

## Form 990-PF

## **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.

2018
Open to Public Inspection

For	calen	dar year 2018 or tax year beginning	, 2018, and ending						
		ndation			A Employe	r identification numb	er		
NOT	HSTE	IN-CERASA FOUNDATION				81-0916334			
Numb	er and	street (or P O box number if mail is not delivered to street address)	Ro	om/suite	<b>B</b> Telephon	e number (see instruct	ions)		
3328	3 Cotto	onfield Drive				843-388-2475	5		
City o	or town,	state or province, country, and ZIP or foreign postal code			C If exempt	tion application is pend	ling, check here ▶		
Mt P	leasar	nt, South Carolina 29466							
G	Check	all that apply	eturn	lic charity	2. Foreig	n organizations, check n organizations meetin here and attach comp	g the 85% test,		
		type of organization:  Section 501(c)(3) exempt point 4947(a)(1) nonexempt charitable trust  Other tax			E If private	foundation status was 07(b)(1)(A), check here	terminated under		
l F	air mend of	narket value of all assets at f year (from Part II, col. (c), ☐ Other (specify)  129,180 10 (Part I, column (d) must be	☑ Cash □			ndation is in a 60-mon ction 507(b)(1)(B), chec			
	rt I		(a) Revenue and expenses per books	(0) 146	t investment ncome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
, <del></del>	1		250	00			1		
8	1	Contributions, gifts, grants, etc., received (attach schedule)  Check ▶ ☐ if the foundation is not required to attach Sch. B	200			<u></u>			
1	2	· · · · · · · · · · · · · · · · · · ·		<del> </del>	-		<del> </del>		
	3	Interest on savings and temporary cash investments	2102	74	2183 74				
	4	Dividends and interest from securities	2183	<del>'                                    </del>	2103 /4		<del> </del>		
	5a	Gross rents							
	b	Net rental income or (loss)		40					
a l	6a	Net gain or (loss) from sale of assets not on line 10	262	16		·			
Revenue	b	Gross sales price for all assets on line 6a			* * '				
é	7	Capital gain net income (from Part IV, line 2)			262 18				
<b>a</b>	8	Net short-term capital gain			-				
	9	Income modifications	·	<u> </u>			-		
	10a	Gross sales less returns and allowances							
	b	Less. Cost of goods sold			<u> </u>	· · · · · · · · · · · · · · · · · · ·	1		
	С	Gross profit or (loss) (attach schedule)			1	<u> </u>	-		
	11	Other income (attach schedule)					-		
	12	Total. Add lines 1 through 11	27445	92	2445 92				
ဖွ	13	Compensation of officers, directors, trustees, etc.					<del></del>		
ve Expenses	14	Other employee salaries and wages		_	RE	CEIVED	<b></b>		
ē	15	Pension plans, employee benefits .					ų		
χ	16a	Legal fees (attach schedule)			8	KI SE SAZA	) 		
e H	b	Accounting fees (attach schedule)			<b>S</b> JA	N 2 3 2019	J		
ا کِذِ	C	Other professional fees (attach schedule)					K		
Ţ.	17	Interest			06	DEN, UT	<b></b>		
ist	18	Taxes (attach schedule) (see instructions)	20	00					
į	19	Depreciation (attach schedule) and depletion .			<del></del>				
þ	20	Occupancy							
A	21	Travel, conferences, and meetings		_					
ŭ	22	Printing and publications							
<u>B</u>	23	Other expenses (attach schedule)							
Operating and Administrati	24	<b>Total operating and administrative expenses.</b> Add lines 13 through 23	20						
<u>a</u>	25	Contributions, gifts, grants paid	5000				5000 0		
0	26	Total expenses and disbursements. Add lines 24 and 25	5020			-	5000 0		
$\dashv$	27	Subtract line 26 from line 12:							
	a	Excess of revenue over expenses and dishursements	22425	92					
	b				2445 92				
		Adjusted net income (if negative, enter -0-)			1				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Enc	of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	3510 65	12545 4	5 12545 45
	3	Accounts receivable ▶	gt,		
		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		<u> </u>	
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	. \$	٠,	
		Less allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments – corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less. accumulated depreciation (attach schedule) ▶		,	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	95373 04	108764 1	6 116634 65
	14	Land, buildings, and equipment hasis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item l)	98883 69	121309 6	129180 10
	17,	Accounts payable and accrued expenses			
<b>(</b> 0	18	Grants payable			ĺ
Liabilities	19	Deferred revenue			
Ę	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ► )			
	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here		•	
ě		and complete lines 24 through 26, and lines 30 and 31.			1
Ĕ	24	Unrestricted			
Balances	25	Temporarily restricted			
	26	Permanently restricted			
pun		Foundations that do not follow SFAS 117, check here ▶ □			,
or Fu		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	98883 69	121309 6	1
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund		·	
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Ā	30	Total net assets or fund balances (see instructions)	98883 69	121309 6	51
Ž	31	Total liabilities and net assets/fund balances (see			
_	_	instructions)	98883 69	121309 6	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			·
1		al net assets or fund balances at beginning of year-Part II, colu		st agree with	
		-of-year figure reported on prior year's return)		1	
2		er amount from Part I, line 27a		. 2	
3		er increases not included in line 2 (itemize) ▶	· · · · · · · · · · · · · · · · · · ·	3	
4		lines 1, 2, and 3	<u>4</u>		
5	Dec	reases not included in line 2 (itemize) ►  Il net assets or fund balances at end of year (line 4 minus line 5)—			
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30 <b>6</b>	121309 61

Part	IV Capital Gains and	Losses for Tax on Investm	ent Income			
		nd(s) of property sold (for example, real esse, or common stock, 200 shs MLC Co)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a_	5 77800 Vanguard Standard	& Poor's 500 Index Admiral Fund		10/17/18		
b		<del></del>				
<u>C</u>				<u> </u>		
<u>d</u>			· · ·		<u> </u>	
<u>е</u>	·-· ·	(5) Decreasing allowed	(m) Coot or	L	(b) G	on or (lose)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		ain or (loss) (f) minus (g)) 
<u>a</u>	1500 00		<del></del>	1237 82		262 18
<u> </u>						<del></del>
<u>c</u>			. <u>.</u>			
<u>d</u>						
<u> </u>	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Garas (Cr	al (h) agus musus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) I (j), if any	col (k), but no	ol (h) gain minus ot less than -0-) or (from col (h))
a						
b						
c						
d			<del> </del>	. <u> </u>	<u> </u>	<del>_</del>
е		( 16	elee enter in Da	and Line 7	-	<u>.</u>
2	Capital gain net income o		also enter in Pa , enter -0- in Pa		2	262 18
3		n or (loss) as defined in sections I, line 8, column (c). See instru			3	
Part		ler Section 4940(e) for Redu	ced Tax on N	let Investment		
Was t	s," the foundation doesn't o	section 4942 tax on the distribuqualify under section 4940(e). Do	not complete t	this part		☐ Yes ☑ No
1		ount in each column for each yea	ar; see the instru	uctions before m	aking any entries	
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Net value o	(c) of noncharitable-use a		(d) stribution ratio divided by col (c))
	2017		3480	751	88 58	4 6284
	2016		0	108	16 90	0
	2015					<u> </u>
	2014				_	<del></del>
	2013				<del>                                     </del>	
2	Total of line 1, column (d)				. 2	4 6284
3		for the 5-year base period—div	ude the total or	line 2 by 50 o	<del></del>	
3		oundation has been in existence			3	2 3142
4	Enter the net value of non	charitable-use assets for 2018 fi	rom Part X, line	5 .	. 4	116577 40
5	Multiply line 4 by line 3		•		. 5	2697 83
6	Enter 1% of net investme	nt income (1% of Part I, line 27b			. 6	24 46
7	Add lines 5 and 6				. 7	2722 29
8	Enter qualifying distribution				. 8	5000
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box in	ı raπ VI, line 1t	o, and complete	tnat part using a	1% tax rate See the

Part '		see in	stru	ction	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				- 1		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
b							
	here ► ☐ and enter 1% of Part I, line 27b						
C	, , , , , , , , , , , , , , , , , , ,						
_	Part I, line 12, col. (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	<del> </del>		24	46		
3	Add mics failed 2	<del> </del>		- 24	<del>0</del>		
4	Cabilità y (modific) tax (acmodic costicit is in [a)(i) accide and taxable foundations only)	├──		24	46		
5	Tax based on investment mounts of the mine of the property of	<del> </del>			<del></del> -		
6	Credits/Payments 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0						
a	Exempt foreign organizations—tax withheld at source				1		
b	Tax paid with application for extension of time to file (Form 8868) . 6c 0			- 1	1		
d	Backup withholding erroneously withheld 6d 0				1		
7	Total credits and payments. Add lines 6a through 6d	<u> </u>		0			
8	Enter any penalty for underpayment of estimated tax. Check here  from 2220 is attached	<del> </del>		ō			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			24	46		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			- 0			
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11						
	VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or d	lid it		Yes	No		
	participate or intervene in any political campaign?	. [	1a		<u> </u>		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See	the					
	instructions for the definition	Ļ	1b				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	rıals			1		
	published or distributed by the foundation in connection with the activities						
C							
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.						
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$	<u>  </u>			ł		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	eu					
•	on foundation managers ▶ \$	-	2		~		
2	If "Yes," attach a detailed description of the activities	•			Ì		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti-	cles .	3				
4	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<del>-</del>		
4a	If "Yes," has it filed a tax return on Form 990-T for this year?	•	4b		<u> </u>		
b 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5				
3	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 conflict with the state law remain in the governing instrument?		6	<del></del>			
7	conflict with the state law remain in the governing instrument?	<u> </u>	7	7			
, 8а							
oa	SOUTH CAROLINA						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	neral _	8b	<del>-</del>			
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3	3) or  .					
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Y	es,"			,		
	complete Part XIV	. ·	9				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing to names and addresses		10	,			
	number and addresses	<u> </u>	. •				

Par	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		<b>,</b>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application' Website address ► N/A	13	1	
14	The books are in care of ► KEITH B NOTHSTEIN Telephone no ►	843388	2475	
	Located at ▶ 3328 COTTONFIELD DRIVE, MT PLEASANT, SC ZIP+4 ▶	29466-	8012	
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		1	1
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	16	Yes	No_
	over a bank, securities, or other financial account in a foreign country?.  See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name o		-	<b>,</b>
	the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	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?	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .   Yes	i		
	(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		1	
	the benefit or use of a disqualified person)?	٠		
	(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.)	,		
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	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, tha were not corrected before the first day of the tax year beginning in 2018?	1c		7
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	,		
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?	,		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	.		
b	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 income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	2b	·	
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20 , 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	,		
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation o	.		
_	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			
4	foundation had excess business holdings in 2018)	3b 4a	-	1
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2018'			-/

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Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	Require	ed (conti	nued)			
5a	During	the year, did the foundation pay or incur	any am	ount to.							Yes	No
	•	ry on propaganda, or otherwise attempt		on (sect	tion 4945(e	))?	🗌 Yes	☑ No	, 7		' [	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,										ŀ	
	directly or indirectly, any voter registration drive?								,		<b>'</b>	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								,			
		vide a grant to an organization other that						_				- 1
	section 4945(d)(4)(A)? See instructions							.   '				
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational							´   .	-	]		
	purposes, or for the prevention of cruelty to children or animals?						.   .					
b		inswer is "Yes" to 5a(1)–(5), did any of the				fix under th			_	_ I		
D		ilations section 53 4945 or in a current no							3011060	5b		
	_	zations relying on a current notice regardi						40110110	▶. □			
_	•	nswer is "Yes" to question 5a(4), does t	•				the tox			'	1.7	
C		e it maintained expenditure responsibility					lile lax					]
				-				∐ Yes	∐ No	'		į
6-		" attach the statement required by Regul								1 .		
6a		foundation, during the year, receive any ersonal benefit contract?					emums				٠.	}
	•							☐ Yes	_ ✓ No			ئـــــ
b		foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a persona	penefi	t contract	· .	_6b		
_		to 6b, file Form 8870						<b>—</b>				· .
		ime during the tax year, was the foundation						∐ Yes	✓ No	<del></del>		لــــا
		" did the foundation receive any proceed		•					n?	7b		
8		oundation subject to the section 4960 ta		•	more t	han \$1,000	),000 in		_	,		·
		eration or excess parachute payment(s) de			· :		•		✓ No			
Part	VIII	Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Man	agers,	Highly I	aid F	mploy	ees,	
		and Contractors					- 1:	N 1 1 1 1	- A?			
_1_	List all	officers, directors, trustees, and found				mpensation				·		
		(a) Name and address	hou	e, and average rs per week	(If r	ot paid,	emplo	Contribution byee benefit	plans	(e) Expe	nse aco allowan	
				ed to position	en	ter -0-)	and def	erred compe	ensation			
	B NOTH		1 -	RUSTEE		0	ļ		0			0
		TELD DRIVE, MT PLEASANT, SC 29466	2									
		THSTEIN		RUSTEE		0			0			0
		TELD DRIVE, MT PLEASANT, SC 29466	3									
		JNOTHSTEIN		AITTEE		0			0			0
		REEK DRIVE, DURHAM, NC 27705	50									
	E NOTI		l	NITTEE		0	İ		0			0
		TH ROAD, RALEIGH, NC 27609	50		L						_	
	"NONE	ensation of five highest-paid employed."	es (oth	er than tho	se incli	uded on li	ne 1 —	see instr	uction	s). If n	one, o	enter
(	a) Name a	nd address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contribution (d) Co	benefit deferred	(e) Expe	nse acc allowan	
NONE				-				<del></del>			_	
			<b></b>									
		••••••										
				-						_		
		·			1							
		<u> </u>			_	_						
Total r	number	of other employees paid over \$50,000							<b></b>			
				·		<del></del>				Form <b>99</b>		

3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		_
- Cot:	I number of others receiving over \$50,000 for professional services	
	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
01	ganizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	NONE	
2		
•		
3		
4		
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	NONE	
_		
2		
A	other program-related investments. See instructions	-
3	• •	
J		
3		
3		

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	45° %	
а	purposes: Average monthly fair market value of securities	1a	114664 48
b	Average of monthly cash balances	1b	3688 21
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	118352 69
e	Reduction claimed for blockage or other factors reported on lines 1a and	* •	110002 00
Ç	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	118352 69
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see	•	110332 03
7	Instructions)	4	1775 29
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	116577 40
6	Minimum investment return. Enter 5% of line 5	6	5828 87
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f		
rait.	and certain foreign organizations, check here ► and do not complete this part.)	oundan	5115
	Minimum investment return from Part X, line 6	1	5828 87
' 2a	Tax on investment income for 2018 from Part VI, line 5		
b		2c	24 46
с 3	Add lines 2a and 2b	3	5804 41
4	·	4	0
5	Recoveries of amounts treated as qualifying distributions	5	5804 41
		6	0
6 7	Deduction from distributable amount (see instructions)		
'	Const.	7	5804 41
Dout		/	3604 41
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	<del></del>	5000
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
ь 2	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		0
•		2	
3	Amounts set aside for specific charitable projects that satisfy the:	<del></del>	0
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	5000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	5000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		04.40
•	Enter 1% of Part I, line 27b. See instructions	5	24 46
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4975 54
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	er the foundation

art	XIII Undistributed Income (see instruction	ons)			
_		(a) Corpus	(b) Years prior to 2017	(c) 2017	<b>(d)</b> 2018
1	Distributable amount for 2018 from Part XI, line 7				5804 41
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only			772 45	
b	Total for prior years: 20 , 20 , 20		0		
3	Excess distributions carryover, if any, to 2018.				
a	From 2013				i
b	From 2014		٠.		i
C	From 2015				
d e	From 2016				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2018 from Part XII,			<del>-</del>	
-	line 4 ▶ \$5000			770.45	
а	Applied to 2017, but not more than line 2a			772 45	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0	,'		1
d	Applied to 2018 distributable amount .				4227 55
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as	0	····		0
	indicated below:				ł
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е	Undistributed income for 2017. Subtract line			-	
	4a from line 2a. Taxable amount-see				
	instructions			0	
f	Undistributed income for 2018. Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2019				1576 86
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3) (Election may be required—see instructions)	ū	,		
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a	0		·	·
10	Analysis of line 9:				
а	Excess from 20140				
b	Excess from 2015 0		·		
c	Excess from 2016		·		
d	Excess from 2017				
е_	Excess from 2018 0				-

	90-PF (2018)			VIII A		Page 10
Part					9)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	•	-			N/A
ь	Check box to indicate whether the fou		e operating founda		ection 4942(	j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	each year listed .				<u></u>	
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	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			<u>/</u>		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test-enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income .	7				
Part	XV Supplementary Information	n (Complete th	nis part only if t	he foundation h	nad \$5,000 or n	nore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation					
а	List any managers of the foundation before the close of any tax year (but of	who have contribi				
Pamel	a C Nothstein					
b	List any managers of the foundation	who own 10% o	r more of the sto	ck of a corporatio	n (or an equally	arge portion of the
	ownership of a partnership or other ei					• ,
None		• •		_		
2	Information Regarding Contribution	Grant Gift Los	an. Scholarship	etc Programs		
•	Check here ▶ ☑ If the foundation unsolicited requests for funds. If the f	only makes cont	ributions to prese	elected charitable	-	
	complete items 2a, b, c, and d. See in		ge, g,,			
a	The name, address, and telephone nu		dress of the perso	on to whom applica	ations should be a	addressed.
′b	The form in which applications should	be submitted an	d information and	materials they sho	ould include.	
	Any submission deadlines:	<del></del>				
	Any restrictions or limitations as a	iarde such so h	v geographical a	reae charitable fi	alde kinde of :-	etitutions or other
d	Any restrictions or limitations on av	aius, such as D	y geographical a	reas, chantable II	eius, Kinus OI IN	sututions, or other

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or Amount status of any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year SC DEPT OF HEALTH & ENVIRONMENTAL 3500 00 N/A Govt Agy HPV Vaccine Charleston County, SC CONTROL - 4050 Bridge View Drive, North CHARLESTON, SC 294 SAFE HAVEN FOR CATS 8431 Garvey Drive, Suite 1500 00 PC Cat engagement - toys and programs 137, Raleigh, NC 27616 5000 00 Approved for future payment **Total** 

Рa	rt XVI	-A Analysis of Income-Producing Ac					
Ente	r gros	s amounts unless otherwise indicated		isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income
1	Prog	ram service revenue:			ZXOIGOION GGG		(See instructions)
	a <u>N</u>	N/A					
	b _						
	c _					<u> </u>	
	d _			l 			
	е _	<del></del>	<u></u>	<del></del>			
	f _						
	g F	ees and contracts from government agencies					
2	Mem	bership dues and assessments					
3	Intere	est on savings and temporary cash investments					
4	Dıvid	ends and interest from securities			14	2183 74	
5	Net r	ental income or (loss) from real estate:			,		
		ebt-financed property					
		ot debt-financed property					
6	Net re	ental income or (loss) from personal property					
7	Other	r investment income			<u></u>		
8	Gain	or (loss) from sales of assets other than inventory			18	262 18	
9		ncome or (loss) from special events .					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	r revenue: a					
	b _						
	c _						
			1				
	d				+		
	d _						
	e Subto	otal. Add columns (b), (d), and (e)				2445 92	
13	e Subto	l. Add line 12, columns (b), (d), and (e)				2445 92 13	2445 92
<b>13</b> See	e Subto Total works	l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)				2445 92
13 See Pai	e Subto Total works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works	l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
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13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	2445 92  Inportantly to the tions)
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
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13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	
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13 See Pal Lin	e Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) <b>ccomplishm</b>	ent of Exemp	t Purposes	13	

Part	XVII	Informatio Organizati	n Regarding Ti ons	ansfei	s to and Ti	ransactio	ns and F	Relationshi	ps W	/ith Ñ	lonchai	itable	Exe	empt
1	ın se		directly or indirect other than section										Yes	No
a	-		porting foundation	n to a n	oncharitable	exempt org	ganization	of.						
	(1) C	ash			•							1a(1)		>
	<b>(2)</b> O	ther assets .										1a(2)		<b>&gt;</b>
b		r transactions:												1
	(1) S	ales of assets to	a noncharitable	exempt	organization							1b(1)		>
	(2) P	urchases of asse	ets from a noncha	ırıtable	exempt orga	nization .						1b(2)		<b>\</b>
			, equipment, or o	ther ass	ets .		-	٠			•	1b(3)		<b>-</b>
		eimbursement ai	_					•	•	•		1b(4)		
		-	rantees					•	•	•	•	1b(5)		<b>\</b>
			ervices or membe		_				٠	•	•	1b(6)		<b>✓</b>
¢			quipment, mailing						. •			1c		<b>√</b>
d			of the above is "											
			ther assets, or se											
(a) I		b) Amount involved	on or sharing arra											
(a) Line	10 (	b) Amount involved	(c) Name of the	iiiciianiau	le exempt organ	iization -	(a) Desci	ription of transfe	ers, trai	isactio	ns, and sna	nny ana	- geme	ents
			<u> </u>										_	
	-													
	_				<u> </u>			·						
					<u> </u>			· ···-						
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				***				<del>-</del>						
	descr	ibed in section 5	ectly or indirectly 501(c) (other than	section				ore tax-exe		-	zations	☐ Ye	s 🗸	No
<u>b</u> _	If "Ye	<u> </u>	following schedu	ıle									_	
		(a) Name of organ	ization	<u> </u>	(b) Type o	forganization			(c) De:	scriptio	n of relation	iship		
			<del></del>	1		_/								
		·- <u>-</u>			$\rightarrow$							_		
				+	-									
		· · · <u></u>		1	<del>/</del>									
	Linda	r popultion of popular I	dadara that I have aver	N. L			ebodulos and	Latatamenta and	d to the	hart of	mu kaasulad	oo ood b	aliaf it	in thin
Sign Here	l 1	ct, and complete Deck	deglare that I have example aration of preparer (p)	That stop	ayer is based on	\	of which prep		wledge	best of	with the pr	eparer s	ss this i hown b	return elow?
		ature of officer or true	ettee	P	Date	Title					See instruc		162[	_,,,,,
Paid Prepa	are.	Print/Type preparer	's name	Pre	parer's signature	•		Date			k  if f	MIT		
Use (		Firm's name ▶				<del></del>	_		Firm's	EIN •	•			
	Firm's address Phone no													

## Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

## **Schedule of Contributors**

▶ Attach to Form 990. Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

**Employer identification number** 

81-0916334 NOTHSTEIN-CERASA FOUNDATION 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 met the 331/3% support test of the 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 I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, 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) filing 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 totaling \$5,000 or more during the year . . . . . . . . . . . . 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 filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization NOTHSTEIN-CERASA FOUNDATION Employer identification number 81-0916334

Part i	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	PAMELA C NOTHSTEIN  3328 COTTONFIELD DRIVE  MT PLEASANT, SC 29466	\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
NOTHSTEIN-CERASA FOUNDATION

Employer identification number 81-0916334

Part II	Noncash Property (see instructions) Use duplicate copi	es of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	NOT APPLICABLE		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	······································	   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		  \$	
		   \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization Employer identification number NOTHSTEIN-CERASA FOUNDATION 81-0916334 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Revenue/Expenses

Net Investment Income

Per Books

Internal Revenue Service

12/31/17 990PF Excise

Tax – Balance Due

\$20.00

\$0.00