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Return of Private Foundation

OMB No 1545-0052

DLN: 93491316022139

2018

Open to Public Inspection

Form 990-PF
Department of the Treasury

Internal Revenue Service

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

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

For	caler	ndar year 2018, or tax year beginning 01-01-20)18 , ar	ıd ending 12-31-	2018			
		indation SCHOTT FOUNDATION	A Employer id	A Employer identification number				
			34-6513748	34-6513748				
		d street (or P O box number if mail is not delivered to street address) E CENTRAL WAY	Room/suite	B Telephone nu	mber (see instruction	ns)		
Cı+··	or tow-	, state or province, country, and ZIP or foreign postal code		(843) 670-8716				
		n, state or province, country, and ZIP or foreign postal code ASANT, SC 29464		C If exemption	application is pendin	g, check here		
G Cl	neck al	l that apply \Box Initial return \Box Initial return of a	former public charity	D 1. Foreign or	ganızatıons, check he	ere 📗		
		Final return Amended return			ganizations meeting k here and attach co			
		Address change Name change			ındatıon status was t	· —		
	,	rpe of organization ✓ Section 501(c)(3) exempt private			n 507(b)(1)(A), chec			
			e private foundation Cash	- L F 75 H - 6				
of	year (f	xet value of all assets at end from Part II, col (c), ▶\$ 9,704,785 J Accounting method □ Other (specify) (Part I, column (d) must			ition is in a 60-montl n 507(b)(1)(B), chec			
Pa	rt I	Analysis of Revenue and Expenses (The total	(-) D			(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)						
	2	Check ► ☑ if the foundation is not required to attach						
	3	Sch B Interest on savings and temporary cash investments	2,836	2,836				
	4	Dividends and interest from securities	244,150	244,150				
	5a	Gross rents						
	ь	Net rental income or (loss)						
KIE	6a	Net gain or (loss) from sale of assets not on line 10	3,181,183					
Revenue	Ь	Gross sales price for all assets on line 6a 8,881,197						
8	7	Capital gain net income (from Part IV, line 2)		3,181,183				
	8	Net short-term capital gain						
	9	Income modifications						
	10a b	Gross sales less returns and allowances Less Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	3,428,169	3,428,169				
	13	Compensation of officers, directors, trustees, etc	96,000	15,582		80,418		
	14	Other employee salaries and wages						
ses	15	Pension plans, employee benefits						
ē	16a	Legal fees (attach schedule)	26-1 1.045	0		1 965		
Exp	b	Other professional fees (attach schedule)	1,865 (5,305)			1,865 8,989		
Ve	17	Interest	05,505	30,310		0,909		
rat	18	Taxes (attach schedule) (see instructions)	9 585	585		0		
12	19	Depreciation (attach schedule) and depletion	_					
Ē	20	Occupancy						
Ψ̈́	21	Travel, conferences, and meetings						
ä	22	Printing and publications						
ing	23	Other expenses (attach schedule)	3,283	325		2,958		
Operating and Administrative Expenses	24	Total operating and administrative expenses.	167.000	73.000		04.330		
ď	25	Add lines 13 through 23	167,038 503,150			94,230 503,150		
	26	Total expenses and disbursements. Add lines 24 and						
	27	Subtract line 26 from line 12	670,188	72,808		597,380		
	27 a	Subtract line 26 from line 12 Excess of revenue over expenses and						
	_	disbursements	2,757,981					
	b c	Net investment income (If negative, enter -0-) Adjusted net income (If negative, enter -0-)		3,355,361				
For		work Reduction Act Notice, see instructions.		Cat No 11289>	[C	m 990-PF (2018)		

9,462,114

130,873

9,704,785

130,873

10,607,144

10,607,144

10,607,144

10,607,144

1

2

3

4

5

6

7,776,712

2,757,981

10,607,144

10,607,144 Form **990-PF** (2018)

72,451

7,776,712

7,776,712

7,776,712

7,776,712

	3	Accounts receivable		l	
		Less allowance for doubtful accounts ▶		'	
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶		'	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶		'	
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	7,365,151	10,364,473	
	С	Investments—corporate bonds (attach schedule)			
	4.4	Investments—land buildings and equipment basis			

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

instructions Also, see page 1, item I)

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) Add lines 1, 2, and 3

Enter amount from Part I, line 27a

Temporarily restricted

Grants payable

Accounts payable and accrued expenses .

12

13 14

15 16

17

18

19 20

21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

Liabilities

or Fund Balances

Net Assets

	e the kind(s) of property sold (e g , arehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a WELLS FARGO 5625					
b WELLS FARGO 5625					
c CAPTRUST					
d					
e					
	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
· ·	(or allowable)	plus exp	ense of sale	(e) plus (f) mınus (g)
a 31	.5,124		271,417		43,707
b 8,32	7,266		5,186,560		3,140,706
c 23	8,807		242,037		-3,230
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
	(j)		(k)	Gains (Col (h) gain minus
(i) FMV as of 12/31/69	Adjusted basis		of col (ı)	, ,,	less than -0-) or
	as of 12/31/69	over co	l (j), ıf any	Losses (Tr	om col (h))
a					43,707
b					3,140,706
c					-3,230
d					
e		If gain, also enter in F		T	
	gain or (loss) s defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	·	3	3,181,183
	Jnder Section 4940(e) for Re				
(For optional use by domestic p If section 4940(d)(2) applies, li	private foundations subject to the sec	ction 4940(a) tax on n	et investment incom	e)	
Was the foundation liable for th	ne section 4942 tax on the distributant qualify under section 4940(e). Do			Y-	es 🔽 No
·	nount in each column for each year,	<u> </u>		<u> </u>	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital	ple-use assets	(d) Distribution rat (col (b) divided by c	
2017	503,596		9,659,687	,	0 052134
2016	528,269		9,683,402		0 054554
2015	757,999		12,086,391		0 062715
2014	655,370		14,682,860		0 044635
2013	687,488		13,531,763		0 050806
2 Total of line 1, column (d)		2		0 264844
number of years the four	o for the 5-year base period—divide ndation has been in existence if less	than 5 years	3		0 052969
4 Enter the net value of no	ncharitable-use assets for 2018 fron	n Part X, line 5	4		10,783,723
5 Multiply line 4 by line 3			5		571,203
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		33,554
					604,757
	ions from Part XII, line 4 ,				597,380
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and cor	nplete that part usin	g a 1% tax rate Se	e the Part VI

Page **6**

	<u>`</u>			- 4-00 -			-0				age (
			Activities for Which	Form 4720 May Be	Kequired (co	ontinue	ea)				
5a	During the year did the foundation		•	. ,						Yes	No
	(1) Carry on propaganda, or other		•	, , , ,		Yes	✓	No			
(2) Influence the outcome of any specific public election (see se				•	_	_					
	on, directly or indirectly, any vo		-		• •	Yes	✓	No			
	(3) Provide a grant to an individual		• • • • • • • • • • • • • • • • • • • •			Yes	✓	No			
	(4) Provide a grant to an organizat			· -		_					
	in section 4945(d)(4)(A)? See i					」 Yes	✓	No			
	(5) Provide for any purpose other t		- ·	• • • • • • • • • • • • • • • • • • • •		_					
	educational purposes, or for the	•	,		·	Yes	✓	No			
Ь	If any answer is "Yes" to 5a(1)-(5),		=			ea in					
	Regulations section 53 4945 or in a								5b		
_	Organizations relying on a current r										
С	If the answer is "Yes" to question 5			•	_	_	_				
	tax because it maintained expenditi If "Yes," attach the statement requi		-		· · _ [Yes	Ш	No			
6a	Did the foundation, during the year	, rece	ive any funds, directly or i	indirectly, to pay premiu	ms on						
	a personal benefit contract?					Yes	✓	No			
b	Did the foundation, during the year	, pay	premiums, directly or indi	rectly, on a personal ben	nefit contract? .		•		6 b		No
	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax year, wa				L	Yes	✓	No			
	If yes, did the foundation receive a		•						7b		
8	Is the foundation subject to the sec		. , , ,		ın remuneratıor	or					
	excess parachute payment during t				• • [Yes		No			
Pai	2 -E-VA	Offic	ers, Directors, Trusto	ees, Foundation Ma	nagers, High	ıly Pai	d Er	nplo	yees,		
	and Contractors										
1	List all officers, directors, truste							1			
	(a) Name and address	'	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contrib employee bene					se acc	
	(,		devoted to position	-0-)	deferred cor			٥	ther a	llowand	ces
ELIZA	BETH S SAAL		PRESIDENT/TREASURER	32,000			(C
	LDE CENTRAL WAY IT PLEASANT, SC 29464	10 00)								
	AM DUNNE SAAL	DRES	IDENT	32,000			(+			
	PLDE CENTRAL WAY	10 00		32,000			,	1			,
	IT PLEASANT, SC 29464										
R GRE	GORY SCHOTT	SECR 10 00	ETARY	32,000			(이			C
	PLDE CENTRAL WAY IT PLEASANT, SC 29464	1000)								
2	Compensation of five highest-pa	id en	ployees (other than th	ose included on line 1	 _see instruct	ions). I	[f no	ne, e	nter "	NONE.	71
			(b) Title, and average		(d) Contrib			<u> </u>			
(a)	Name and address of each employee	paid	hours per week	(c) Compensation	employee					se acco	
	more than \$50,000		devoted to position	(-,	plans and compen		ן ל	ot	her all	owance	es
	• •										
NON											
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		er \$5	0,000			•					

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid E	Employees,
3 Five highest-paid independent contractors for professiona	services (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
WELLS FARGO ADVISORS	INVESTMENT	34,538
255 E 5TH STREET 1400 CINCINNATI, OH 45202		
BOYD WATTERSON	INVESTMENT	21,758
ONE NORTH WACKER DRIVE SUITE 4025 CHICAGO, IL 60606		
CAPTRUST	INVESTMENT	9,009
4208 SIX FORKS ROAD SUITE 1700 RALEIGH, NC 27609		
Total number of others receiving over \$50,000 for professional service	PS	0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Incorganizations and other beneficiaries served, conferences convened, research paper.		Expenses
1		
2		
3		
3		
4		
•		
-		
Part IX-B Summary of Program-Related Investments	s (see instructions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	Amount
1		
2		_
		_
All other program related investments. Can instructions		
All other program-related investments See instructions 3		
<u> </u>		-
		-
Total. Add lines 1 through 3		0
		Form 990-PF (2018)

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

1b

2

3a 3h

4

5

597,380

597.380

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

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

472,079

307,426

164,653

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0

Page 9

t	XIII	

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Part XIII	Undistributed Income	(see instructions)				

b Total for prior years

a From 2013. **b** From 2014. . . . c From 2015. . . d From 2016. e From 2017.

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018

a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. 4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019

(If an amount appears in column (d), the

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

applied on line 5 or line 7 (see instructions) . . .

indicated below:

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

289.954



Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section	(e) Related or exemp	
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	and contracts from government agencies					
_	ership dues and assessments					
3 Intere	st on savings and temporary cash nents					
				14	2,836	
	nds and interest from securities ntal income or (loss) from real estate	+		14	244,150	
	-financed property					
	lebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
invent	pry			18	3,181,183	
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
с						
d						
е			0		2 429 160	
e 2 Subto	al Add columns (b), (d), and (e).		0		3,428,169	
e 2 Subto 3 Total.	ral Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				3,428,169 3	
e 2 Subto 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)		13		
e 2 Subto 3 Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Relationship of Activities to the Explain below how each activity for which	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
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e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
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e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
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e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	3,428,169
e 2 Subto 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish income is report	ment of Exempled in column (e) of	13 pt Purposes Fart XVI-A contribu	ted importantly to	

	/	
XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations	
. I		1

1. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501 (c)) or section 527, reliangly to policial organizations? a Transfers from the reporting foundation to a nonthantable exempt organization of (1) Cash. (2) Other assets. (3) Cash. (3) Cash. (4) Cash. (5) Loars or loan guarantees. (6) Breth ormanized of secritic from a nonchantable exempt organization. (5) Loars or loan guarantees. (6) Description of facilities, equipment, or other assets, a paid employees. (6) Performance of services or membership or fundrating solicitations. (6) Performance of services or membership or fundrating solicitations. (7) Performance of services or membership or fundrating solicitations. (8) Performance of services or membership or fundrating solicitations. (9) Performance of services or membership or fundrating solicitations. (9) Performance of services or membership or fundrating solicitations. (9) Performance of services or membership or fundrating solicitations. (1) Intelligent the services of the services of the services of the goods, other assets, or services open by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services open by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services received (a) Irens of nondarrisable exempt organization. (b) Typs of arganization (c) Description of relationships (a) Name of organization (b) Typs of arganization (c) Description of relationships (a) Name of organization (b) Typs of arganization (c) Description of relationships (a) Performance of services and the following school of transfers, transactions, and to the best of my fundation or sharing articles of the services of the	Part	XVII	Exempt Organi		ransters to	and Fransactio	ons and i	Relatio	nsnips with Nonci	naritable		
(2) Other assets. (2) Other assets. (3) Sales of assets to a noncharitable exempt organization. (4) Sales of assets to a noncharitable exempt organization. (5) Noncharitable of facilities, equipment, or other assets. (6) Performance of services or membership or fundraising solicitations. (5) Loans or loan guizantess. (6) Performance of services or membership or fundraising solicitations. (7) Sales of assets to an ordinary of the assets. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Performance of services or which present in a service size of the services of the service of the goods, other assets, or services green by the reporting foundation if the foundation serviced is than far market value of the goods, other assets, or services green or nonhimidal exemption of the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 501(c) of the section of the se			anization directly or in	directly enga						501	Yes	No
(2) Other assets.	a Trai	nsfers f	rom the reporting foun	dation to a n	oncharitable ex	empt organization	n of					
Size of assets to a noncharitable exempt organization. Size of assets to a noncharitable exempt organization. Size of assets from a noncharitable exemp	(1) Cash									1a(1)		No
(a) Sales of assets to a noncharitable exempt organization. (a) Purchase of assets from a noncharitable exempt organization. (b) Rembursement arrangements. (c) Rembursement arrangements. (d) Rembursement arrangements. (e) Performance of services or membership or fundrasing solicitations. (e) Performance of services or membership or fundrasing solicitations. (f) Rembursement arrangements. (g) Lones no foun quitantees. (g) Lones no foun quitantees. (h) Modified answer to any of the above is "Yes," complete the following schedule Column (b) should always show the far market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Lines No. (b) Amount involved. (c) Lines No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Discription of transfers, transactions, and shoring arrangements. (a) Lines No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Discription of transfers, transactions, and shoring arrangements. (e) Lines No. (f) Name of organization. (h) Type of organiza	(2) Other assets									1a(2)		No
(2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, ejument, or other assets. (4) Reimbursement arrangements. (5) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Shanning of facilities, equipment, mailing lists, other assets, or paid employees. (8) Ferformance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Performance of services or membership or fundraising solicitations. (10) No (10) No (10) No (10) No (10) Should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, shown in columin (g1) the value of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations disconded in section 501(c) (other than section 501(c)(3)) or in section 527? (a) Line No (b) Amount involved (c) Name of noncharitable exempt organizations (d) Description of transfers, transactions, and sharing arrangements. (a) Line No (b) Amount involved (c) Name of noncharitable exempt organizations (d) Description of transfers, transactions, and sharing arrangements of the value of the goods, other assets, or services exposed in section 501(c) (other than section 501(c)(3)) or in section 527? (b) If "Yes," complete the following schedule (a) Name of noncharitable exempt organizations (b) Type of ingranzations (c) Description of transfers, transactions, and sharing arrangements which give the fail of the control of the												
(a) Rental of facilities, equipment, or other assets, 11(3) No 15(4) No 15(4) No 15(5) Loans or loan guarantees. 11(5) No 15(5) No 15(6) Performance of services or membership or fundraising solicitations. 11(6) No 0 if the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation remarket value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements described in section 501(c) (other than section 501(c)(3)) or in section 527? □ Ves No b if "Yes," complete the following schedule Under penalties of parjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of propage* (other than taxpayer) is based on all information of which preparer has any knowledge Paid Preparer Print/Type preparer's name Preparer's Signature Date Check if self- with preparer share DEANNAR MOSS CPA Firm's name MOSS & YANTIS CPA PA Firm's name MOSS & YANTIS CPA PA Firm's address PO BOX 2425 Phose no. (63) 806-2349.				•	-							
(4) Rembursement arrangements. (5) Lacis to long quarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (8) Lacis to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than far market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any formatication or sharing arrangements, sharing in column (b) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any formatication or sharing arrangements, sharing a rangement of the value of the goods, other assets, or services goods,										_ ``		
(5) Loans or loan guarantees. 1b(5) No (6) Performance of services or membership or fundraising solicitations. 1b(6) No (6) Performance of services or membership or fundraising solicitations. 2b(6) No (7) Performance of services or membership or fundraising solicitations. 2b(6) No (8) Performance of services or membership or fundraising solicitations. 2b(6) No (8) Performance of services or services or complete the following schedule Column (9) should always show the fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? □ Yes No b if "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Vinder penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Vinder penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of my knowledge of the preparer's name Preparer's Signat												
(6) Performance of services or membership or fundrissing solicitations										- ` ` `		
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule: Gollumn (b) should always show the fair market value in any transaction or altering arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or altering arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing arrangements. 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section \$501(c) (other than section \$501(c)(3)) or in section \$527^\circ. Yes No. Yes No.										- ` ` `		
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No. (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?	٠,			'	3					_ <u> </u>		
(a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?		-			•					rket value		
(a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?												
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?	ın a	ny tran	saction or snaring arra	ingement, sn	ow in column (a) the value of the	e gooas, ot	tner asse	ts, or services received	1		
described in section 501(c) (other than section 501(c)(3)) or in section 527?	(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Desc	cription of	transfers, transactions, an	ıd sharıng arra	ngemen	ts
described in section 501(c) (other than section 501(c)(3)) or in section 527?												
described in section 501(c) (other than section 501(c)(3)) or in section 527?												
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described in section 501(c) (other than section 501(c)(3)) or in section 527?												
b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Vertical Print/Type preparer's name Preparer's Signature Date Date Print/Type preparer's name Preparer's Signature Date Print/Type preparer's name Preparer's Signature Print/Type pr			•	•		•			_			
(a) Name of organization (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (g) Description of relationship (h) Type of organization (g) Description of relationship (g) Description of relationship (h) Type of organization (c) Description of relationship (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (a) A statements, and to the best of			, , ,		n 501(c)(3)) or	in section 527? .			Ц Yes	✓ No		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** 2019-11-12	b If "\	es," co			1 .			ı				
Sign Here Sign Window Sign Amount Signature			(a) Name of organization	on		b) Type of organizat	ion		(c) Description of	relationship		
Sign Here Sign Windledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ******* 2019-11-12 ******* ******* ******* *******												
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Sign Here Sign Windledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ******* 2019-11-12 ******* ******* ******* *******												
Sign Here Sign Window Sign Amount Signature												
Here ******* 2019-11-12 ******* May the IRS discuss this return with the preparer shown below (see instr.)?		of my	knowledge and belief	, it is true, c								
Signature of officer or trustee Date Title Print/Type preparer's name Preparer's Signature Date Check if self-employed ▶ □ DEANNA R MOSS CPA Prim's name ▶ MOSS & YANTIS CPA PA Firm's address ▶ PO BOX 2425 Phone po. (843) 606-2349	_	*	, ,			2019-11-12	*	****			scuss th	nis
Print/Type preparer's name Date DEANNA R MOSS CPA Print/Type preparer's Signature Date Check if self-employed ▶ □ Print's name ▶ MOSS & YANTIS CPA PA Firm's address ▶ PO BOX 2425 Phone po. (843) 606-2349	Here	 ▶ −				Dete	 ▶-				rer show	vn
Paid Preparer Use Only DEANNA R MOSS CPA			ignature of officer or t	rustee	Г	Date	· I	itle		(see instr)?	✓ Yes	□No
Paid Preparer Use Only DEANNA R MOSS CPA Firm's name ► MOSS & YANTIS CPA PA Firm's eIN ►47-1356737 Phone no. (843) 606-2349			Print/Type preparer's	name	Preparer's Sig	nature	Date		Check if self-			
Preparer Use Only Firm's name ► MOSS & YANTIS CPA PA Firm's EIN ►47-1356737 Phone no. (843) 606-2349			DEANNA R MOSS (CPA					employed ▶ □	P00292	1986	
Use Only Firm's address ► PO BOX 2425 Phone no. (843) 606-2349		2505										
Phone no. (843) 606-2349			Firm's name ► MOS	S & YANTIS	CPA PA				Firi	m's EIN ▶47	-13567	'37
MT PLEASANT, SC 29465 Phone no (843) 606-2349		-	Firm's address ▶ PC	BOX 2425						<u></u>		
			M ⁻	Γ PLEASANT,	SC 29465				Pho	one no (843) 606-2	2349

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

, , , , , , , , , , , , , , , , , , ,			
AMERICAN BRAIN TUMER ASSOCIATION 8550 W BRYN MANOR AVE SUITE 550 CHICAGO, IL 60631	PC	GENERAL OPERATING	1,000
BEST BUDDIES INTERNATIONAL-MIAMI	PC	GENERAL OPERATING	2,500

BEST BUDDIES INTERNATIONAL-MIAMI FL 100 SE 2ND STREET SUITE 2200 MIAMI, FL 33131	PC	GENERAL OPERATING	2,500
BLISS SPIRITUAL CO-OP	PC	GENERAL OPERATING	2,500

100 SE 2ND STREET SUITE 2200 MIAMI, FL 33131			
BLISS SPIRITUAL CO-OP 1163 PLEASANT OAKS DRIVE MOUNT PLEASANT, SC 29464	PC	GENERAL OPERATING	2,500

MIAMI, I E 33131			
BLISS SPIRITUAL CO-OP 1163 PLEASANT OAKS DRIVE MOUNT PLEASANT, SC 29464	PC	GENERAL OPERATING	2,500
Total	 	▶ 3a	503,150

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
CAROLINA ART ASSOCIATION 135 MEETING STREET CHARLESTON, SC 29401	PC	FUNDRAISING SPONSORSHIP	15,000
CHARLESTON LIBRARY SOCIETY 164 KING STREET	PC	GENERAL OPERATING	25,000

CHARLESTON LIBRARY SOCIETY 164 KING STREET CHARLESTON, SC 29401	PC	GENERAL OPERATING	25,000
CHILDRENS MUSEUM OF THE LOWCOUNTRY 25 ANN STREET CHARLESTON, SC 29403	PC	GENERAL OPERATING	25,000

Total	 	▶ 3a	503,150
CHILDRENS MUSEUM OF THE LOWCOUNTRY 25 ANN STREET CHARLESTON, SC 29403	PC	GENERAL OPERATING	25,000
CHARLESTON, SC 29401			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

DAN MARINO FOUNDATION 400 NORTH ANDREWS AVE FORT LAUDERDALE, FL 33301	PC	WALKABOUT AUTISM	1,000
a Paid during the year			

DEE NORTON LOWCOUNTRY CHILDREN'S CENTER 1061 KING STREET CHARLESTON, SC 29403	PC	ABOVE AND BEYOND CAPITAL	25,000
DISCALCED CARMELITE NUNS	PC	GENERAL OPERATING	5 000

1061 KING STREET CHARLESTON, SC 29403			
DISCALCED CARMELITE NUNS 4525 WEST 2ND AVENUE HIALEAH, FL 33012	PC	GENERAL OPERATING	5,000

503,150

CHARLESTON, SC 29403			
DISCALCED CARMELITE NUNS 4525 WEST 2ND AVENUE HIALEAH, FL 33012	PC	GENERAL OPERATING	5,000

Total .

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
FBI MIAMI CAAAPO BOX 260397 PEMBROKE PINES, FL 33026	PC	GENERAL OPERATING	5,000

PEMBROKE PINES, FL 33026			
FEED THE NEED CHARLESTON 275 BEECH HILL MOUNT PLEASANT, SC 29464	PC	GENERAL OPERATING	2,500

275 BEECH HILL MOUNT PLEASANT, SC 29464			ŕ
GREAT LAKES CENTER FOR THE ARTS 800 BAY HARBOR DRIVE BAY HARBOR, MI 49770	PC	GENERAL OPERATING	12,500

PIOONT FEEASANT, SC 29404			
GREAT LAKES CENTER FOR THE ARTS 800 BAY HARBOR DRIVE BAY HARBOR, MI 49770	PC	GENERAL OPERATING	12,500
Total	 	▶ 3a	503,150

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient	
a Paid during the year			

206 S SPRINGS LIBRARY 206 S SPRING STREET HARBOR SPRINGS, MI 49740	PC	GENERAL OPERATING	1,000
HARRY CHAPINS FOOD BANK OF SOUTHWEST FL	PC	GENERAL OPERATINGGENERAL OPERATING	1,000

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HARRY CHAPINS FOOD BANK OF SOUTHWEST FL 3760 FOWLER ST FORT MYERS, FL 33901	PC	GENERAL OPERATINGGENERAL OPERATING	

3760 FOWLER ST FORT MYERS, FL 33901			
HOLY ANGELSPO BOX 710	PC	GENERAL OPERATING	2,500

FORT MYERS, FL 33901			
HOLY ANGELSPO BOX 710	PC	GENERAL OPERATING	2

, , , , , , , , , , , , , , , , , , ,			
HOLY ANGELSPO BOX 710 BELMONT, NC 28012	PC	GENERAL OPERATING	2,500

BELMONT, NC 28012		
Total	 ▶ 3a	503,150

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

MCLAREN NORTHERN MICHIGAN FOUNDATION 360 CONNABLE AVENUE PETOSKEY, MI 49770	PC	CAPITAL CAMPAIGN	10,000
NATIONAL CATHOLIC PARTNERSHIP ON DISABILITY	PC	GENERAL OPERATING	20,750

NATIONAL CATHOLIC PARTNERSHIP ON DISABILITY 415 MICHIGAN AVE NE SUITE 95 WASHINGTON, DC 200174501	PC	GENERAL OPERATING	20,750
NCH HEALTHCARE FOUNDATION PO BOX 234 NAPLES, FL 34106	PC	GENERAL OPERATING	15,000
Total	503,150		

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
ONE80 PLACEPO BOX 20038 CHARLESTON, SC 29413	PC	GENERAL OPERATING	20,000

'		
REDUX CONTEMPORARY ART CENTER 1056 KING STREET CHARLESTON, SC 29403	PC	EVENT SPONSORSHIP

Total .

CHARLESTON, SC 29403			
ROPER ST FRANCIS FOUNDATION 125 DOUGHTY STREET STE 790	PC	CANCER WELLNESS	25,00

1,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
ROPER ST FRANCIS FOUNDATION 125 DOUGHTY STREET STE 790 CHARLESTON, SC 29401	PC	STOKE CAMPAIGN	25,000
SCHOTT MEMORIAL CENTER	PC	CAPITAL IMPROVEMENTS	100.000

recipient

SCHOTT MEMORIAL CENTER 6591 S FLAMINGO ROAD COOPER CITY, FL 333303915	PC	CAPITAL IMPROVEMENTS	100,000
ST RITAS SCHOOL FOR THE DEAF	PC	GENERAL OPERATING	10,000

6591 S FLAMINGO ROAD COOPER CITY, FL 333303915			
ST RITAS SCHOOL FOR THE DEAF 1720 GLENDALE MILFORD ROAD CINCINNATI, OH 45215	PC	GENERAL OPERATING	10,000

,			
ST RITAS SCHOOL FOR THE DEAF 1720 GLENDALE MILFORD ROAD CINCINNATI, OH 45215	PC	GENERAL OPERATING	10,000

Recipient If recipient is an individual, show any relationship to Status of Status of Recipient If recipient is an individual, show any relationship to Status of Stat

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ST XAVIER HIGH SCHOOL 600 W NORTH BEND ROAD CINCINNATI, OH 452241499		PC	NEED BASED SCHOLARSHIP PROGRAM	15,000
TRIDENT UNITED WAY 6296 RIVERS AVENUE NORTH CHARLESTON, SC 29406		PC	GENERAL OPERATING	10,000
AMERICAN LUNG ASSOCIATION 44-A MARKFIELD DRIVE CHARLESTON, SC 29407		PC	CAMP BREATH EASY	4,000

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
ARCHDIOCESE OF MIAMI 9401 BISCAYNE BLVD MIAMI SHORES, FL 33138	PC	SEMINARIES	25,000

MIAMI SHORES, FL 33138			
BOY SCOUT OF AMERICAPO BOX 14135 MADISON, WI 537080135	PC	GENERAL OPERATING	500
CANCED ALLTANCE OF NADLES	DC.	CENEDAL ODEADTING	2 500

MADISON, WI 537080135			
CANCER ALLIANCE OF NAPLES 3384 WOODS EDGE CL STE 102 BONITA SPRINGS, FL 34134	PC	GENERAL OPEARTING	2,500

503,150

CANCER ALLIANCE OF NAPLES 3384 WOODS EDGE CL STE 102	PC	GENERAL OPEARTING	2,50
BONITA SPRINGS, FL 34134			

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

- · · · · · - · · · · · · · · · · · ·			
COASTAL COMMUNITY FOUNDATION 635 RUTLEDGE AVE CHARLESTON, SC 29403	PC	CAPITAL CAMPAIGN	500
COLLEGE OF CHARLESTON	PC	HEALTH AND HUMAN	10 000

COLLEGE OF CHARLESTON FOUNDATION 86 WENTWORTH ST CHARLESTON, SC 29401	PC	HEALTH AND HUMAN PERFORMANCE SPEAKING SERIES	10,000
GARGIULO EDUCATION CENTER	PC	REPLACE HVAC SYSTEM	6,400

FOUNDATION 86 WENTWORTH ST CHARLESTON, SC 29401		PERFORMANCE SPEAKING SERIES	
GARGIULO EDUCATION CENTER 1414 RAIL HEAD BLVD NAPLES, FL 34110	PC	REPLACE HVAC SYSTEM	6,400

CHARLESTON, SC 29401			
GARGIULO EDUCATION CENTER 1414 RAIL HEAD BLVD NAPLES, FL 34110	PC	REPLACE HVAC SYSTEM	6,400
Total	 	▶ 3a	503,150

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
LIBERTY YOUTH RANCHPO BOX 366206 BONITA SPRINGS, FL 34136	PC	GENERAL OPEARTING	5,000

MUSC CHILDREN'S HOSPITAL FUND 59 BEE ST MSC 201 CHARLESTON, SC 29425	PC	GENERAL OPEARTING	10,000
PORTER-GAUD FOUNDATION	PC.	RENEWAL CAPITAL CAMPAIGN	25,000

CHARLESTON, SC 29425			
PORTER-GAUD FOUNDATION 300 ALBERMARLE ROAD CHARLESTON, SC 29407	PC	RENEWAL CAPITAL CAMPAIGN	25,000

PORTER-GAUD FOUNDATION 300 ALBERMARLE ROAD CHARLESTON, SC 29407	PC	RENEWAL CAPITAL CAMPAIGN	25,000
Total	 	▶ 3a	503,150

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

Total .

a Tala daring the year			
READING PARTNERS SOUTH CAROLINA 6296 RIVERS AVE STE 305 NORTH CHARLESTON, SC 29406	PC	GENERAL OPEARATING	5,000

ONALD MCDONALD HOUSE	PC	GENERAL OPERATING	5,000
HARLESTON 1 GADSDEN ST			
HARLESTON, SC 29401			

81 GADSDEN ST CHARLESTON, SC 29401			
SOUTH CAROLINA AQUARIUM	PC	GENERAL OPERATING	10,00

CHARLESTON, SC 29401			
SOUTH CAROLINA AQUARIUM 100 AQUARIUM WHARF CHARLESTON SC 29401	PC	GENERAL OPERATING	10,000

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SOUTH CAROLINA AQUARIUM 100 AQUARIUM WHARF CHARLESTON, SC 29401	PC	GENERAL OPERATING	10,000

SOUTH CAROLINA AQUARIUM	PC	GENERAL OPERATING	10,00
LOO AQUARIUM WHARF			·
CHARLESTON, SC 29401			

Recipient If recipient is an individual, show any relationship to status of status of

any foundation manager

Name and address (home or business)

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
ST JOSEPH CATHOLIC CHURCH 8670 BYRON AVE MIAMI BEACH, FL 33141		PC	75TH ANNIVERSARY	5,000
ST PATRICK CATHOLIC CHURCH PO BOX 20726 CHARLESTON, SC 20413		PC	GENERAL OPERATING	1,000
VILLAGE REPERTORY COPO BOX 22012 CHARLESTON, SC 29413		PC	VILLAGE REPERTORY CO TEEN TROUPE PRODUCTION AND EDUCTION PROGRAM	5,000

recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

503,150

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
YMCA OF GREATER CINCINNATI		PC	UPDATING FERRIS SWIMMING	5,000

1CA OF GREATER CINCINNATI	PC	UPDATING FERRIS
000 YMCA DRIVE		POOL
LUE ASH, OH 45241		

any foundation manager

Name and address (home or husiness)

YMCA OF GREATER CINCINNATI		PC	UPDATING FERRIS SWIMMING) 5,
5000 YMCA DRIVE			POOL	
BLUE ASH, OH 45241				
	•		•	

efile GRAPHIC print - DO NOT P	ROCESS As F	iled Data -		D	LN: 93491316022139	
TY 2018 Accounting Fees Schedule						
	Name: JOS	EPH 1 SCHO	TT FOUNDAT	TION		
	EIN: 34-6					
	EIN. 54				1	
Category	Amount		nvestment ncome	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		1,865	0		1,865	

TY 2018 Explanation of Non-Filing with Attorney General Statement

Name: JOSEPH J SCHOTT FOUNDATION

Statement:

MANDATORY ONLINE FILING OF THE OHIO ANNUAL REPORT REPLACES THE FILING OF FORM 990-PF WITHTHE STATE.

DLN: 93491316022139

TY 2018 Investments Corporate Stock Schedule

Name: JOSEPH J SCHOTT FOUNDATION

EIN: 34-6513748

Investments Corporation Stock Schedule

Investments Corporation Stock Schedule Name of Stock	End of Year Book Value	End of Year Fair Market Value
PIPER JAFFRAY COS INC**	84,240	88,884
PROCTER & GAMBLE CO	169,650	224,836
BOYD WATTERSON	1,782,231	1,782,231
SEAGATE TECHNOLOGY	59,939	47,157
AES CORP	58,290	60,183
ALASKA AIR GROUP INC	59,579	51,662
ALPHABET INC CL	54,387	47,023
ANTHEM INC	59,642	57,253
BEST BUY	59,967	39,402
CVS HEALTH CORP	62,030	50,844
CAPITAL ONE FINL CORP	59,846	45,581
CARDINAL HEALTH INC	59,573	48,346
CARNIVAL CORP	59,796	43,877
CISCO SYSTEMS INC	60,102	53,773
COGNIZANT TECHNOLOGY SOLUTIONS	60,117	49,260
CONAGRA BRANDS INC	60,107	34,240
DISNEY WALT CO	59,484	58,772
FLIR SYSTEMS INC	59,777	42,452
GAP INC	59,924	55,590
HARTFORD FINL SVCS	60,069	52,451
HONEYWELL INTL INC	59,472	49,017
INTEL CORP	59,283	59,836
KANSAS CITY SOUTHN	59,594	48,489
KINDER MORGAN INC	59,924	50,877
KOHLS CORP	58,956	51,613
METLIFE INC	60,156	50,586
MICROSOFT CORP	59,571	53,223
OMNICOM GROUP INC	55,773	58,885
ORACLE CORP	60,023	53,096
PFIZER INC	60,007	59,320

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PROCTER & GAMBLE CO	59,871	64,160
PROGRESSIVE CORP	59,896	51,039
PRUDENTIAL FINL INC	60,176	46,810
ROBERT HALF INTL INC	59,599	48,105
UNITEDHEALTH GROUP INC	60,042	56,052
UNIVERSAL HEALTH SVCS INC	59,722	54,900
UNUM GROUP	60,926	44,158
VALERO ENERGY CORP NEW	59,833	39,959
VIACOM INC NEW	59,836	46,389
WALMART INC	59,876	58,126
WESTROCK CO	59,945	40,177
XILINX INC	59,588	64,474
MID-AMER APT CMNTYS INC	60,155	55,697
RUSSELL 3000 INDX	2,575,000	2,211,284
BOYD WATTERSON LIMITED DURATION ENHANCED INCOME	1,644,442	1,581,327
MSCI ACWI EX USA NL CTF	1,480,331	1,322,417
MSCI CANADA SMALL CAP INDEX NL	16,842	13,853
MSCI EAFE SMALL CAP INDX NL	179,996	150,863
MSCI EMG MKTS SMALL CAP INDX	46,888	43,565

Description

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As Filed Data -

Name: JOSEPH J SCHOTT FOUNDATION

CASH AND SWEEP

Other Assets Schedule

Beginning of Year -

Book Value

EIN: 34-6513748

Value

130,873

DLN: 93491316022139

End of Year - Book

End of Year - Fair Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491316022139
TY 2018 Other Expenses Sche	dule			
Name:	JOSEPH J SCHO	TT FOUNDATION		
EIN: 34-6513748				
Other Expenses Schedule				·
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	1,538	0		1,538
MEMBERSHIP DUES	1,220	0		1,220
MISC	1	1		0

OFFICE EXPENSE

TRAVEL

PROFESSIONAL FEES

REGISTRATION FEES

ORGANIZATION EXPENSES

D	escription		Amount
EIN:	34-6513748		
Name:	JOSEPH J SCH	OTT FOUNDATION	
TY 2018 Other Increases Scho	edule		
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491316022139

72,451

UNREALIZED GAIN/LOSS

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491316022139			
TY 2018 Other Professional Fees Schedule							
Name: JOSEPH J SCHOTT FOUNDATION							
EIN: 34-6513748							
Category	Amount	Net Investment	Adjusted Net	Disbursements			
		Treems	Treems	for Charitable			

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
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65,305

INVESTMENT FEES

efile GRAPHIC print - DO NOT PRO	CESS As Filed Data	-	DLN: 93491316022139				
TY 2018 Taxes Schedule							
Name: JOSEPH J SCHOTT FOUNDATION							
EIN: 34-6513748							
Category	Amount	Net Investment	Adjusted Net	Disbursements			
Category	Amount	Income	Income	for Charitable			
				Purposes			
FOREIGN TAXES	585	585		0			