             |            | Permanently restricted.  Foundations that do not follow \$1,45 = 7, check here ▶ □                                                 | 303,327                                          |               | 33,332   | i                     |
| F             |            | and complete lines 27, through 31.                                                                                                 |                                                  |               |          | ı                     |
|               | 27         | Capital stock, trust principal, or current funds                                                                                   |                                                  |               |          | ,                     |
| Net Assets or | 28         | Paid-in or capital surplus, or land, bldg., and equipment fund                                                                     | <del>                                     </del> |               |          |                       |
| sei           | 29         | Retained earnings, accumulated income, endowment, or other funds                                                                   |                                                  |               |          | ı                     |
| As            | 30         | Total net assets or fund balances (see instructions)                                                                               | 5,044,466                                        | 5.06          | 57,755   | 1                     |
| et            | 31         | Total liabilities and net assets/fund balances (see                                                                                | 3,044,400                                        | 3,00          | ,,,,,,   | i                     |
| Z             | ٥.         | instructions)                                                                                                                      | 5 044 466                                        | 5.00          |          | i                     |
| ءو            | rt III     | Analysis of Changes in Net Assets or Fund Balances                                                                                 | 5,044,466                                        | 5,00          | 57,755   |                       |
| 1             | Tota       | al net assets or fund balances at beginning of year—Part II, colu                                                                  | mn (a), line 30 (must                            | agree with    |          | <del> </del>          |
| •             | end        | of-year figure reported on prior year's return)                                                                                    | (2), 20 (                                        |               | 1        | 5,044,466             |
| 2             |            | er amount from Part I, line 27a                                                                                                    |                                                  |               | 2        | (634)                 |
| 3             |            | er increases not included in line 2 (itemize) Capital gains                                                                        |                                                  |               | 3        | 23,923                |
| 4             | <b>Δ44</b> | I lines 1, 2, and 3                                                                                                                | ***************************************          |               | 4        | 5,067,755             |
| _             |            |                                                                                                                                    |                                                  |               | 5        | 3,007,755             |
| 6             | Tota       | reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—l                    | Part II, column (b), line                        | 30            | 6        |                       |
| _             |            |                                                                                                                                    | ,                                                |               |          |                       |

| Part                                         | IV Capital Gains an                                       | d Losses for Tax on Investme                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ent In    | come            |                                              |              |                                 |                                                            |                                   |
|----------------------------------------------|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------|----------------------------------------------|--------------|---------------------------------|------------------------------------------------------------|-----------------------------------|
|                                              |                                                           | und(s) of property sold (for example, real est<br>use, or common stock, 200 shs MLC Co )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ate,      |                 | (b) How acquired<br>P-Purchase<br>D-Donation |              | Date acquired<br>io , day, yr ) | (d) Date s<br>(mo , day                                    |                                   |
| 1a                                           | SEE ATTACHED - Stifel, NI                                 | colaus & CO acct 1595 - Short Term                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           | \               |                                              |              |                                 |                                                            |                                   |
| b                                            | SEE ATTACHED - Stifel, NI                                 | colaus & CO acct 1595 - Long Term                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           | ITO             | Cluded                                       | Min          |                                 | may ti                                                     | <u>ling</u>                       |
|                                              |                                                           | colaus & CO acct 1514 - Short Term                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                 | ignal f                                      | ~~~          |                                 | ached                                                      | $\frac{\mathcal{L}}{\mathcal{L}}$ |
| <u>d</u>                                     | SEE ATTACHED - Stifel, NI                                 | colaus & CO acct 1514 - Long Term                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |                 | use refe                                     | ren          | e stev                          | ements                                                     | 11)                               |
| <u>е</u>                                     | <del></del>                                               | (f) Depreciation allowed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |                 | other basis                                  | has          | <del>}</del>                    | ın or (loss)                                               |                                   |
|                                              | (e) Gross sales price                                     | (or allowable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |                 | nse of sale                                  | 0            |                                 | (f) minus (g))                                             |                                   |
| а                                            |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              |              |                                 |                                                            | 10,272                            |
| b                                            |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              | <u> </u>     |                                 |                                                            | 5,859                             |
| <u>C</u>                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              | -            |                                 |                                                            | 1,257                             |
| <u>d</u>                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           | ·               | _                                            | <del> </del> |                                 |                                                            | 6,535                             |
| <u>      e                              </u> | Complete only for assets sh                               | owing gain in column (h) and owned by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | v the fo  | nundation       | on 12/31/69                                  | <del> </del> |                                 |                                                            |                                   |
|                                              | (i) FMV as of 12/31/69                                    | (j) Adjusted basis<br>as of 12/31/69                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | y tric ic | (k) Exces       | s of col (i)<br>(j), if any                  | 1            | col (k), but no                 | ol (h) gain minus<br>ot less than -0-) of<br>from col (h)) | or                                |
| а                                            |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              |              |                                 |                                                            |                                   |
| <u> </u>                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              | <u> </u>     |                                 |                                                            |                                   |
|                                              |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              | -            |                                 |                                                            |                                   |
| <u>d</u>                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                 |                                              | ╂            |                                 |                                                            |                                   |
| e                                            |                                                           | [ If gain, a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | lso en    | ter ın Pa       | rt I, line 7                                 | +            |                                 |                                                            |                                   |
| 2                                            | Capital gain net income of                                | or (net capital loss) { If (loss), or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |                 |                                              | 2            |                                 |                                                            | 23,923                            |
| 3                                            | If gain, also enter in Part                               | In or (loss) as defined in sections at I, line 8, column (c). See instructions of the column in the  | tions.    | If (loss)       | , enter -0- ın )                             | 3            |                                 | -                                                          | 44 520                            |
| Part                                         |                                                           | der Section 4940(e) for Reduc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                 |                                              |              | ıme                             |                                                            | 11,529                            |
| Was t                                        | s," the foundation doesn't                                | section 4942 tax on the distributa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | not co    | mplete tl       | his part.                                    |              |                                 | ☐ Yes                                                      | □ No                              |
|                                              | (a)                                                       | ount in each column for each year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ; see     | ine instru      |                                              | laking       | any entries.                    | (d)                                                        |                                   |
| Cale                                         | Base period years<br>endar year (or tax year beginning in | (b) Adjusted qualifying distributions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1         | Net value of    | (c)<br>f noncharitable-use                   | assets       |                                 | stribution ratio<br>divided by col (                       | c))                               |
|                                              | 2016                                                      | 748                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ,366      |                 | 4,5                                          | 26,440       |                                 | .1653                                                      |                                   |
|                                              | 2015                                                      | 950                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ,264      |                 | 4,4                                          | 73,672       |                                 | .2124                                                      |                                   |
|                                              | 2014                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ,413      |                 |                                              | 76,483       |                                 | .1571                                                      |                                   |
|                                              | 2013                                                      | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ,281      |                 |                                              | 85,207       |                                 | .1583                                                      |                                   |
|                                              | 2012                                                      | 761                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ,150      | -               | 4,2                                          | 14,792       |                                 | 1806                                                       |                                   |
| 2<br>3                                       | Total of line 1, column (d                                | )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | de the    | <br>total on    |                                              | or by        | 2                               |                                                            | .8737                             |
|                                              | •                                                         | oundation has been in existence in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                 | -                                            |              | _3                              |                                                            | . <u>1747</u>                     |
| 4                                            | Enter the net value of nor                                | ncharitable-use assets for 2017 fr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | AF(       | BEline          | <u>5.D</u>                                   |              | 4                               | 5                                                          | <u>,053,994</u>                   |
| 5                                            | Multiply line 4 by line 3                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | . DEC     | 31.2            | 018 - 810                                    |              | 5                               |                                                            | 883,135                           |
| 6                                            | Enter 1% of net investme                                  | ent income (1% of Part I, line 塑力)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ስር፤       | TEN             | UT                                           |              | 6                               |                                                            | 1,883                             |
| 7                                            | Add lines 5 and 6                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | YY        |                 |                                              |              | 7                               |                                                            | 885,018                           |
| 8                                            |                                                           | ons from Part XII, line 4 ater than line 7, check the box in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Part \    | <br>(I. line 15 | <br>and complete                             | <br>that r   | 8 art using a                   | 1% tax rate                                                | <b>797,628</b><br>See the         |
|                                              | Part VI instructions                                      | and the state of t |           | .,              | .,                                           | p            | u                               |                                                            |                                   |

| Part    | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-see                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | instructio  | ns)            |  |  |  |  |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------|--|--|--|--|
| 1a ·    | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             | Ī              |  |  |  |  |
|         | Date of ruling or determination letter (attach copy of letter if necessary—see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <del></del> |                |  |  |  |  |
| b       | b Domestic foundations that meet the section 4940(e) requirements in Part V, check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                |  |  |  |  |
|         | here ▶ ☐ and enter 1% of Part I, line 27b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                |  |  |  |  |
| С       | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                |  |  |  |  |
| _       | Part I, line 12, col. (b).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |             |                |  |  |  |  |
| 2<br>3  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  Add lines 1 and 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2.700       | <u> </u>       |  |  |  |  |
| 4       | Add lines 1 and 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3,766       |                |  |  |  |  |
| 5       | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 3,766       |                |  |  |  |  |
| 6       | Credits/Payments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3,100       | <del>- 1</del> |  |  |  |  |
| а       | 2017 estimated tax payments and 2016 overpayment credited to 2017   6a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                |  |  |  |  |
| b       | Exempt foreign organizations—tax withheld at source 6b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                |  |  |  |  |
| C       | Tax paid with application for extension of time to file (Form 8868) . 6c 3,605                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             | 1              |  |  |  |  |
| d       | Backup withholding erroneously withheld 6d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |             |                |  |  |  |  |
| 7       | Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 3605        |                |  |  |  |  |
| 8       | Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                |  |  |  |  |
| 9       | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 161         |                |  |  |  |  |
| 10      | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                |  |  |  |  |
| 11      | Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                |  |  |  |  |
|         | VII-A Statements Regarding Activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <del></del> |                |  |  |  |  |
| 1a      | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes         | <del></del>    |  |  |  |  |
|         | participate or intervene in any political campaign?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1a          | <b>✓</b>       |  |  |  |  |
| b       | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1b          | 1              |  |  |  |  |
|         | If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             |                |  |  |  |  |
| _       | Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1c          |                |  |  |  |  |
| c<br>d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             | <del>'</del>   |  |  |  |  |
| u       | (1) On the foundation. ► \$ (2) On foundation managers. ► \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             |                |  |  |  |  |
| е       | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |                |  |  |  |  |
| _       | on foundation managers. ► \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             |                |  |  |  |  |
| 2       | Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2           | 7              |  |  |  |  |
| _       | If "Yes," attach a detailed description of the activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             | 1              |  |  |  |  |
| 3       | Has the foundation made any changes, notifier continuously reported to the IRS, in its governing instrument, articles of incorporation, on bylaws for other continuously reported to the IRS, in its governing instrument, articles of incorporation, on bylaws for other continuously reported to the IRS, in its governing instrument, articles of incorporation, and the incorporation of the changes in the continuously reported to the IRS, in its governing instrument, articles of incorporation, and the changes in the changes in the changes in the change in the chang | <u> </u>    |                |  |  |  |  |
| 4-      | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3<br>4a     | <del>-</del>   |  |  |  |  |
| 4a<br>b | If "Yes," has it filled a text return on form 990 T for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 4a 4b       | 1              |  |  |  |  |
| 5       | Was there a liquidation described a dissolution, or substantial contraction during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 5           | 7              |  |  |  |  |
| Ū       | If "Yes," attach the statement required by General Instruction T.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                |  |  |  |  |
| 6       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |  |  |  |  |
|         | Are the requirements of section 508(e) (relating to sections 4941 through 4945 satisfied either:  • By language in the governing instrument, or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |  |  |  |  |
|         | • By state legislation that effectively amends the governing instrument so that no mandatory directions that                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             |                |  |  |  |  |
|         | conflict with the state law remain in the governing instrument ( )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 6 🗸         |                |  |  |  |  |
| 7       | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7 ✓         |                |  |  |  |  |
| 8a      | Enter the states to which the foundation reports or with which it is registered. See instructions. ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             | 1              |  |  |  |  |
|         | SOUTH CAROLINA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                |  |  |  |  |
| b       | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             | <u></u>        |  |  |  |  |
|         | (or designate) of each state as required by General Instruction G? If "No," attach explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 8b ✓        | L              |  |  |  |  |
| 9       | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                |  |  |  |  |
|         | 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                |  |  |  |  |
|         | complete Part XIV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 9           | <b>_</b>       |  |  |  |  |
| 10      | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 40          | ,              |  |  |  |  |
|         | names and addresses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 10          |                |  |  |  |  |

| Part | VII-A Statements Regarding Activities (continued)                                                                                                                                                                            |        |          |             |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------|-------------|
|      |                                                                                                                                                                                                                              |        | Yes      | No          |
| 11   | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions                                       | 11     |          | 1           |
| 12   | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions                                      | 12     |          | /           |
| 13   | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                                                          | 13     | <b>✓</b> |             |
|      | Website address ▶                                                                                                                                                                                                            |        |          |             |
| 14   |                                                                                                                                                                                                                              | 3-937- |          |             |
|      | Located at ► 134 COLUMBUS STREET ZIP+4 ►                                                                                                                                                                                     | 2940   | 3        | <u></u> .   |
| 15   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year                                            | • •    | ·        | ▶ ∟         |
| 16   | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority                                                                                                              |        | Yes      | No          |
|      | over a bank, securities, or other financial account in a foreign country?                                                                                                                                                    | 16     |          | <b>/</b>    |
|      | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶                                                                                           |        |          | !           |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required                                                                                                                                                    |        |          |             |
|      | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.                                                                                                                                      | ļ      | Yes      | No          |
| 1a   | During the year, did the foundation (either directly or indirectly):                                                                                                                                                         |        |          |             |
|      | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No                                                                                                                                |        |          |             |
|      | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?                                                                                                               |        |          |             |
|      | disqualified person?                                                                                                                                                                                                         |        |          |             |
|      | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .   Yes   No                                                                                                                            |        |          |             |
|      | (5) Transfer any income or assets to a disqualified person (or make any of either available for                                                                                                                              |        |          |             |
|      | the benefit or use of a disqualified person)?                                                                                                                                                                                |        |          |             |
|      | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the                                                                                                                                   |        |          |             |
|      | foundation agreed to make a grant to or to employ the official for a period after                                                                                                                                            |        |          |             |
|      | termination of government service, if terminating within 90 days.) Yes 📝 No                                                                                                                                                  |        |          |             |
| b    | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations                                                                                                       |        |          |             |
|      | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions                                                                                                                                  | 1b     |          | <u> </u>    |
| _    | Organizations relying on a current notice regarding disaster assistance, check here                                                                                                                                          |        |          |             |
| С    | were not corrected before the first day of the tax year beginning in 2017?                                                                                                                                                   | 1c     |          | <del></del> |
| 2    | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private                                                                                                                  | 10     |          | <b>,</b>    |
| _    | operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and                                                              |        |          |             |
| а    | 6e, Part XIII) for tax year(s) beginning before 2017?                                                                                                                                                                        |        |          |             |
|      | If "Yes," list the years ▶ 20 , 20 , 20 , 20                                                                                                                                                                                 |        |          |             |
| ь    | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)                                                                                                        |        |          |             |
|      | (relating to incorrect valuation of assets) to the year's undistributed ingome? (ពី applying section 4942(a)(2) to                                                                                                           |        |          |             |
|      | all years listed, answer "No" and attach statement—see instructions.)                                                                                                                                                        | 2b     |          |             |
| С    | all years listed, answer "No" and attach statement—see instructions.) (c)                                                                                                                                                    |        |          |             |
| _    | 20 , 20 , 20 , 20 , 20 , 20 , 20 , 20 ,                                                                                                                                                                                      |        |          |             |
| 3a   | Did the foundation hold more than a 2% direct or indirect interest in any ousiness enterprise                                                                                                                                | }      |          |             |
|      | at any time during the year?                                                                                                                                                                                                 |        |          |             |
| b    | If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or                                                                                                                  |        |          |             |
|      | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of | 1      |          |             |
|      | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the                                                                                                                         |        |          |             |
|      | foundation had excess business holdings in 2017)                                                                                                                                                                             | 3b     |          |             |
| 4a   | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                              | 4a     |          | 1           |
| b    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its                                                                                                               |        |          |             |
|      | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?                                                                                                           | 4b     |          | 1           |

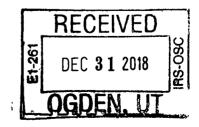
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| Ра | σe | . 0 |

| Part  | : VII-B                                                                                         | Statements Regarding Activities                                    | for W     | /hich Form                    | 4720      | May Be R                | equire   | d (contir                    | nued)    |               |                    |                |
|-------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------|-------------------------------|-----------|-------------------------|----------|------------------------------|----------|---------------|--------------------|----------------|
| 5a ·  | During                                                                                          | the year, did the foundation pay or incur                          | any am    | ount to:                      |           |                         |          |                              |          |               | Yes                | No             |
|       | (1) Car                                                                                         | ry on propaganda, or otherwise attempt t                           | o influe  | nce legislatio                | on (sec   | tion 4945(e)            | ))?      | ☐ Yes                        | ✓ No     |               |                    |                |
|       | (2) Influence the outcome of any specific public election (see section 4955); or to carry on,   |                                                                    |           |                               |           |                         |          |                              |          |               | 1                  |                |
|       | directly or indirectly, any voter registration drive?                                           |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       | (3) Provide a grant to an individual for travel, study, or other similar purposes?              |                                                                    |           |                               |           |                         |          |                              |          | - 1           |                    |                |
|       | (4) Provide a grant to an organization other than a charitable, etc., organization described in |                                                                    |           |                               |           |                         |          |                              |          |               | - 1                |                |
|       |                                                                                                 | tion 4945(d)(4)(A)? See instructions                               |           |                               |           |                         |          |                              | ✓ No     |               |                    | i              |
|       |                                                                                                 | vide for any purpose other than religious                          |           |                               |           | ary, or educ            | cational | _                            |          |               |                    |                |
|       |                                                                                                 | poses, or for the prevention of cruelty to o                       |           |                               |           |                         | • •      | ☐Yes                         | ✓ No     |               |                    | 1              |
| b     |                                                                                                 |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       | _                                                                                               | ions section 53.4945 or in a current notice                        | _         | -                             |           |                         |          |                              |          | 5b            |                    |                |
|       | •                                                                                               | rations relying on a current notice regarding                      | _         |                               | -         |                         |          |                              | ▶□       |               |                    |                |
| С     |                                                                                                 | nswer is "Yes" to question 5a(4), does to                          |           |                               |           |                         |          |                              |          |               |                    | - 1            |
|       |                                                                                                 | e it maintained expenditure responsibility                         |           | -                             |           |                         |          | ∐ Yes                        | ∐ No     |               |                    |                |
| 6-    |                                                                                                 | " attach the statement required by Regula                          |           |                               |           |                         | miuma    |                              |          |               |                    | ł              |
| 6a    |                                                                                                 | foundation, during the year, receive any ersonal benefit contract? |           |                               |           |                         |          | □Yes                         | ✓ No     |               |                    |                |
| b     | •                                                                                               | foundation, during the year, pay premiun                           |           |                               |           |                         | henefit  | _                            | _        | 6b            |                    | <del>_</del>   |
| D     |                                                                                                 | to 6b, file Form 8870.                                             | is, uiie  | ony or maner                  | July, Off | i a personai            | Denent   | Jonital                      |          | 100           |                    | <del>-</del> 1 |
| 7a    |                                                                                                 | ime during the tax year, was the foundation a                      | a partv t | to a prohibited               | tax sh    | elter transac           | tion?    | ☐ Yes                        | ✓ No     |               |                    |                |
|       |                                                                                                 | " did the foundation receive any proceeds                          |           |                               |           |                         |          | ransaction                   | 12       | 7b            |                    |                |
| Part  | VIII                                                                                            | Information About Officers, Direc                                  | tors, T   | rustees, F                    | ounda     | tion Mana               | agers,   | Highly F                     | Paid Er  | nploy         | ees,               |                |
|       |                                                                                                 | and Contractors                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
| 1     | List all                                                                                        | officers, directors, trustees, and found                           | ation n   | nanagers ar                   |           |                         | ation. S | ee instru                    | ictions. | •             |                    |                |
|       |                                                                                                 | (a) Name and address                                               |           | e, and average<br>rs per week |           | mpensation<br>not paid, |          | Contribution:<br>yee benefit |          | (e) Expe      | nse acc            | count,         |
|       |                                                                                                 |                                                                    |           | ed to position                |           | nter -0-)               |          | rred compe                   |          | otner         | allowan            | ces            |
| NON   | E                                                                                               |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       |                                                                                                 | •••••                                                              |           |                               |           |                         |          |                              | 1        |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           | ,                       |          |                              | +        |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       | Compe                                                                                           | ensation of five highest-paid employee                             | s (oth    | er than thos                  | se incl   | uded on li              | ne 1—:   | see instr                    | uctions  | a). If no     | one.               | enter          |
| _     | "NONE                                                                                           |                                                                    |           |                               |           |                         |          |                              |          | •             | •                  |                |
|       |                                                                                                 |                                                                    |           | (b) Title, and a              | werage    |                         |          | (d) Contribu                 |          |               | -                  |                |
|       | (a) Name a                                                                                      | nd address of each employee paid more than \$50,00                 | 10        | hours per v                   | veek      | (c) Comper              | nsation  | employee<br>plans and o      |          | (e) Expe      | nse aco<br>allowan |                |
|       |                                                                                                 |                                                                    |           | devoted to p                  | osition   |                         |          | compens                      | sation   |               |                    |                |
| NON   | E                                                                                               |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           |                         |          |                              |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           | $II R_{I}$              | Fre      | 11 /5=                       |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           | 150                     | <u> </u> | MFD                          | 7        |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           | DE DE                   |          |                              | 70/      |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           | W UE                    | C 31     | 2018                         | <u> </u> |               |                    |                |
|       | <del></del> -                                                                                   |                                                                    |           |                               |           | 5                       |          | -910                         | <u>အ</u> |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           | <b>LUGI</b>             | )FA      |                              |          |               |                    |                |
|       |                                                                                                 |                                                                    |           |                               |           |                         |          | UI                           | <i>[</i> |               |                    |                |
| Total | number                                                                                          | of other employees paid over \$50,000                              |           |                               |           | <u> </u>                |          |                              | · ·      |               |                    |                |
|       |                                                                                                 | c. cs. cp.s, cos paia eve pocios .                                 |           |                               | • •       |                         |          |                              | F        | orm <b>99</b> | 0-PF               | (2017)         |

| Pa           | t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)                           | ployees,         |
|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 3            | Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI                                       | E."              |
|              | (a) Name and address of each person paid more than \$50,000 (b) Type of service                                                                   | (c) Compensation |
| NC           | NE                                                                                                                                                |                  |
|              |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
| <b>.</b>     |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
| <b></b> .    |                                                                                                                                                   |                  |
| <del>-</del> | I number of others receiving over \$50,000 for professional services                                                                              |                  |
| 100          | I number of others receiving over \$50,000 for professional services                                                                              | <u> </u>         |
| Pa           | t IX-A Summary of Direct Charitable Activities                                                                                                    |                  |
|              | st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | Expenses         |
|              | ganizations and other beneficiaries served, conferences convened, research papers produced, etc                                                   |                  |
| 1            |                                                                                                                                                   |                  |
|              | CATHOLIC CHARITIES - PROVIDE MEALS, CLOTHING AND FINANCIAL SUPPORt TO THE FOOD INSECURE AND                                                       |                  |
| ^            | ECONOMICALLY DISADVANTAGED                                                                                                                        | 119,94           |
| 2            | CHALRESTON MUSEUM - one of the oldest museums in the United States. Its highly regarded                                                           |                  |
|              | collection includes historic houses. Donations are made to support the general operating fund                                                     | 55,00            |
| 3            | Collection includes historic houses. Donations are made to support the general operating fund                                                     | 33,00            |
| Ū            | GAILLARD PERFORMANCE ART CENTER FOUNDATION - dedicated to growing performing arts in the Lowcountry                                               |                  |
|              | Donations to the general fun support content-rich performances, community outreach, arts-education, etc                                           | 125,00           |
| 4            | bondards to the general fair support content not performances, commenting can easily a to content of the                                          |                  |
|              | STAR GOSEPL MISSION - GOOD CHEER CHRISTMAS FUND TO PURCHASE FOOD CERTIFICATES & FINANCIAL                                                         |                  |
|              | SUPPORT                                                                                                                                           | 119,94           |
| Pa           | t IX-B Summary of Program-Related Investments (see instructions)                                                                                  |                  |
| D            | escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2                                   | Amount           |
| 1            |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
| 2            |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
| A            | other program-related investments. See instructions                                                                                               |                  |
| 3            |                                                                                                                                                   | 1                |
|              |                                                                                                                                                   |                  |
|              |                                                                                                                                                   |                  |
| Take         | i Add lines 1 through 3                                                                                                                           |                  |

Form **990-PF** (2017)



| Part | X Minimum Investment Return (All domestic foundations must complete this part. Foreign                     | gn found: | ations,           |
|------|------------------------------------------------------------------------------------------------------------|-----------|-------------------|
|      | see instructions.)                                                                                         |           |                   |
| 1    | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,          |           |                   |
|      | purposes:                                                                                                  |           |                   |
| а    | Average monthly fair market value of securities                                                            | 1a        | 4,768,898         |
| b    | Average of monthly cash balances                                                                           | 1b        | 172,060           |
| C    | Fair market value of all other assets (see instructions)                                                   | 1c        | 190,000           |
| d    | <b>Total</b> (add lines 1a, b, and c)                                                                      | 1d        | <u>5,</u> 130,958 |
| е    | Reduction claimed for blockage or other factors reported on lines 1a and                                   |           |                   |
|      | 1c (attach detailed explanation)                                                                           |           |                   |
| 2    | Acquisition indebtedness applicable to line 1 assets                                                       | 2         |                   |
| 3    | Subtract line 2 from line 1d                                                                               | 3         | 5,130,958         |
| 4    | Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see                  |           |                   |
|      | instructions)                                                                                              | 4         | 76,964            |
| 5    | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4       | 5         | 5,053,994         |
| 6    | Minimum investment return. Enter 5% of line 5                                                              | 6         | 252,700           |
| Part |                                                                                                            | oundation | าร                |
| 1    | Minimum investment return from Part X, line 6                                                              | 1         | 252,700           |
| 2a   | Tax on investment income for 2017 from Part VI, line 5 2a 3,766                                            |           |                   |
| b    | Income tax for 2017. (This does not include the tax from Part VI.)                                         |           |                   |
| C    | Add lines 2a and 2b                                                                                        | 2c        | 3,766             |
| 3    | Distributable amount before adjustments. Subtract line 2c from line 1                                      | 3         | 248,934           |
| 4    | Recoveries of amounts treated as qualifying distributions                                                  | 4         |                   |
| 5    | Add lines 3 and 4                                                                                          | 5         | 248,934           |
| 6    | Deduction from distributable amount (see instructions)                                                     | 6         |                   |
| 7    | Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,                 |           |                   |
| •    | line 1                                                                                                     | 7         | 248,934           |
|      |                                                                                                            | <u></u>   | 240,004           |
| Part | XII Qualifying Distributions (see instructions)                                                            |           |                   |
| 1    | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                 |           |                   |
| a    | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26                                | 1a        | 797,628           |
| b    | Program-related investments—total from Part IX-B                                                           | 1b        |                   |
| 2    | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,           |           |                   |
| _    | purposes                                                                                                   | 2         |                   |
| 3    | Amounts set aside for specific charitable projects that satisfy the                                        |           |                   |
| а    | Suitability test (prior IRS approval required)                                                             | 3a        |                   |
| b    | Cash distribution test (attach the required schedule)                                                      | 3b        |                   |
| 4    | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4         | 797,628           |
| 5    | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.       |           |                   |
| •    | Enter 1% of Part I, line 27b. See instructions                                                             | 5         |                   |
| 6    | Adjusted qualifying distributions. Subtract line 5 from line 4                                             | 6         | 797,628           |
| •    | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating        |           |                   |
|      | qualifies for the section 4940(a) reduction of tay in those years                                          | 9         | 100110011011      |

Form **990-PF** (2017)



| art | XIII Undistributed Incom            | ne (see instructio | ons)      | _                   |               |                                             |
|-----|-------------------------------------|--------------------|-----------|---------------------|---------------|---------------------------------------------|
| •   | •                                   |                    | (a)       | (b)                 | (c)           | (d)                                         |
| 1   | Distributable amount for 2017       | 7 from Part XI,    | Corpus    | Years prior to 2016 | 2016          | 2017                                        |
|     | line 7                              | [                  |           |                     | - "           | 248,934                                     |
| 2   | Undistributed income, if any, as of | the end of 2017.   |           |                     |               |                                             |
| а   | Enter amount for 2016 only .        |                    |           |                     |               | i                                           |
| b   | Total for prior years: 20 ,2        | 0 ,20              |           |                     |               |                                             |
| 3   | Excess distributions carryover,     | ıf any, to 2017:   |           |                     | <b>\$</b>     |                                             |
| а   | From 2012                           | 544,970            |           |                     |               |                                             |
| b   | From 2013                           | 470,170            |           |                     |               |                                             |
| С   | From 2014                           | 518,408            |           |                     |               |                                             |
| d   | From 2015                           |                    |           |                     |               |                                             |
| е   | From 2016                           | 524,458            |           |                     |               | i                                           |
| f   | Total of lines 3a through e .       |                    | 2,786,561 |                     |               |                                             |
| 4   | Qualifying distributions for 201    |                    |           |                     |               |                                             |
|     | line 4: ► \$ 797,628                | ·                  |           |                     |               |                                             |
| а   | Applied to 2016, but not more       | than line 2a       |           |                     |               |                                             |
|     | Applied to undistributed incom      |                    |           |                     |               |                                             |
|     | (Election required—see instruc      |                    |           |                     |               |                                             |
| С   | Treated as distributions out of     | corpus (Election   |           |                     |               |                                             |
|     | required - see instructions) .      |                    |           |                     |               |                                             |
| d   | Applied to 2017 distributable a     | mount              |           |                     |               | 248,934                                     |
| e   | Remaining amount distributed        |                    | 548.694   | •                   |               |                                             |
| 5   | Excess distributions carryover      |                    | 0.0,001   |                     |               | •                                           |
| •   | (If an amount appears in colum      |                    |           | ***                 |               |                                             |
|     | amount must be shown in colu        |                    |           |                     |               |                                             |
| 6   | Enter the net total of each         | ch column as       |           |                     |               | i                                           |
|     | indicated below:                    |                    |           |                     |               | ļ                                           |
| а   | Corpus. Add lines 3f, 4c, and 4e    | . Subtract line 5  | 3,335,255 |                     |               | 1                                           |
| b   | Prior years' undistributed inc      |                    |           |                     |               | 1                                           |
|     | line 4b from line 2b                |                    |           |                     |               |                                             |
| С   | Enter the amount of prior year      | s' undistributed   |           |                     |               |                                             |
|     | income for which a notice of        |                    |           |                     |               |                                             |
|     | been issued, or on which the        | section 4942(a)    |           |                     |               |                                             |
|     | tax has been previously assess      | sed                |           |                     |               |                                             |
| d   | Subtract line 6c from line          | e 6b. Taxable      |           |                     |               |                                             |
|     | amount-see instructions .           |                    |           |                     |               |                                             |
| е   | Undistributed income for 2019       | 6. Subtract line   |           |                     |               |                                             |
|     | 4a from line 2a. Taxable            | amount-see         |           |                     |               |                                             |
|     | instructions                        |                    |           |                     |               |                                             |
| f   | Undistributed income for 2017       | '. Subtract lines  |           |                     |               |                                             |
|     | 4d and 5 from line 1 This ai        | mount must be      |           |                     |               |                                             |
|     | distributed in 2018                 |                    |           |                     |               |                                             |
| 7   | Amounts treated as distribution     | ns out of corpus   |           | ſ                   | DEO           | -                                           |
|     | to satisfy requirements impor-      | sed by section     |           | - 1                 | RECEIV        | ED                                          |
|     | 170(b)(1)(F) or 4942(g)(3) (Ele     |                    |           | 18                  | 5             |                                             |
|     | required—see instructions) .        | , , ,              |           | 6                   |               | <u>                                    </u> |
| 8   | Excess distributions carryover      |                    |           | Įŭ.                 | DEC 3 1 20    | 18  Ğ                                       |
|     | applied on line 5 or line 7 (see    |                    | 544,970   |                     | 700           | 18 05<br>18 18                              |
| 9   | Excess distributions carry          |                    |           | <u>_</u>            | <b>JUGDEN</b> | <b>アテ</b> ┘ <sup>≈</sup> ╎                  |
|     | Subtract lines 7 and 8 from line    | e6a                | 2,790,285 |                     |               | <u> </u>                                    |
| 10  | Analysis of line 9:                 |                    |           |                     |               |                                             |
| а   | Excess from 2013                    | 470,170            |           |                     |               |                                             |
| b   | Excess from 2014                    | 518,480            |           |                     |               | !                                           |
| С   | Excess from 2015                    | 728,555            |           |                     |               |                                             |
| d   | Excess from 2016                    | 524,458            |           |                     |               | i                                           |
| е   | Excess from 2017                    | 548,694            |           |                     |               |                                             |

| Form 99   | 0-PF (2017)                                                                         |                         |                      |                                         |                     | Page <b>10</b>      |
|-----------|-------------------------------------------------------------------------------------|-------------------------|----------------------|-----------------------------------------|---------------------|---------------------|
| Part      | XIV Private Operating Foundat                                                       | <b>ions</b> (see instru | ctions and Part      | : VII-A, question 9                     | 9)                  |                     |
| 1a ·      | If the foundation has received a ruling foundation, and the ruling is effective for |                         |                      |                                         |                     |                     |
| ь         | Check box to indicate whether the foun                                              | ·                       | J                    |                                         | ection              | 3) or 4942(j)(5)    |
| 2a        | Enter the lesser of the adjusted net                                                | Tax year                | <br>                 | Prior 3 years                           |                     |                     |
|           | income from Part I or the minimum                                                   | (a) 2017                | (b) 2016             | (c) 2015                                | (d) 2014            | (e) Total           |
|           | investment return from Part X for each year listed                                  | <b>(-,</b> · · ·        | (-/                  | (4) 22 12                               | (-,)                |                     |
| h         | 85% of line 2a                                                                      |                         |                      |                                         |                     |                     |
|           | Qualifying distributions from Part XII,                                             | <del>.</del>            |                      |                                         |                     |                     |
| U         | line 4 for each year listed .                                                       |                         |                      |                                         |                     |                     |
|           | ·                                                                                   |                         |                      |                                         |                     |                     |
| a         | Amounts included in line 2c not used directly                                       |                         |                      |                                         |                     |                     |
|           | for active conduct of exempt activities                                             |                         |                      |                                         |                     |                     |
| е         | Qualifying distributions made directly                                              |                         |                      |                                         |                     |                     |
|           | for active conduct of exempt activities.                                            |                         |                      |                                         |                     |                     |
|           | Subtract line 2d from line 2c                                                       |                         |                      | /                                       |                     |                     |
| 3         | Complete 3a, b, or c for the                                                        |                         |                      |                                         |                     |                     |
|           | alternative test relied upon:                                                       |                         | /                    |                                         |                     |                     |
| а         | "Assets" alternative test—enter                                                     |                         |                      |                                         |                     |                     |
|           | (1) Value of all assets                                                             |                         |                      |                                         |                     |                     |
|           | (2) Value of assets qualifying under                                                |                         | /                    |                                         |                     |                     |
|           | section 4942(j)(3)(B)(i) .                                                          |                         |                      |                                         |                     |                     |
| b         | "Endowment" alternative test—enter 2/3                                              |                         |                      | <i> </i>                                | Rro                 |                     |
|           | of minimum investment return shown in Part X, line 6 for each year listed .         |                         | /                    | $\perp$ $f_2$                           | -MECEI              | //                  |
| С         | "Support" alternative test - enter                                                  |                         |                      | /5                                      |                     |                     |
|           | (1) Total support other than gross                                                  |                         | /                    | <b> </b>                                | DEC 31 20           |                     |
|           | investment income (interest,                                                        |                         | <b>/</b>             |                                         | 21 21               |                     |
|           | dividends, rents, payments on securities loans (section                             | /                       |                      |                                         | DOE:                | " /ợ/               |
|           | securities loans (section 512(a)(5)), or royalties)                                 | /                       |                      |                                         | WUFAT.              |                     |
|           | (2) Support from general public                                                     |                         |                      |                                         |                     |                     |
|           | and 5 or more exempt                                                                |                         |                      |                                         |                     |                     |
|           | organizations as provided in section 4942(j)(3)(B)(iii)                             |                         |                      | i                                       |                     |                     |
|           | (3) Largest amount of support from                                                  |                         |                      |                                         |                     |                     |
|           | an exempt organization .                                                            | L                       |                      |                                         |                     |                     |
|           | (4) Gross investment income                                                         |                         | -                    |                                         |                     |                     |
| Part      |                                                                                     | n (Complete th          | is part only if t    | the foundation h                        | ad \$5.000 or mo    | ore in assets at    |
|           | any time during the year-                                                           |                         |                      |                                         | 40,000 01 1111      |                     |
|           | Information Regarding Foundation N                                                  |                         | ,                    |                                         |                     |                     |
| -         | List any managers of the foundation w                                               |                         | ited more than 2     | % of the total cont                     | ributions received  | by the foundation   |
| _         | before the close of any tax year (but or                                            |                         |                      |                                         |                     | - <b>,</b>          |
| NONE      | ,, ( )                                                                              | .,                      |                      | , , , , , , , , , , , , , , , , , , , , |                     |                     |
| NONE<br>b | List any managers of the foundation                                                 | who own 10% o           | r more of the sto    | ck of a cornoration                     | n (or an equally la | rae portion of the  |
|           | ownership of a partnership or other en                                              |                         |                      |                                         |                     | igo portion or the  |
| None      |                                                                                     | ,,                      |                      | <b>3</b>                                |                     |                     |
| NONE      | Information Regarding Contribution                                                  | Grant Gift Los          | n Sobolorobin        | oto Programs:                           | <del></del>         | <del> </del>        |
| 2         | Check here ► ☐ if the foundation of                                                 |                         |                      |                                         | organizations and   | does not accept     |
|           | unsolicited requests for funds. If the fo                                           |                         |                      |                                         |                     |                     |
|           | complete items 2a, b, c, and d. See ins                                             |                         | giris, grants, etc., | , to maividuals of o                    | rgariizations under | other conditions,   |
|           |                                                                                     |                         | dunna of the more    | an to whom annies                       | tions should be se  | ldrooped:           |
| а         | The name, address, and telephone nur                                                | mper or email add       | aress of the perso   | on to whom applica                      | itions should be ac | aaressea:           |
|           |                                                                                     |                         |                      |                                         |                     |                     |
|           | AND COURIER FOUNDATION, ATTN: CAL                                                   |                         |                      |                                         |                     | 5605                |
| D         | The form in which applications should                                               | De Submitted and        | a innomination and   | i materiais triey SNC                   | idia moidde:        |                     |
| ADD: 1    | CATIONS SHOULD BE SENT IN WRITING                                                   | AND INCLUDE AL          | I DEDTIMENT INC      | OPMATION                                |                     |                     |
|           | Any submission deadlines:                                                           | MIND INCLUDE AL         | ET EISTHWEINT HALL   | VINIO IIVII                             |                     |                     |
| JUNE :    | •                                                                                   |                         |                      |                                         |                     |                     |
|           | Any restrictions or limitations on aw                                               | ards, such as b         | y geographical a     | areas, charitable fi                    | elds, kinds of inst | titutions, or other |
| •         | factors                                                                             |                         | , gg-sp///ou/ 0      | ,                                       | _, <u></u>          | , 2. 561            |

APPLICANTS MUST BE TAX EXEMPT ORGANIZATIONS

| 3 • Grants and Contributions Paid During | the Year or Approv                                      | ed for Fut             | ture Payment                     | <del>-</del> |
|------------------------------------------|---------------------------------------------------------|------------------------|----------------------------------|--------------|
| Recipient                                | If recipient is an individual, show any relationship to |                        |                                  | T            |
| Name and address (home or business)      | any foundation manager or substantial contributor       | status of<br>recipient | Purpose of grant or contribution | Amount       |
| a Paid during the year                   | or substantial contributor                              | recipient              |                                  | <del></del>  |
| a raid during the year                   |                                                         |                        |                                  |              |
| SEE EXHIBIT H                            |                                                         |                        |                                  |              |
|                                          |                                                         |                        |                                  |              |
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|                                          |                                                         |                        | RECEIVED                         |              |
|                                          | ,                                                       |                        | DEC 3 1 2018                     |              |
|                                          |                                                         |                        | DEC 3 1 2018                     | <b>\$</b>    |
|                                          |                                                         |                        | L <del></del>                    |              |
|                                          |                                                         | 1                      | OGDEN. UI                        |              |
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| •                                        |                                                         |                        |                                  |              |
| Total                                    |                                                         |                        | ▶ 3a                             |              |
| <b>b</b> Approved for future payment     |                                                         |                        | ,                                |              |
| SEE EXHIBIT I                            |                                                         |                        |                                  |              |
| JEE EATHOR I                             |                                                         |                        |                                  |              |
|                                          |                                                         |                        |                                  |              |
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|                                          |                                                         |                        |                                  |              |
| •                                        |                                                         |                        |                                  |              |
|                                          |                                                         |                        |                                  |              |
| Total                                    | <u> </u>                                                |                        | <u>. ▶ 3b</u>                    |              |

|                   | rt XVI                       |                                                                                                                              |                          | isiness income | Evaluded by costs  | on 512, 513, or 514                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                       |
|-------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| ente              | r gros:                      | s amounts unless otherwise indicated.                                                                                        | (a) Business code        | (b) Amount     | (c) Exclusion code | (d)<br>Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (e) Related or exempt function income |
| 1                 | Progr                        | ram service revenue:                                                                                                         | Business code            | Amount         | LACIDSION CODE     | Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (See instructions.)                   |
|                   | а _                          |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | b _                          |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | c _                          |                                                                                                                              | ·                        |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | d _                          |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | e                            |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | f                            |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | g Fe                         | ees and contracts from government agencies                                                                                   |                          | · <del>-</del> |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| 2                 | Mem                          | bership dues and assessments                                                                                                 |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| 3                 | Intere                       | st on savings and temporary cash investments                                                                                 |                          |                | 14                 | 175                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                       |
| 4                 | Divide                       | ends and interest from securities                                                                                            |                          |                | 14                 | 194,190                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                       |
| 5                 | Net re                       | ental income or (loss) from real estate.                                                                                     |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | a D                          | ebt-financed property                                                                                                        |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | b N                          | ot debt-financed property                                                                                                    |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| 6                 | Net re                       | ental income or (loss) from personal property                                                                                |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| 7                 | Other                        | rinvestment income                                                                                                           |                          |                | 14                 | 8,372                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                       |
| 8                 | Gain                         | or (loss) from sales of assets other than inventory                                                                          |                          |                | 18                 | 23,923                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                       |
| 9                 | Net in                       | ncome or (loss) from special events                                                                                          |                          |                |                    | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                       |
| 10                | Gross                        | s profit or (loss) from sales of inventory                                                                                   |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| 11                | Other                        | revenue: a                                                                                                                   |                          | -              |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | b _                          |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
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|                   | d _                          |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
|                   | е                            |                                                                                                                              |                          |                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| 12                | Subto                        | otal. Add columns (b), (d), and (e)                                                                                          |                          |                |                    | 226,660                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                       |
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|                   |                              |                                                                                                                              |                          |                |                    | 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 226,660                               |
| See               | works                        | sheet in line 13 instructions to verify calculation                                                                          | s.)                      |                |                    | 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 226,660                               |
| See<br>Par        | works                        | sheet in line 13 instructions to verify calculation  Relationship of Activities to the A                                     | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works                        | sheet in line 13 instructions to verify calculation                                                                          | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | sheet in line 13 instructions to verify calculation  Relationship of Activities to the A                                     | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of | nportantly to the                     |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of |                                       |
| See<br>Pai<br>Lin | works<br>t XVI<br>e No.<br>▼ | Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur | s.)<br><b>ccomplishm</b> | ent of Exemp   | ot Purposes        | A contributed in pses) (See instruction of the pses) (See instruction of the pseudostation of |                                       |

| Part        | XVII          | Information<br>Organization | n Regarding Tr            | ansfers to        | o and Trans           | saction      | s and F                                         | elationship                            | os Wi            | ith No             | ncharit                   | able        | Exe      | empt       |
|-------------|---------------|-----------------------------|---------------------------|-------------------|-----------------------|--------------|-------------------------------------------------|----------------------------------------|------------------|--------------------|---------------------------|-------------|----------|------------|
| 1           | Did th        |                             | directly or indirect      | ly engage i       | n anv of the f        | ollowing     | with an                                         | v other organ                          | nizatio          | n desc             | ribed                     | $\neg$      | Yes      | No         |
|             | ın se         |                             | ther than section         |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
| а           | Transf        | ers from the rep            | oorting foundation        | to a noncl        | haritable exer        | mpt org      | anızatıon                                       | of:                                    |                  |                    | _                         |             |          |            |
|             | (1) Ca        | ash                         |                           |                   |                       |              |                                                 |                                        |                  |                    | . [1                      | la(1)       |          | <b>✓</b>   |
|             | (2) Ot        | her assets .                |                           |                   |                       |              |                                                 |                                        |                  |                    | . [1                      | la(2)       |          | <b>/</b>   |
| b           | Other         | transactions:               |                           |                   |                       |              |                                                 |                                        |                  |                    | ـ ا                       |             |          |            |
|             | (1) Sa        | les of assets to            | a noncharitable e         | exempt orga       | anızatıon .           |              |                                                 |                                        |                  |                    | . [1                      | lb(1)       |          | 1          |
|             | (2) Pu        | rchases of asse             | ets from a noncha         | ritable exer      | mpt organizat         | tion .       |                                                 |                                        |                  |                    | . [1                      | lb(2)       |          | <b>✓</b>   |
|             | (3) Re        | ental of facilities,        | , equipment, or of        | her assets        |                       |              |                                                 |                                        |                  |                    | <u>[1</u>                 | lb(3)       |          | <b>✓</b>   |
|             | (4) Re        | eimbursement ai             | rrangements               | •                 |                       |              |                                                 |                                        |                  |                    | . <u>[1</u>               | lb(4)       |          | <b>/</b>   |
|             | <b>(5)</b> Lo | ans or loan gua             | rantees                   |                   |                       |              |                                                 |                                        |                  |                    | . <u>[1</u>               | lb(5)       |          | ✓          |
|             | (6) Pe        | erformance of se            | ervices or membe          | rship or fun      | ndraising solic       | citations    |                                                 |                                        |                  |                    | 1                         | lb(6)       |          | ✓          |
| С           |               |                             | quipment, mailing         |                   |                       |              |                                                 |                                        |                  |                    |                           | 1c          |          | ✓          |
| d           |               |                             | of the above is "         |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             | ther assets, or se        |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             | on or sharing arra        |                   |                       |              |                                                 | _                                      |                  |                    |                           |             |          |            |
| (a) Line    | eno (b        | ) Amount involved           | (c) Name of no            | ncharitable ex    | empt organization     | on           | (d) Desci                                       | iption of transfe                      | rs, trans        | sactions,          | and sharii                | ng arra     | angem    | ents       |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 | 770                                    |                  |                    |                           |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 | $\rightarrow$                          | -                |                    |                           |             |          |            |
|             | _             |                             |                           |                   |                       |              |                                                 |                                        | $\forall F \ell$ | EII                | ***                       |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |                  | CIV                | En                        | <u> </u>    |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        | EC 3             |                    | <u> </u>                  |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        | در ع             | <del>! 1 2</del> 0 | 10 /                      | <u>ပ္က/</u> |          |            |
|             |               |                             |                           |                   |                       |              |                                                 | 1 700                                  |                  | - 20               | <u>10 / 5</u>             | 5/_         |          |            |
|             |               |                             |                           |                   |                       |              |                                                 | <u>Ug</u>                              |                  | 7                  | <u> /2</u>                | ₩—          |          |            |
|             |               |                             |                           |                   | <del> </del>          |              |                                                 |                                        | أقماح            |                    |                           | <u> </u>    |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    | AND THE PERSONS ASSESSED. |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             | la tha        | foundation due              | Lectly or indirectly      | offiliated in     | ith or rolato         | d to or      | o or mo                                         | ro tay oyomi                           | ot oro           | ionizoti           | 000                       |             |          |            |
| 2a          | descri        | bed in section 5            | 501(c) (other than        | section 50        |                       |              |                                                 |                                        |                  |                    |                           | Yes         | <b>V</b> | No         |
| b           | IT "Yes       | <u> </u>                    | following schedu          | ile.              | (b) T                 |              | 1                                               |                                        | (-) D            |                    | -fl-t                     |             |          |            |
|             |               | (a) Name of organ           | ization                   |                   | (b) Type of orga      | anization    |                                                 |                                        | (c) Des          | cription c         | of relations              | пр          |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           |             |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           | —           |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  |                    |                           | —           |          |            |
|             |               |                             |                           |                   |                       |              |                                                 |                                        |                  | _                  |                           |             |          |            |
|             | Lindor        | populties of person I       | declare that I have exar  | nined this return | o including accom     | nanvina s    | chedules and                                    | 1 statements and                       | to the l         | nest of my         | knowledge                 | e and       | helief i | t is triie |
| Sign        |               | t, and complete Decl        | aration of preparer (othe | r than taxpayer   | ) is based on all inf | formation of | of which prep                                   | arer has any kno                       | wledge.          |                    |                           |             |          |            |
|             | 1 1           | 1 de in                     | ] /                       |                   | 100 /20 /16           | a) 1.        | FD                                              |                                        |                  |                    | May the IRS               |             |          |            |
| Here        |               | ture of officer or true     | otoo                      |                   | 112/20/10             |              | <u>. i                                     </u> |                                        |                  |                    | See instructi             |             |          |            |
|             | Joigna        | ture of officer or tru      |                           | Proper            | r'e eignature         | 11118        |                                                 | Date                                   | Т                |                    | РТ                        | IN          |          |            |
| <b>Paid</b> |               | Print/Type preparer         | a name                    | Frepare           | r's signature         |              |                                                 | Date                                   |                  | Check              | ∐                         |             |          |            |
| Prep        | arer          |                             |                           |                   |                       |              |                                                 | 1                                      | 1                | self-emp           | pioyeu                    |             |          |            |
| Use         | Only          | Firm's name                 |                           |                   | <del> </del>          |              |                                                 |                                        |                  | EIN ►              |                           |             |          |            |
|             |               | Firm's address ▶            |                           |                   |                       |              |                                                 |                                        | Phone            | no en              |                           |             |          |            |

# Schedule B

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

For to www.irs.gov/Form990 for the latest information.



**Employer identification number** Name of the organization POST AND COURIER FOUNDATION 57-6020356 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ✓ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts II and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 contributor, during the year, total contributions of more than \$1,000 exclusively for religiou literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
POST, AND COURIER FOUNDATION - ALSO SEE EXHIBIT J

Employer identification number 57-6020356

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                                                                                          | (c)<br>Total contributions         | (d) Type of contribution                                                                  |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------|
| 1          | Hendrick Automotive Gropu of Charleston SC/North Charleston 7151 Rivers Avenue  North Charleston, SC 29406                                                                 | \$10,000                           | Person Payroll Noncash (Complete Part II for noncash contributions.)                      |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                                                                                          | (c)<br>Total contributions         | (d) Type of contribution                                                                  |
| 2          | Evening Post Industries, Inc  134 Columbus Street  Charleston, SC 29403                                                                                                    | \$250,000                          | Person Payroll Noncash (Complete Part II for noncash contributions.)                      |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                                                                                          | (c)<br>Total contributions         | (d)<br>Type of contribution                                                               |
| 3          | Colbert Family Fund of Coastal Community Foundation 635 Rutledge Avenue Suite 201 Charleston, SC 29403                                                                     | \$10,000                           | Person  Payroll  Noncash  (Complete Part II for noncash contributions)                    |
| (a)        | (b)                                                                                                                                                                        | (a)                                | (4)                                                                                       |
| No.        | Name, address, and ZIP + 4                                                                                                                                                 | (c) Total contributions            | (d) Type of contribution                                                                  |
|            |                                                                                                                                                                            |                                    | Type of contribution  Person Payroll Noncash (Complete Part II for noncash contributions) |
| No.        | Blackbaud  2000 Daniel Island Drive  Name, address, and ZIR + 4  RECEIVET  DEC 31 2018                                                                                     | Total contributions                | Person                                                                                    |
| No. 4 (a)  | Blackbaud  2000 Daniel Island Drive  Charleston, SC 29492  (b)                                                                                                             | \$ 34,500                          | Type of contribution  Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No. | Blackbaud  2000 Daniel Island Drive  Charleston, SC 29492  (b)  Name, address, and ZIP + 4  Estates of Schirmer, Mr s Matthew Hertz and Mls Maud Seel  134 Columbus Street | \$ 34,500  (c) Total contributions | Type of contribution  Person                                                              |

Employer identification number 57-6020356

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No.<br>from<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
|---------------------------|----------------------------------------------|-------------------------------------------|----------------------|
| 1                         | N/A - no non-cash property given             | \$                                        |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given    | (c) FMV (or estimate) (See instructions)  | (d)<br>Date received |
| 2                         | N/A - no non-cash property given             | \$                                        |                      |
| (a)·No.<br>from<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (See instructions)  | (d)<br>Date received |
| 3                         | N/A - no non-cash property given             | \$                                        |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given    | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
| 4                         | N/A - no non-cash property given             | \$                                        |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given    | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
| 5                         | N/A - no non-cash property given RECEIVE   1 | \$                                        |                      |
| (a) No.<br>from<br>Part I | Description of noncash property given        | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
| 6                         | N/A - no non-cash property given             | \$                                        |                      |

| Schedule B (Form 990, 990-EZ, or 990-PF) (2018 | Schedule E | (Form | 990, | 990-EZ, | or 990-PF) | (2018) |
|------------------------------------------------|------------|-------|------|---------|------------|--------|
|------------------------------------------------|------------|-------|------|---------|------------|--------|

Page 4

| Name of org               | ganization  COURIER FOUNDATION                                                                                                                                            |                                                                                                                  | Employer identification number 57-6020356                                                                                           |
|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Part III                  | Exclusively religious, charitable, etc<br>(10) that total more than \$1,000 for<br>the following line entry. For organization<br>contributions of \$1,000 or less for the | the year from any one contribute<br>ons completing Part III, enter the t<br>e year. (Enter this information once | s described in section 501(c)(7), (8), or or. Complete columns (a) through (e) and otal of exclusively religious, charitable, etc., |
| (a) No.                   | Use duplicate copies of Part III if addr                                                                                                                                  | tional space is needed.                                                                                          | <del></del>                                                                                                                         |
| from<br>Part I            | (b) Purpose of gift                                                                                                                                                       | (c) Use of gift                                                                                                  | (d) Description of how gift is held                                                                                                 |
|                           | N/A                                                                                                                                                                       |                                                                                                                  |                                                                                                                                     |
|                           | Transferee's name, address, and                                                                                                                                           | (e) Transfer of gift d ZIP + 4 Rela                                                                              | tionship of transferor to transferee                                                                                                |
| (a) Na                    |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                       | (c) Use of gift                                                                                                  | (d) Description of how gift is held                                                                                                 |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           | Transferee's name, address, and                                                                                                                                           | (e) Transfer of gift                                                                                             | tionship of transferor to transferee                                                                                                |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
| ļ                         |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                       | (c) Use of gift                                                                                                  | (d) Description of how gift is held                                                                                                 |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           |                                                                                                                                                                           | (e) Transfer of gift                                                                                             |                                                                                                                                     |
| _                         | Transferee's name, address, and                                                                                                                                           | d ZIP + 4 Rela                                                                                                   | tionship of transferor to transferee                                                                                                |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           | •••••                                                                                                                                                                     |                                                                                                                  |                                                                                                                                     |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                       | (c) Use of gift                                                                                                  | (d) Description of how gift is held                                                                                                 |
|                           |                                                                                                                                                                           |                                                                                                                  | DEC 31 2019 PE                                                                                                                      |
|                           | Transferee's name, address, and                                                                                                                                           | (e) Transfer of gift d ZIP + 4 Rela                                                                              | OGDEM ransfere                                                                                                                      |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |
|                           |                                                                                                                                                                           |                                                                                                                  |                                                                                                                                     |

#### POST AND COURIER FOUNDATION

#### **12.31.2017 FORM 990-PF STATEMENTS**

## Part I, line 1 - Contributions, grants, etc.

250,000 General fund - not restricted

382,136 Restricted - "Good Cheer"

\_\_\_\_\_ Grants

632,136

Restricted - "Good Cheer" These contributions can only be donated to the following organizations:
Association for the Blind, Carolina Youth Development Center, Catholic Charities USA,
Lowcountry Food Bank, Salvation Army and Star Gospel Mission

#### Part I, line 11 - Other income

8,372 Other investment income

355 Litigation claim

500 Tax Refund

9,227

# Part I, line 16c - Other professional fees

36,229 Investment advisory fees

#### Part I, line 18 - Taxes

2,150 Foreign taxes on investment income

### Part I, line 23 - Other expenses

4,836 Merchant Fees

1,079 Bank Fees

50 SC Charitable registration fee

5,965

# Part II, line 10b - Corporate stock

1,872,368 stocks - Agressive - Stifel 1595

1,623,512 Stocks- moderate -Stifel 1514

3,495,880

## Part II, line 10c - Corporate bonds

665,992 Mutual funds - Stifel 9013

320,097 Fixed Income Bonds - Stifel 1514

986,089



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| Amount      | check date | Name/in honor of                  | Contact                 | Company                        | Address            | City, State    | Zip   |
|-------------|------------|-----------------------------------|-------------------------|--------------------------------|--------------------|----------------|-------|
|             |            | Hendrick Automotive Group         |                         |                                |                    |                |       |
|             |            | of Charleston SC/North            |                         | Hendrick Automotive Group of   |                    |                |       |
| \$10,000    | 12/23      | 12/23 Charleston                  |                         | Charleston SC/North Charleston | 7151 Rivers Ave    | N. Charleston  | 29406 |
|             |            |                                   | •                       |                                | 134 Columbus       |                |       |
| \$250,000   | 11/9       | 11/9 Evening Post Industries, Inc | Joe waring              | Evening Post Industries, Inc   | Street             | Charleston, SC | 29403 |
|             |            | Colbert Family Fund of            | Mr. and Mrs. Stephen    | Colbert Family Fund of Coastal | 635 Rutledge Ave.  |                |       |
| \$10,000    |            | 12/10 Coastal Community           | Colbert                 | Community Foundation           | Suite 201          | Charleston, SC | 29403 |
|             |            |                                   |                         |                                | 2000 Daniel Island |                |       |
| \$34,500.00 |            | 12/24 Blackbaud                   | Mıke Gianoni            | Blackbaud                      | Drive              | Charleston, SC | 29492 |
|             |            | Estates of Schirmer, Mrs.         |                         |                                |                    |                |       |
|             | _          | Matthew (Evie) Hertz & Miss   c/o | c/o restricted fund Joe |                                | 134 Columbus       |                |       |
| \$15,042    |            | 12/25 Maud Seel                   | Waring                  | Good Cheer Fund                | Street             | Charleston, SC | 29403 |
|             |            | Reader Moody McClary              | •                       |                                |                    |                |       |
| \$10,000    |            | Foundation, Inc.                  |                         |                                | P.O. Box 14503     | Charleston, SC | 29422 |

