DLN: 93493055012000 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable COASTAL COMMUNITY FOUNDATION ☑ Address change 23-7390313 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1691 TURNBULL AVE ☐ Amended return ☐ Application pending (843) 723-3635 City or town, state or province, country, and ZIP or foreign postal code N CHARLESTON, SC  $\,$  294051944  $\,$ G Gross receipts \$ 93,726,832 Name and address of principal officer H(a) Is this a group return for DARRIN GOSS ☐Yes **☑**No subordinates? 1691 TURNBULL AVE H(b) Are all subordinates N CHARLESTON, SC 294051944 ☐ Yes ☐No ıncluded? **☑** 501(c)(3) ☐ 501(c)( ) **◄** (Insert no ) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW COASTALCOMMUNITYFOUNDATION ORG L Year of formation 1974 M State of legal domicile SC K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities THE FOUNDATION'S PURPOSE IS TO HELP CREATE VIBRANT COMMUNITIES BY UNITING PEOPLE AND INVESTING RESOURCES Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 19 4 19 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) . . . . 6 158 Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 98,615 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 22,370,158 27,516,044 Ravenua 2,370,560 9 Program service revenue (Part VIII, line 2g) . 1,921,572 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11,664,993 13,276,501 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 156,040 70,835 36,112,763 43,233,940 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 16,584,587 22,027,378 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,810,425 1,938,978 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶357,884 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 3,082,348 3,519,611 21,477,360 27,485,967 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 15,747,973 Revenue less expenses Subtract line 18 from line 12 . 14,635,403 Net Assets or Fund Balances Beginning of Current Year End of Year 188,029,269 203,913,645 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 4,025,688 6,058,268 22 Net assets or fund balances Subtract line 21 from line 20 . 184,003,581 197,855,377 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-02-24 Signature of officer Sign Here DARRIN GOSS PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-02-24 P00743576 Paid self-employed Firm's name ► ELLIOTT DAVIS LLCPLLC Firm's EIN ► 57-0381582 Preparer Use Only Firm's address ▶ 100 CALHOUN STREET SUITE 300 Phone no (843) 577-7040 CHARLESTON, SC 29401 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2	018)				Page <b>2</b>
Pa	t III	Statement of Program Se	rvice Accomplisi	nments		
		Check if Schedule O contains a	response or note to a	ny line in this Part III .		🗹
1	Briefly	describe the organization's miss				
OFFIC HORF DESC	CIALLY Y, AND RIBING	SERVES NINE COASTAL COUNTIE JASPER THE FOUNDATION ADM	ES - BEAUFORT, BERI IINISTERS MORE THA IFIC PURPOSES FOR	(ELEY, CHARLESTON, ( AN 800 INDIVIDUAL FU WHICH GRANTS ARE T	PEOPLE AND INVESTING RESOUR COLLETON, DORCHESTER, GEORGI NDS, EACH ESTABLISHED WITH A 'O BE MADE THE FOUNDATION'S N DERSHIP EFFORTS	ETOWN, HAMPTON, N INSTRUMENT OF GIFT
2	Did th	e organization undertake any sig	nificant program serv	uces during the year w	hich were not listed on	
_		or Form 990 or 990-EZ?	, ,	<i>,</i>		☐ Yes ☑ No
		s," describe these new services of				Lifes Lino
3		e organization cease conducting,		hanges in how it condi	icts any program	
_		es?	<del>-</del>			☐ Yes ☑ No
		s," describe these changes on Sch				
4	Descri Sectio	be the organization's program se	rvice accomplishmen izations are required	to report the amount of	largest program services, as meas of grants and allocations to others,	
4a	(Code	) (Expenses \$	23,402,920	including grants of \$	22,027,378 ) (Revenue \$	2,370,560 )
	See Ad	ditional Data				
4b	(Code	) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4d	Other	program services (Describe in So	thedule O )			
		nses \$	including grants of	\$	) (Revenue \$	)
4e	Total	program service expenses ►	23,402,9	20		

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🐕	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			N
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II " Did the organization maintain collections of works of art, historical treasures, or other similar assets?	7		No No
	If "Yes," complete Schedule D, Part III 🐕	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 😼	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	

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Checklist of Required Schedules (continued)			
		Yes	No
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	28a		No
A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $\$	29	Yes	
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
	Checklist of Required Schedules (continued)  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 1.  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  Did the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I.  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II.  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV.  Was the organization provide a grant or other assistance	Checklist of Required Schedules (continued)  Did the organization answer "Yes" to Parl VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 1.  Did the organization have a tax-exempt bond issue with an outstanding anninpal amount of more than \$100,000 as of the least day of the year, that was issued after December 31, 2002 If "Yes," answer lines 24b through 24d and a complete Schedule K If "No," go to line 25a.  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  24a Did the organization acts as an "on behalf of issuer for bonds outstanding at any time during the year?  15b Did the organization acts as an "on behalf of issuer for bonds outstanding at any time during the year?  15c Did the organization acts as an "on behalf of issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule L, Parl I.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Parl II.  Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's pinor forms 990 or 990-E27  16 "Yes," complete Schedule L, Parl II.  Did the organization provide a grant or other assistance to an officer, director, trustee, skey employees, inspect compensated employees, or disqualified persons? If "Yes," complete Schedule L, Parl III.  Did the organization provide a grant or other assistance to an officer, director, trustee, we propose, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Parl II.  Did the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If "Yes," c	Dd the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. Part IV. Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2027 if "Yes," aswer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.  24a Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24b Dd the organization maintain an escrow account other than a refunding escrow at any time during the year?  24c Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Complete Schedule I, Part I.  25b If "Yes," complete Schedule I, Part I.  25c If "Yes," complete Schedule I, Part I.  25d If "Yes," complete Schedule I, Part II.  25d If year Indicates Schedule I, Part II.  25d If year Indicates Schedule I, Part II.  26d The organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, on the organization proper any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, or key employee? If "Yes," complete Schedule II, Part II.  27 Od the organization proper any amount on Part X, line 5, 6, or 22 for receivables from organization proper any amount on Part X, line 1, Part III.  28 Dd the organiz

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

Yes

53

0

1a

1b

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

10a

10b

11a

11b

12b

13b

13c

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

**b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . . . . . . . . .

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans . . . . c Enter the amount of reserves on hand . . . . . . . . . . . . . . .

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders .

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

8

9a

9h

12a

13a

14a

14b

15

No

Nο

Nο

No

No

Form **990** (2018)

the following

Page 6

Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2			" resp	onse to	lines	
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI					<b>✓</b>	
Se	ction A. Governing Body and Management						
					Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19				
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			2		No	
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other			3		No	

Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . . . . . . . .

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the

State the name, address, and telephone number of the person who possesses the organization's books and records

▶JANE LITZ 1691 TURNBULL AVE N CHARLESTON, SC 294051944 (843) 723-3635

and branches to ensure their operations are consistent with the organization's exempt purposes?

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . .

**b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . .

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Did the organization become aware during the year of a significant diversion of the organization's assets? .

Did the organization have members or stockholders? . . . . . . . .

10a Did the organization have local chapters, branches, or affiliates? .

Each committee with authority to act on behalf of the governing body? .

- 4 5 Νo 6

Yes

Yes

7a

7b

8a

8b

10a

10h

11a

12a

Yes

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Nο

Nο

Nο

No

Nο

Nο

Nο

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes Did the organization have a written whistleblower policy? . . . . 13 Yes 13 Did the organization have a written document retention and destruction policy? . 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . . . 15a Yes 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a No b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶ Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website 🗹 Upon request 🔲 Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

Part VII

(16) BILL STANFIELD

(17) COLLEEN TROY

DIRECTOR

DIRECTOR

(F)

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(C) (D) (B) (E)

(A) Name and Title	Average hours per week (list any hours for related organizations below dotted line)	pers	n on on is	both ecto	t che ox, u n an or/tr	nless office ustee	er )	Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		นธษะ	Trustee		ĐĐ	pensated				
(1) C MICHAEL BRANHAM CHAIRMAN	4 00	x		×				0	0	0
(2) PAUL KOHLHEIM CHAIR-ELECT	4 00	×		x				0	0	0
(3) TODD ABEDON DIRECTOR	1 00	х						0	0	0
(4) J ELIZABETH BRADHAM DIRECTOR	1 00	×						0	0	0
(5) RONDA DEAN DIRECTOR	1 00	×						0	0	0
(6) HERBERT DRAYTON DIRECTOR	1 00	×						0	0	0
(7) TONY GHOSTON DIRECTOR	1 00	×						0	0	0
(8) B SHAWAN GILLIANS DIRECTOR	1 00	x						0	0	0
(9) STEVEN E GOLDBERG DIRECTOR	1 00	×						0	0	0
(10) GORDON GRANGER DIRECTOR	1 00	×						0	0	0
(11) PAUL K HOOKER SECRETARY/TREASURER	1 00	x		х				0	0	0
(12) RACHEL K HUTCHISSON DIRECTOR	1 00	x						0	0	0
(13) LARRY MERCADO DIRECTOR	1 00	×						0	0	0
(14) BOB NIGRO DIRECTOR	1 00	×						0	0	0
(15) DAWN H ROBINSON DIRECTOR	1 00	х						0	0	0
	1.00	l								

1 00

1 00

0

0

0

Part VII

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

(A) (B) (C) (D) (E) (F)

Page 8

	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than o	ne b	ox, ι n of	t ch unle ficei	r and a	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from relate organization	on d ns	Estima amount of compen from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099 MISC)		organizat relat organiz	:ed
(18)	ANGELA WASHINGTON	1 00	х						0		0		
DIRE	CIOR		^`						, and the second		${-}$		
(19)	ANITA ZUCKER	1 00	×						0		٥		0
	CTOR	***************************************	••••										
(20)	CHRISTA DIVIS	50 00			×				122,971		٥		14,117
	DEFARTED 3/3/2019		••••						,		$\rightarrow$		
(21)	DARRIN GOSS	50 00			×				204,467		٥		20,999
CEO						<u> </u>			,		$\rightarrow$		
(22)	TINA JOHNSON-BREBNER	50 00					×		110,372		o		23,456
EVP			••••								$\rightarrow$		
(23)	EDITH BLAKESLEE	50 00					×		103,809		o		18,150
VP			••••						·				
											$\dashv$		
							<u> </u>						
	Sub-Total					1	•				┷		
	Total from continuation sheets to Part \	•				1	<u> </u>		544.640		_		76.722
a	Total (add lines 1b and 1c)						<b>&gt;</b>		541,619		0		76,722
2	Total number of individuals (including bu		those li	sted a	abov	/e) v	vho re	ceiv	ed more than \$100	,000			
	of reportable compensation from the orga	amzation P 4											
												Yes	No
3	Did the organization list any former office			•		,	,	_	<u>.</u>	mployee on			
	line 1a? If "Yes," complete Schedule J for	such individual		•	•	٠		•			3		No
4	For any individual listed on line 1a, is the									he			
	organization and related organizations gr	eater than \$150	0,0007.	If "Ye	s," (	com	plete S	Sche	dule J for such				
	individual		•		•	•	•	•			4	Yes	
5	Did any person listed on line 1a receive of									dual for			
	services rendered to the organization $^{\gamma}If$	"Yes," complete	Schedu	ile J f	or s	uch	persoi	η.			5		No
Se	ection B. Independent Contractors	5											
1	Complete this table for your five highest from the organization Report compensation										npen	sation	
	Name and I	(A) ousiness address							Descrin	(B) tion of services		(C Compen	
FUND	EVALUATION GROUP	Capilless address							INVESTMENT (				177,829
	AST FIFTH ST												
	INNATI, OH 45202												

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 1

Form **990** (2018)

Part		Statement of	Revenue							rage <b>9</b>
		Check if Schedul	e O contains a	a respo	onse or note to any	line in this Part VII				<u> </u>
						(A) Total revenue	Rel ex fu	(B) ated or cempt nction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	12	Federated campaig	ns	1a	12,100		l le	venue		312 - 314
nts ints		<b>b</b> Membership dues		1b						
3ra nou	١,	c Fundraising events		1c	288,940					
Š, ( An		d Related organizatio		1d	<u>'</u>					
Giff		e Government grants (co		1e	11,000					
is,		F All other contributions,			11,000					
tior r S	'	and similar amounts n above		1f	27,204,004					
Contributions, Gifts, Grants and Other Similar Amounts	١.	Noncash contribution	ons included							
a di	'	in lines 1a - 1f \$		7,:	152,88 <u>4</u>					
Cont		<b>h Total.</b> Add lines 1a	-1f		•	27,516,044				
a.					Business	s Code				
ž.	2a	MANAGEMENT FEE INCO	OME			561000	,331,310	2,33	1,310	
Program Service Revenue	b	EARNED SERVICES FEES	5			561000	39,250	3'	9,250	
3	_									
Z.	d									
2	e			_						
gra	f	All other program se	rvice revenue							
Ĕ	g	<b>Total.</b> Add lines 2a-2	f		2,	370,560				
		Investment income (ii			 Interest, and other	1				
	S	similar amounts) .			•	2,629,0	22			2,629,022
		Income from investme				-				
	5	Royalties				•	-			
	6a	Gross rents	(ı) Real		(II) Personal	_				
	-									
	b	Less rental expenses								
	c	: Rental income or				-				
		(loss)								
	d	Net rental income o								
	7-	Gross amount	(ı) Securit	ies	(II) Other					
	/ a	from sales of assets other	61,1	08,151	75	60				
		than inventory								
	ь	Less cost or								
		other basis and sales expenses		47,882	·					
		Gain or (loss)		60,269	-12,79	-↓				
		Net gain or (loss) .			<b>•</b>	10,647,4	/9			10,647,479
a)	oa	Gross income from for form for the contract of	288,940							
n. Fe		contributions reporte See Part IV, line 18		а	50,215					
Other Revenue	Ь	Less direct expense		Ь		_				
<u> </u>		: Net income or (loss)				 18,7∙	45			18,745
ŧ	9a	Gross income from g		es						
0		See Part IV, line 19		а						
	Ь	Less direct expense	c	ь		_				
		: Net income or (loss)			les					
	10a	Gross sales of invent								
		returns and allowand	es	-						
	ь	Less cost of goods s	old	a b		_				
		: Net income or (loss)								
		Miscellaneous		mvem	Business Code		+			
•	11	aOTHER INCOME			90009	52,0	90			52,090
	b	,								
	c	:					+			
	d	All other revenue .								
	e	Total. Add lines 11a	-11d		▶	F2.0	20			
	12	: <b>Total revenue.</b> See	Instructions			52,0				
						43,233,9	40	2,370,560	<u> </u>	0 13,347,336 Form <b>990</b> (2018)

Form 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	-	·	olete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	21,510,893	21,510,893		
2 Grants and other assistance to domestic individuals See Part IV, line 22	513,985	513,985		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	2,500	2,500		
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	556,302	210,837	271,628	73,837
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	968,685	367,129	472,984	128,572
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	65,289	24,744	31,879	8,666
9 Other employee benefits	223,076	84,545	108,922	29,609
<b>10</b> Payroll taxes	125,626	47,612	61,340	16,674
11 Fees for services (non-employees)				
a Management	1,977,354		1,977,354	
<b>b</b> Legal				
c Accounting				
<b>d</b> Lobbying				
e Professional fundraising services See Part IV, line 17				
<b>f</b> Investment management fees	122,710		122,710	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	492,634	239,707	244,247	8,680
12 Advertising and promotion	123	123		
<b>13</b> Office expenses	45,794	17,356	22,360	6,078
14 Information technology	52,417	19,866	25,594	6,957
15 Royalties				

167,073

57,253

74,474

62,508

108,683

133,659

124,533

40,328

39,349

20,719

27,485,967

63,320

21,699

41,008

23,690

128,659

47,198

15,284

14,913

7,852

23,402,920

81,578

27,955

22,582

30,521 108,683

5,000

60,806

19,691

19,213

10,116

3,725,163

22,175

7,599

10,884

8,297

0

16,529

5,353

5,223

2,751 357,884

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**16** Occupancy

**20** Interest . . . .

23 Insurance .

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . . .

expenses on Schedule O ) a CONTRIBUTIONS/SPONSORSH

c DUES & RECOGNITION

e All other expenses

d POSTAGE AND PRINTING

**b** DEVELOPMENT AND RELOCAT

**17** Travel .

Form 990 (2018)

17

18

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32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

				<b>(A)</b> Beginning of year		( <b>B</b> ) End of year		
1	Cash-non-interest-bearing			446,032	1	1,599,984		
2	Savings and temporary cash investments .		[		2			
3	Pledges and grants receivable, net				3	1,006,000		
4	Accounts receivable, net	[		4				
ssets	trustees, key employees, and highest compens Part II of Schedule L	ployees Complete  sons (as defined under c)(3)(B), and section 501(c)(9) tructions) Complete		5 6 7				
SSI	Inventories for sale or use				8			
و 🏲	Prepaid expenses and deferred charges	Prepaid expenses and deferred charges						
10	<ul> <li>Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D</li> </ul>	10a	3,174,350					
	Less accumulated depreciation	<b>10</b> b	282,969	123,569	10c	2,891,381		
111	Investments—publicly traded securities .			106,953,914	11	100.239.204		

IUa	basis Complete Part VI of Schedule D	10a	3,174,350			
Ь	Less accumulated depreciation	<b>10</b> b	282,969	123,569	10c	2,891,381
11	Investments—publicly traded securities .			106,953,914	11	100,239,204
12	Investments—other securities See Part IV, line	11 .		80,161,182	12	96,688,985
13	Investments—program-related See Part IV, line	11 .		300,000	13	1,400,000
14	Intangible assets				14	
15	Other assets See Part IV, line 11				15	
16	Total assets.Add lines 1 through 15 (must equ	al line	34)	188,029,269	16	203,913,645

1,009,758

1,579,928

3.461.082

6.058.268

195.789.227

197,855,377

203,913,645

Form **990** (2018)

2,066,150

7.500

130,955

6.250

2,668,649

1,219,834

4.025.688

182.291.733

184,003,581

188,029,269

1,711,848

17

18

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22 23

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31 32

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34

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a

3b

No

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3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

**Software Version:** 

**EIN:** 23-7390313

Name: COASTAL COMMUNITY FOUNDATION

Form 990 (2018)

#### Form 990, Part III, Line 4a:

DEVELOPMENT & STEWARDSHIP - THE FOUNDATION SEEKS TO PROVIDE BEST-IN-CLASS STEWARDSHIP TO INDIVIDUALS, FAMILIES AND COMPANIES, TO CONNECT THEM TO WHAT THEY CARE DEEPLY ABOUT IT USES ITS RELATIONSHIPS, LOCAL EXPERTISE AND KNOWLEDGE AS A PLACE-BASED FOUNDATION TO INFORM AND STRENGTHEN PHILANTHROPY AND ENCOURAGE STRENGTH AND VITALITY IN THE NONPROFIT SECTOR. THE STEWARDSHIP OF ITS FINANCIAL ASSETS IS CRUCIAL TO PHILANTHROPY. IN BOTH THE SHORT AND LONG-TERM THE FOUNDATION IS A PERMANENT PHILANTHROPIC RESOURCE TO THE COMMUNITY, THUS, IT PRACTICES PRUDENT OVERSIGHT OF ITS INVESTMENTS TO PRESERVE AND GROW ITS RESOURCES TO MEET THE NEEDS OF TODAY AND THE FUTURE GRANTMAKING & COMMUNITY LEADERSHIP - THE FOUNDATION'S (SEE SCHEDULE O) PHILANTHROPIC ASSETS INCLUDE SOCIAL, MORAL, INTELLECTUAL, REPUTATIONAL AND FINANCIAL CAPITAL. THIS UNDERSTANDING OF THE AVAILABLE ASSETS LEADS THE FOUNDATION TO DEPLOY FINANCIAL CAPITAL THROUGH GRANTMAKING AND IMPACT INVESTING AND TO DEPLOY THE OTHER FORMS OF CAPITAL THROUGH ITS PROGRAMMATIC WORK GRANTMAKING - THE FOUNDATION'S GRANTMAKING SPANS THE COMMUNITY'S BROADEST AREAS, FROM ARTS AND CULTURE TO COMMUNITY DEVELOPMENT, AND PROVIDES CRITICAL OPERATIONAL AND CAPITAL SUPPORT FOR THE NETWORK OF NONPROFITS IN THE FOUNDATION'S 9-COUNTY SERVICE AREA AND BEYOND. THE FOUNDATION'S GRANTMAKING TAKES THE FORMS OF DONOR-ADVISED GRANTS, COMPETITIVE GRANTS IN FIELD OF INTEREST PROGRAMS, SCHOLARSHIP PROGRAM ADMINISTRATION AND CORPORATE-ADVISED GRANTMAKING COASTAL COMMUNITY FOUNDATION DISBURSED 2,341 GRANTS AND SCHOLARSHIPS TOTALING \$22,027,378 THESE GRANTS WERE DISTRIBUTED AS FOLLOWS 129 GRANTS TOTALING \$382,280 IN SUPPORT OF RELIGIOUS EFFORTS, 147 GRANTS TOTALING \$1,369,789 IN SUPPORT OF THE ARTS, 782 GRANTS TOTALING \$4,481,459 SUPPORTING VARIOUS EDUCATIONAL PURSUITS, 302 GRANTS TOTALING \$1.996.466 SUPPORTING HEALTH INITIATIVES, 578 GRANTS TOTALING \$2.604.979 SUPPORTING HUMAN NEEDS, 66 GRANTS TOTALING \$556.711 SUPPORTING NEIGHBORHOOD & COMMUNITY DEVELOPMENT, 46 GRANTS TOTALING \$9,266,011 SUPPORTING PHILANTHROPY, 264 GRANTS TOTALING \$1,217,532 SUPPORTING ENVIRONMENTAL EFFORTS, AND 27 GRANTS TOTALING \$152,151 SUPPORTING SOCIAL JUSTICE PROGRAMS OTHER PROGRAMMATIC WORK - THE FOUNDATION'S WORK ALSO INCLUDES FOCUS IN COMMUNITY LEADERSHIP, STRATEGIC PROJECTS AND IMPACT INVESTING COMMUNITY LEADERSHIP INCLUDES THE CIVIC ENGAGEMENT AGENDA, WHICH IS A FRAMEWORK CREATED IN FISCAL YEAR ENDED JUNE 30, 2018 DESIGNED TO HELP THE FOUNDATION MAKE CONCENTRATED. POSITIVE IMPACT IN ITS COMMUNITIES WHERE AN OPPORTUNITY HAS BEEN IDENTIFIED THROUGH COMMUNITY CONVERSATIONS THE FOUNDATION'S INITIAL AREAS OF FOCUS INCLUDE EDUCATION. ACCESS TO ECONOMIC OPPORTUNITY AND AFFORDABLE SPACES AND INCLUSIVE SPACES. THE FOUNDATION'S STRATEGIC FRAMEWORK WAS CREATED IN 2018 AND WILL GUIDE ITS WORK FOR THE NEXT SEVERAL YEARS TO PRIORITIZE INITIATIVES THAT HELP IT ADVANCE WORK IN THESE AREAS STRATEGIC PROJECTS INCLUDE GRANTMAKING PROGRAMS THE FOUNDATION ADMINISTERS FOR OTHERS. THE PINCKNEY SCHOLARS PROGRAM AND MANAGEMENT OF FISCAL SPONSORSHIPS IMPACT INVESTING WAS LAUNCHED IN THE FISCAL YEAR ENDED JUNE 30, 2018 WITH THE FIRST INVESTMENTS TO BE MADE IN FISCAL YEAR ENDING JUNE 30, 2019 THROUGH THIS INITIATIVE. THE FOUNDATION IS MAKING INVESTMENTS IN THE NINE-COUNTY AREA THAT PRIORITIZE THE CIVIC ENGAGEMENT THEMES, THESE INVESTMENTS SEEK TO ACHIEVE FINANCIAL RETURNS AS WELL AS SOCIAL RETURNS FOR THE COMMUNITIES

SCHEDU (Form 990 990EZ)		Com		Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2018			
Department of th			► Go to	www.irs.gov/Form				Open to Public Inspection			
lame of the	organizat	ion DATION					Employer identification number				
	<b>5</b> <i>1</i>		N- 1 C-1	- (611	23-7390313						
				<b>us</b> (All organization e it is (For lines 1 thro			see instructions.				
-		•		ssociation of churches			(A)(i).				
2   /	A school de	scribed in <b>se</b>	ction 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ) )					
3   /	A hospital o	r a cooperati	ve hospital ser	vice organization desci	ribed in <b>section</b>	170(b)(1)(A)(	iii).				
	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state										
		tion operated <b>iv).</b> (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	ibed in <b>section 170</b>			
	,,,,,,,,,		,	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	۱)(v).				
	_		mally receives vi). (Complete	a substantial part of it Part II )	s support from a	governmental u	ınıt or from the genei	ral public described in			
8   /	A communit	y trust descr	ıbed ın <b>sectio</b> ı	n 170(b)(1)(A)(vi)	(Complete Part I	I)					
	An agricultural research organization described in <b>170(b)(1)(A)(ix)</b> operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university										
f I	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
				d exclusively to test fo	r public safety S	See section 509	(a)(4).				
r	nore public	ly supported	organizations	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or se	ction 509(a)(2	). See section 509(				
a 🔲 1	<b>Type I.</b> A s organization	upporting org	janization opei	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by				
r	nanagemer	nt of the supp		pervised or controlled in ation vested in the sar and C.							
				supporting organizatio				ated with, its			
d 🗆 1	Γ <b>ype III n</b> e unctionally	on-function integrated	ally integrate he organizatio	d. A supporting organi in generally must satis rt IV, Sections A and	ization operated fy a distribution	in connection wi requirement and	th its supported orga				
e 🗆 (	Check this b	ox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type I	II functionally			
	-		on-functionally organizations	integrated supporting	organization						
<b>g</b> Provide	the follow	ng informati	on about the s	upported organization(	s)		_				
	me of supp rganızatıon		(ii) EIN	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)						
					Yes	No					
otal											
	ork Reduct	ion Act Not	ice, see the I	l nstructions for	Cat No 11285	<u>.</u> 5F :	Schedule A (Form 9	 990 or 990-EZ) 2018			

check this box and stop here . . . . . . . .

organization

instructions

supported organization

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 Schedule A, Part II, line 14

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

14

15

Schedule A (Form 990 or 990-EZ) 2018

76 300 %

76 610 %

▶Ⅵ

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar vear (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total (or fiscal year beginning in)

	(or fiscal year beginning in) 🟲 🔠	` '	. ,	• ,	` '	` '	. , ,
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	19,383,797	24,939,290	19,832,276	22,370,158	27,516,044	114,041,565
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
_	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 3	19,383,797	24,939,290	19,832,276	22,370,158	27,516,044	114,041,565
	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						15,119,655
	Public support. Subtract line 5						98,921,910
	from line 4						<u> </u>
	ection B. Total Support Calendar year				1		
	(or fiscal year beginning in) ▶	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
7	Amounts from line 4	19,383,797	24,939,290	19,832,276	22,370,158	27,516,044	114,041,565
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,768,788	2,348,489	2,418,015	3,876,739	2,629,022	15,041,053
9	Net income from unrelated business activities, whether or not the business is regularly carried on			168,703	22,781	18,745	210,229
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )			175,487	133,259	52,090	360,836
11	<b>Total support.</b> Add lines 7 through 10						129,653,683
12	Gross receipts from related activities,	etc (see instructi	ons)			12	4,711,519

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

Р	Part III Support Schedule for Organizations Described in Section 509(a)(2)							
	(Complete only if you c						ler Part II. If	
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.	)		
30	Calendar year		43.554.5		413.004-		(0) =	
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions,							
_	merchandise sold or services							
	performed, or facilities furnished in							
	any activity that is related to the							
_	organization's tax-exempt purpose Gross receipts from activities that are							
3	not an unrelated trade or business							
	under section 513							
4	Tax revenues levied for the							
	organization's benefit and either paid							
_	to or expended on its behalf The value of services or facilities							
5	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
_	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified							
	persons that exceed the greater of							
	\$5,000 or 1% of the amount on line							
	13 for the year							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
	from line 6 )							
36	ection B. Total Support  Calendar year			I	1		1	
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
9	Amounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and							
b	income from similar sources Unrelated business taxable income							
D	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975							
C	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is							
	regularly carried on							
12								
	loss from the sale of capital assets							
	(Explain in Part VI )							
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is fo	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.	
	check this box and <b>stop here</b>	,	, ,	, ,	,	( ), ( )	• □	
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>	
15	Public support percentage for 2018 (lin			column (f))		15		
16								
	ection D. Computation of Investi					16		
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17		
18								
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not	
							_	
	more than 33 1/3%, check this box and s							
b	33 1/3% support tests—2017. If the	-			•		_	
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_	
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □	

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

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

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5		
Pa	rt IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization	2				
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
_	<u> </u>					
	ection D. All Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140		
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard					
S	ection E. Type III Functionally-Integrated Supporting Organizations		l			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)				
	The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test Answer (a) and (b) below.	į	Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	_				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI.</b>	3a				
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3h				

Sched	lule A (Form 990 or 990-EZ) 2018			Page <b>6</b>
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income	(B) Current Year (optional)		
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount		_	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

Schedule A (Form 990 or 990-EZ) (2018)

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2
If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

See instructions

d Excess from 2017.e Excess from 2018.

3<sub>j</sub> and 4c

8 Breakdown of line 7

### Additional Data

### Software ID: Software Version:

**EIN:** 23-7390313

Name: COASTAL COMMUNITY FOUNDATION

Page 8

Schedule A (Form 990 or 990-EZ) 2018 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V

Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)								
Facts And Circumstances Test								

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

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

DLN: 93493055012000 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenue included on Form 990, Part VIII, line 1

▶ Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** COASTAL COMMUNITY FOUNDATION 23-7390313 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 265 2 Aggregate value of contributions to (during year) 17,887,205 1,222,474 Aggregate value of grants from (during year) 18,107,337 957,402 Aggregate value at end of year 81,737,718 28.718.904 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes □ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ✓ Yes □ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2018

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Par	t III	Organizations Mai	ntaining Coll	ections of Ar	t, Histori	cal Tı	easu	res, or	Other	Similar As	sets (conti	nued)	
3		g the organization's acquis s (check all that apply)	sition, accession	, and other reco	rds, check	any of	the fol	llowing th	nat are a	significant u	se of its coll	ection	
а		Public exhibition			d		Loan	or excha	nge prog	ırams			
b		Scholarly research			е		Other	-					
c		Preservation for future of	generations										
4	Provi Part	ide a description of the or XIII	ganızatıon's coll	ections and expl	ain how the	ey furth	ner the	e organiza	ation's ex	kempt purpos	se in		
5		ng the year, did the organ ts to be sold to raise fund								ılar	☐ Yes	□ N	o
Pa	rt IV	Escrow and Custo Complete if the orga X, line 21.			Form 990	, Part	IV, lıı	ne 9, or	reporte	ed an amou	nt on Form	າ 990,	Part
1a		e organization an agent, t ded on Form 990, Part X?		ın or other ınterr	nediary for	contril	outions	s or othe	r assets	not	Yes	□ <b>N</b>	o
Ь	If "Y	es," explain the arrangem	nent in Part XIII	and complete th	e following	table		Γ		Ar	nount		_
c		nning balance		'	J			Ī	1c				_
d	Addı	tions during the year							1d				_
е	Dıstr	ributions during the year							1e				_
f	Endı	ng balance							1f				_
2a	Did t	:he organization include ai	n amount on For	m 990, Part X, l	ne 21, for	escrow	or cu	ے stodial ad	count lia	bility?	Yes	N	— О
b		es," explain the arrangem											
	rt V	Endowment Funds											
			·	(a)Current year		rior yea		(c)Two ye		(d)Three year		our year	s back
<b>1</b> a	Begini	ning of year balance .	[	121,329,9	83	110,967	,241	91	3,206,609	104,7	51,979	98,:	131,710
b	Contri	butions		9,726,8	71	7,371	,630	:	3,299,659	5,3	88,653	6,3	322,722
c	Net in	vestment earnings, gains,	, and losses	4,867,9	83	8,511	,624	1.	3,678,733	-4,2	45,645	4,3	356,500
d	Grants	s or scholarships		3,768,1	85	4,212	,671	:	3,172,363	3,9	20,638	3,:	144,309
е		expenditures for facilities rograms		169,4	78	256	,814		84,696	2,8	54,790		2,361
f	Admın	nistrative expenses	[	1,375,2	51	1,051	,027		960,701	9	12,950	Ġ	912,283
g	End of	f year balance	[	130,611,9	23	121,329	,983	110	0,967,241	98,2	06,609	104,	751,979
2	Prov	ide the estimated percent	age of the curre	nt year end bala	nce (line 1	g, colui	mn (a)	) held as	;				
а	Boar	d designated or quasi-end	dowment 🟲 💢 1	.00 000 %									
b	Perm	nanent endowment 🟲											
c	Tem	porarily restricted endown	ment 🟲										
3a	Are t	percentages on lines 2a, 2 There endowment funds no			ızatıon tha	t are h	eld and	d adminis	stered fo	r the			
	_	nization by									- (1)	Yes	No
	٠,	inrelated organizations .				•					3a(i)		No No
h		related organizations   . es" on 3a(ii), are the relat		· · · · ·	 ed on Sche	dule R	,				3a(ii) 3b	-	NO
4		cribe in Part XIII the inten-	<del>-</del>	•			•					<u>.                                    </u>	
	rt VI	Land, Buildings, a	nd Equipmen	it.									
		Complete if the orga											
	Descr	ription of property	(a) Cost or othe (investmen		Cost or other	pasis (d	otner)	(c) Accu	imulated o	lepreciation	(d) B	ook valu	e
<b>1</b> a	Land					22	25,805						225,805
b	Buildir	ngs				2,55	3,548					2	2,553,548
С	Leasel	hold improvements				19	4,452			170,813			23,639
d	Eauipr	ment				20	0,545			112,156			88,389

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

Part VII Investments—Other Securities. Complete	ıf the organization an	swered "Yes" on Form	1 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b) Book value	(c) M	ethod of valuation
(including name of security)	(b) book take		id-of-year market value
(1) Financial derivatives	·		
(3) Other(A) LIFE INSURANCE POLICIES	1,470,96	.5	F
(B) ALTERNATIVE INVESTMENTS	93,773,16		F
(C) NOTE RECEIVABLE - PLACE-BASED IMPACT INVESTING	327,34		F
• •			
(D) REAL ESTATE	360,44		F
(E) BENEFICIAL INT REMAINDER TRUST (F)	757,06	4	F
(G)			
(H)			
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )  Part VIII Investments—Program Related.	▶ 96,688,98	5	
Complete if the organization answered 'Yes' (  (a) Description of investment	on Form 990, Part IV, (b) Book valu	_	90, Part X, line 13.
	(b) Book Vali		ethod of valuation id-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX  Other Assets. Complete if the organization answ	rered 'Yes' on Form 990,	 Part IV, line 11d See Fo	rm 990, Part X, line 15
(a) Descri			(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15,	)		. •
Part X Other Liabilities. Complete if the organization		Form 990, Part IV, lın	e 11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	(b)	Book value	
(1) Federal income taxes			
LEASES PAYABLE		11,420	
FUNDS HELD AND MANAGED FOR CHARITABLE TRUSTS  ACCRUED PAID TIME OFF		1,664,016 28,357	
GIFT ANNUITY PAYABLE - LONG TERM		1,597,289	
GIFT ANNUITY PAYABLE - SHORT TERM (6)		160,000	
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>&gt;</b>	3,461,082	.h.h
2. Liability for uncertain tax positions. In Part XIII, provide the te		-	· —

Schedule D (Form 990) 2018

Pa		venue per Audited Financial Statements With Reve zation answered 'Yes' on Form 990, Part IV, line 12a.	nue per Return	
1		upport per audited financial statements	. 1	
2		ot on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on i	nvestments   2a		
b	Donated services and use of facil	ties		
С	Recoveries of prior year grants	2c		
d				
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b> .		3	
4	Amounts included on Form 990, I	Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not include	d on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) .	4b		
c	Add lines 4a and 4b	<del></del>	4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)	. 5	
Par		penses per Audited Financial Statements With Expersation answered 'Yes' on Form 990, Part IV, line 12a.	enses per Return	
1	Total expenses and losses per au	dited financial statements	. 1	
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25		
а	Donated services and use of facil	ties		
b	Prior year adjustments			
С	Other losses	2c		
d	Other (Describe in Part XIII ) $\ .$	2d		
е	Add lines 2a through 2d	<del></del>	. 2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		. 3	
4	Amounts included on Form 990, I	Part IX, line 25, but not on line 1:		_
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII ) $\ .$	4b		
С	Add lines 4a and 4b	<del></del>	. 4с	
5	Total expenses Add lines 3 and 4	1c. (This must equal Form 990, Part I, line 18)	5	
Pai	t XIII Supplemental Info	ormation		
		art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b 2 2d and 4b Also complete this part to provide any additional info		4, Part X, line 2, Part
	Return Reference	Explanation		
See /	Addıtıonal Data Table			

Page **4** 

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

### Additional Data

## Software ID:

Software Version: **EIN:** 23-7390313

Name: COASTAL COMMUNITY FOUNDATION

Supplemental Information

Return Reference Explanation PART X, LINE 2 IN ACCORDANCE WITH GAAP, THE FOUNDATION DISCLOSES THE EXPECTED FUTURE TAX CONSEQUENCES OF UNCERTAIN TAX POSITIONS PRESUMING THE TAXING AUTHORITIES' FULL KNOWLEDGE OF THE FACTS OF T HE FOUNDATION'S POSITION AND RECORDS UNRECOGNIZED TAX BENEFITS AND LIABILITIES FOR KNOWN, OR ANTICIPATED TAX ISSUES BASED ON THE FOUNDATION'S ANALYSIS OF WHETHER ADDITIONAL TAXES W OULD BE DUE TO THE AUTHORITY GIVEN THEIR FULL KNOWLEDGE OF THE TAX POSITION THE FOUNDATIO N HAS COMPLETED ITS ASSESSMENT AND DETERMINED THAT THERE WERE NO TAX POSITIONS WHICH WOULD REQUIRE RECOGNITION UNDER THE INTERPRETATION THE FOUNDATION'S INCOME TAX RETURNS FOR YEA

RS SINCE 2015 REMAIN OPEN FOR EXAMINATION BY TAX AUTHORITIES.

Supplemental Information								
Return Reference	Explanation							
PART V, LINE 4	THE FOUNDATION INVESTS THE ENDOWMENT FUNDS WITH THE GOAL OF PRESERVING THE REAL PURCHASING POWER OF THESE PERMANENT ASSETS THE FOUNDATION USES THE DISTRIBUTION FROM THESE ASSETS TO ADDRESS THE CHARITABLE NEEDS OF THE COMMUNITY							

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

### **Supplemental Information Regarding Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a ► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047 2018

DLN: 93493055012000

**Open to Public** Inspection

Go to www irs gov/Form990 for instructions and the latest information **Employer identification number** 

٠Ομ	ISTAL COMMUNITY FOUNDATIO	IN .					23-7390313			
Pa	Fundraising Activities Form 990-EZ filers	•	_		answered "Yes" on Fo	orm 990,	Part IV, line 1	.7.		
1	Indicate whether the organization raised funds through any of the following activities Check all that apply									
а	Mail solicitations			e	Solicitation of nor	-governm	ent grants			
b	☐ Internet and email solicita	ations		f	Solicitation of gov	ernment g	grants			
c	Phone solicitations			g	Special fundraisin	g events				
d	☐ In-person solicitations									
2a	Did the organization have a wor key employees listed in Fo						<u> </u>	es 🗆 No		
b	If "Yes," list the ten highest p to be compensated at least \$			ndraisers)	) pursuant to agreements	s under wh				
(i)	Name and address of individual or entity (fundraiser)	r entity (fundraiser)   fundraiser have   from activity   (or r custody or   fundra			(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) Amount paid to (or retained by) organization			
			Yes	No						
ota	al			<b>&gt;</b>						
	List all states in which the orga licensing	nization is registered	or licens	sed to sol	ıcıt contributions or has t	peen notifi	ed it is exempt	from registration or		

Sche	dule G (Form 990 or 990-EZ) 2018					F	Page <b>3</b>			
11	Does the organization conduct gaming	activities with nonmembers?			Yes	□No				
12	Is the organization a grantor, beneficia formed to administer charitable gaming		nember of a partnership or other entity		□Yes	□No				
13	Indicate the percentage of gaming activ	vity conducted in								
а	The organization's facility			13a			%			
b	An outside facility			13b			%			
14	Enter the name and address of the pers	son who prepares the organi	zation's gaming/special events books and re	cords						
	Name •									
	Address ►									
15a	Does the organization have a contract virevenue?	with a third party from whom	n the organization receives gaming		□Yes	□No				
Ь	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		nization ▶ \$ and th	e						
С	If "Yes," enter name and address of the	e third party								
	Name •									
	Address ▶									
16	Gaming manager information									
	Name ►									
	Gaming manager compensation ▶ \$									
	Description of services provided ▶									
	☐ Director/officer	☐ Employee	☐ Independent contractor							
17	Mandatory distributions									
а	Is the organization required under state retain the state gaming license?	e law to make charitable dist	ributions from the gaming proceeds to		□Yes	□No				
Ь	Enter the amount of distributions required in the organization's own exempt activities.		ed to other exempt organizations or spent		35					
Pai			ns required by Part I, line 2b, columns cable. Also provide any additional infor				 5.			
	Return Reference		Explanation							

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493055012000 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number COASTAL COMMUNITY FOUNDATION 23-7390313 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 305 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018					Page <b>2</b>				
Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed									
(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance				
(1) SCHOLARSHIPS	188	513,985							
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
Part IV Supplemental Information	on. Provide the in	formation required in <b>i</b>	Part I, line 2; Part III	, column (b); and any other a	additional information.				

### Additional Data

29406

SUITE 400 ATLANTA, GA 30303

ACS PRODUCTS INC

250 WILLIAMS STREET NW

#### Software ID: Software Version: **EIN:** 23-7390313 Name: COASTAL COMMUNITY FOUNDATION Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 50CAN INC 27-3069592 501(C)(3) 30,000 MULTIPLE GRANTS AWARDED

19,000

# 8983 UNIVERSITY BLVD SUITE 104-142 NORTH CHARLESTON, SC

02-0651055

501(C)(3)

MULTIPLE GRANTS

AWARDED

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 57-0409223 501(C)(3) 18.843 ADDLESTONE HEBREW MULTIPLE GRANTS ACADEMY AWARDED 1675 RAOUL WALLENBERG

BOULEVARD
CHARLESTON, SC 29407

ALZHEIMER'S DISEASE AND
RELATED DISORDERS
ASSOCIATION INC
2090 EXECUTIVE HALL ROAD
SUITE 130

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 57-0879175 501(C)(3) 10.000 ALZHEIMERS FAMILY GENERAL OPERATING SERVICES OF GREATER ISUPPORT BEAUFORT PO BOX 1514 BEAUFORT, SC 299011514 7,500 ALZHEIMER'S RESPITE & 58-2291775 501(C)(3) SPECIAL PROJECT

SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RESOURCE

299252330

PO BOX 22330

HILTON HEAD ISLAND, SC

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-1788491 501(C)(3) 17.059 AMERICAN CANCER SOCIETY MULTIPLE GRANTS INC IAWARDED

269 CALHOUN STREET
CHARLESTON, SC 29401

AMERICAN COLLEGE OF THE 57-1075250 501(C)(3) 25,504

BUILDING ARTS

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

649 MEETING STREET CHARLESTON, SC 29403

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 34-1747398 501(C)(3) 125,243 AMERICAN ENDOWMENT ISPECIAL PROJECT FOUNDATION ISUPPORT 5700 DARROW ROAD SUITE

5700 DARROW ROAD SUITE
118
HUDSON, OH 44236

AMERICAN HEART 13-5613797 501(C)(3) 7,080

ASSOCIATION INC
300 SOUTH RIVERSIDE PLAZA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

STE 1200

CHICAGO, IL 60606

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 53-0196605 501(C)(3) 347,946 AMERICAN NATIONAL RED MULTIPLE GRANTS

CROSS 2424A CITY HALL LANE NORTH CHARLESTON, SC 294066538					AWARDED
AMERICAN UNIVERSITY	53-0196549	501(C)(3)	8,500		MULTIPLE G

WASHINGTON, DC 20016

LE GRANTS IAWARDED 4400 MASSACHUSETTS AVENUE NW

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

IAWARDED

ARK OF SC PO BOX 1540 SUMMERVILLE, SC 29484	47-1350098	501(C)(3)	28,246		MULTIPLE GRANTS AWARDED
ARTHUR W PAGE SOCIETY	23-2290568	501(C)(3)	5,500		MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

230 PARK AVENUE SUTTE 455

NEW YORK, NY 10169

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-1035817 501(C)(3) 7.300 ARTS CENTER OF COASTAL MULTIPLE GRANTS CAROLINA IAWARDED 14 SHELTER COVE LANE

MULTIPLE GRANTS

IAWARDED

323,651

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

HILTON HEAD ISLAND, SC

ASHLEY HALL FOUNDATION

172 RUTLEDGE AVENUE

CHARLESTON, SC 29403

57-0314364

29928

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ASSOCIATION FOR THE BLIND 57-0324912 501(C)(3) 28,142 MULTIPLE GRANTS

AND VISUALLY IMPAIRED - CHARLESTON 1 CARRIAGE LANE BUILDING A CHARLESTON, SC 29407						AWARDED
ASSUMPTION COLLEGE FOR SISTERS	52-1318258	501(C)(3)	10,000		1	GENERAL OPERATING SUPPORT

SISTERS 200 A MORRIS AVENUE

DENVILLE, NJ 07834

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0966813 501(C)(3) 10.085 MULTIPLE GRANTS AVIAN CONSERVATION CENTER IAWARDED

PO BOX 1247 CHARLESTON, SC 29402					
BARRIER ISLANDS FREE MEDICAL CLINIC INC 3226 MAYBANK HWY BUILDING C	20-5628911	501(C)(3)	49,718		MULTIPLE GRANTS AWARDED

JOHNS ISLAND, SC 29455

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BE A MENTOR INC 04-3704334 501(C)(3) 8.100 MULTIPLE GRANTS 1505 KING STREET EXT SUITE IAWARDED

1505 KING STREET EXT SUITE
200
CHARLESTON, SC 29405

BEAUFORT COUNTY MEMORIAL 57-6000094 501(C)(3) 15,000
HOSPITAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

955 RIBAUT ROAD BEAUFORT, SC 29902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-7114992 501(C)(3) 6.500 BEAUFORT COUNTY OPEN MULTIPLE GRANTS LAND TRUST INC IAWARDED

### AWARDED

AWARDED

BEAUFORT, SC 29901

BEAUFORT MEMORIAL 57-0792360 501(C)(3) 7,000

MULTIPLE GRANTS AWARDED

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

POST OFFICE BOX 2233 BEAUFORT, SC 29901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0910326 501(C)(3) 18.500 BEAUFORT-JASPER YMCA OF MULTIPLE GRANTS THE LOWCOUNTRY INC IAWARDED 1801 RICHMOND AVENUE

MULTIPLE GRANTS

AWARDED

53.350

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OTHER

PORT ROYAL, SC 29935
BERKELEY COUNTY SCHOOL

POST OFFICE BOX 608 MONCKS CORNER, SC 29461

DISTRICT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OTHER 14.600 BETH ISRAEL SYNAGOGUE MULTIPLE GRANTS PO BOX 328 IAWARDED

BEAUFORT, SC 29901

BETHEL UNITED METHODIST 36-2167731 501(C)(3) 10,000

GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance BEYOND BORDERS INC 23-2713126 501(C)(3) 9,000 SPECIAL PROJECT

PO BOX 2132 NORRISTOWN, PA 19404					SUPPORT
BEYOND OUR WALLS INC 2615 HARVEY AVENUE SUITE 4 NORTH CHARLESTON, SC	33-1087506	501(C)(3)	8,000		MULTIPLE GRANTS AWARDED

29405

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BIG BROTHERS BIG SISTERS 23-1365190 501(C)(3) 100.000 SPECIAL PROJECT

OF AMERICA 2502 N ROCKY POINT DR SUITE 550 TAMPA, FL 33607					SUPPORT
BISHOP ENGLAND HIGH	57-6000118	501(C)(3)	45,524		MULTIPLE GRANTS

AWARDED SCHOOL 363 SEVEN FARMS DRIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 294927534

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-0337132 501(C)(3) 13.000 BISHOP GADSDEN EPISCOPAL MULTIPLE GRANTS IAWARDED

RETIREMENT COMMUNITY 1 BISHOP GADSDEN WAY CHARLESTON, SC 29412

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

57-0526145 501(C)(3) 20.000

BLACK RIVER UNITED WAY MULTIPLE GRANTS PO BOX 1065 AWARDED GEORGETOWN, SC 29442

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 32-0298086 501(C)(3) 16.000 IGENERAL OPERATING BLUFFTON JASPER COUNTY

VOLUNTEERS IN MEDICINE
PO BOX 2653
BLUFFTON, SC 29910

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BLUFFTON, SC 29910

 BLUFFTON, SC 29910
 SPECIAL PROJECT

 BLUFFTON SELF HELP INC
 57-0862658
 501(C)(3)
 10,000
 SPECIAL PROJECT

 PO BOX 2420
 SUPPORT
 SUPPORT
 SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance BNY MELLON CHARITABLE 30-0748315 501(C)(3) 649.108 SPECIAL PROJECT GIFT FUND SUPPORT

294073365

201 WASHINGTON STAIM 024-0062 BOSTON, MA 02108					
BOY SCOUTS OF AMERICA COASTAL CAROLINA COUNCIL INC 9297 MEDICAL PLAZA DRIVE NORTH CHARLESTON, SC	57-0327870	501(C)(3)	12,073		MULTIPLE GRANTS AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance BOYS & GIRLS CLUBS OF THE 57-0811876 501(C)(3) 7.500 GENERAL OPERATING

IAWARDED

LOWCOUNTRY INC SUPPORT 10 PINCKNEY COLONY ROAD SUITE 103 BLUFFTON, SC 29909

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 417

MOUNT PLEASANT, SC 29465

BRIDGES FOR END-OF-LIFE 57-0701359 501(C)(3) 5.831 MULTIPLE GRANTS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0755466 501(C)(3) 59.125 CAMP HAPPY DAYS INC MULTIPLE GRANTS 1 CARRIAGE LN BLDG C IAWARDED

ISUPPORT

SUITES 101 102 102 CHARLESTON, SC 29407

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2 1/2 BEACON STREET

CONCORD, NH 03301

CAMP PASQUANEY 02-0227848 501(C)(3) 10,000 GENERAL OPERATING

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT

CAMP RISE ABOVE INC PO BOX 31295 CHARLESTON, SC 29417	27-0545990	501(C)(3)	13,200		MULTIPLE GRANTS AWARDED
CAMPHILL SPECIAL SCHOOL	23-1443766	501(C)(3)	10,000		GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1784 FAIRVIEW ROAD GLENMOORE, PA 19343

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-6006173 501(C)(3) 14.282 CAMPUS CRUSADE FOR MULTIPLE GRANTS CHRIST INC IAWARDED

AWARDED

CHRIST INC
PO BOX 628222
ORLANDO, FL 328628222

CAROLINA ART ASSOCIATION 57-0323047 501(C)(3) 39,950 MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

135 MEETING STREET

CHARLESTON, SC 29401

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CATHEDRAL OF ST JOHN THE 57-0426378 501(C)(3) 13,187 MULTIPLE GRANTS RDED

BAPTIST 105 QUEEN STREET CHARLESTON, SC 29401					AWARDED
CENTER FOR HEIRS' PROPERTY PRESERVATION 1535 SAM RITTENBERG BLVD	52-2452879	501(C)(3)	60,497		MULTIPLE GRANTS AWARDED

SUITE D

CHARLESTON, SC 29407

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

CENTRAL CAROLINA COMMUNITY FOUNDATION 2711 MIDDLEBURG DR STE 213 COLUMBIA, SC 29706	57-0793960	501(C)(3)	15,000		MULTIPLE GRANTS AWARDED
CENTRAL PARK CONSERVANCY	13-3022855	501(C)(3)	25,000		GENERAL OPERATING

201(C)(2) 25,000 INC SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

14 E 60TH STREET NEW YORK, NY 100221006

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 01-0739765 501(C)(3) 20,583 MULTIPLE GRANTS CHARLESTON ACADEMY OF

MUSIC PO BOX 22364 CHARLESTON, SC 29413					AWARDED
CHARLESTON ANIMAL SOCIETY	57-6021863	501(C)(3)	72,315		MULTIPLE GRANTS AWARDED

2455 REMOUNT ROAD NORTH CHARLESTON, SC

29406

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-1758506 501(C)(3) 12,500 MULTIPLE GRANTS CHARLESTON AREA JUSTICE

259 MEETING STREET CHARLESTON, SC 29401

MINISTRY PO BOX 71416 NORTH CHARLESTON, SC 29415					AWARDED
CHARLESTON AREA SENIOR CITIZENS SERVICES INC	57-6030048	501(C)(3)	14,000		MULTIPLE GRANTS AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0937061 501(C)(3) 51.185 CHARLESTON AREA MULTIPLE GRANTS THERAPEUTIC RIDING INC IAWARDED

PO BOX 146 JOHNS ISLAND, SC 29457 CHARLESTON COUNTY PARKS 57-0913949 501(C)(3) 12.307

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS FOUNDATION INC AWARDED 861 RIVERLAND DR CHARLESTON, SC 29412

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance OTHER 23.221 CHARLESTON COUNTY PUBLIC MULTIPLE GRANTS LIBRARY IAWARDED

68 CALHOUN STREET CHARLESTON, SC 29401 57-0524184 501(C)(3) 52.063 CHARLESTON DAY SCHOOL INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29401

MULTIPLE GRANTS AWARDED 15 ARCHDALE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-3018925 501(C)(3) 10.000 CHARLESTON GAILLARD SPECIAL PROJECT MANAGEMENT CORPORATION SUPPORT

95 CALHOUN STREET CHARLESTON, SC 29401 CHARLESTON HORTICULTURAL 56-2211468 501(C)(3) 8.750

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29407

MULTIPLE GRANTS SOCIETY AWARDED 46 WINDERMERE BOULEVARD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 83-0504523 501(C)(3) 138.500 CHARLESTON JAZZ MULTIPLE GRANTS 3005 WEST MONTAGUE AVE IAWARDED SUITE 200

SOTTE 200
NORTH CHARLESTON, SC
29418

CHARLESTON JEWISH 57-6000188 501(C)(3) 22,000
FEDERATION
176 CROGHAN SPUR ROAD

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 100

CHARLESTON, SC 29407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 57-0314372 501(C)(3) 115,359 CHARLESTON LIBRARY MULTIPLE GRANTS SOCIETY IAWARDED 164 KING STREET CHARLESTON, SC 29401 CHARLESTON ORPHAN HOUSE 57-0669877 501(C)(3) 74.041 MULTIPLE GRANTS

INC AWARDED 5055 LACKAWANNA BOULEVARD NORTH CHARLESTON, SC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

29405

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-8375561 501(C)(3) 7.452 MULTIPLE GRANTS CHARLESTON PARKS CONSERVANCY INC IAWARDED

PO BOX 31187 CHARLESTON, SC 29417						
CHARLESTON PROMISE NEIGHBORHOOD 1834 SUMMERVILLE AVE SUITE 200	80-0597710	501(C)(3)	83,844		l .	MULTIPLE GRANTS AWARDED

CHARLESTON, SC 29405

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CHARLESTON SOUTHERN 57-0474291 501(C)(3) 54.800 MULTIPLE GRANTS UNIVERSITY IAWARDED

PO BOX 118087
CHARLESTON, SC 29423

CHARLESTON SYMPHONY 57-6000192 501(C)(3) 128,743

ORCHESTRA

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 30818

CHARLESTON, SC 29417

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-0771548 501(C)(3) 91,137 CHARLESTON URBAN SQUASH MULTIPLE GRANTS

0114010775 041157	E0 1011711	E04(0)(0)	10.000		CENTER AL CO
INC PO BOX 22731 CHARLESTON, SC 29413					AWARDED

CHARLOTTE, NC 28202

IGENERAL OPERATING CHARLOTTE BALLET 58-1314711 501(C)(3) 10.0001 701 N TRYON STREET SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CHILD ARUSE PREVENTION 57-0722206 501(0)(3) 16 500 MILL TIPLE GRANTS

ASSOCIATION PO BOX 531 BEAUFORT, SC 299010531	37-0722200	301(0)(3)	10,300		AWARDED
CHILDREN IN CRISIS OF	57-1078099	501(C)(3)	45,319		MULTIPLE GRANTS

DORCHESTER COUNTY INC IAWARDED 303 E RICHARDSON AVE SUMMERVILLE, SC 29483

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-1014498 501(C)(3) 55.726 CHILDREN'S MUSEUM OF THE MULTIPLE GRANTS LOWCOUNTRY IAWARDED

SUPPORT

25 ANN STREET CHARLESTON, SC 29403

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

88 PINE STREET SUITE 800

NEW YORK, NY 10005

CHILDREN'S RIGHTS INC. 13-3801864 501(C)(3) 50.000 IGENERAL OPERATING

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 56-0615187 501(C)(3) 7.500 SCHOLARSHIP CHRIST SCHOOL

500 CHRIST SCHOOL ROAD ARDEN, NC 28704 CIRCLE OF HOPE MINISTRIES 27-3678596 501(C)(3) 10,000 INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS AWARDED PO BOX 554 BEAUFORT, SC 29901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

					====
CLAFLIN UNIVERSITY 400 MAGNOLIA STREET ORANGEBURG, SC 29115	57-0314374	501(C)(3)	6,500		MULTIPLE GRANTS AWARDED

SUMMERVILLE, SC 294851322

IMULTIPLE GRANTS 47-2014292 16.500 CLAP YOUR HANDS 501(C)(3) PO BOX 51322 AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OTHER 97.454 CLEMSON UNIVERSITY MULTIPLE GRANTS BOX 345307 IAWARDED

CLEMSON, SC 29634

COASTAL CAROLINA
UNIVERSITY
PO BOX 261954

AWARDED

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CONWAY, SC 295286054

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-6000311 OTHER 10.000 SPECIAL PROJECT COLLABORATIVE ORGANIZATION OF SERVICES SUPPORT FOR YOUTH POST OFFICE DRAWER 1228

MULTIPLE GRANTS

IAWARDED

14,250

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OTHER

BEAUFORT, SC 29901

COLLEGE OF CHARLESTON

CHARLESTON, SC 294240001

66 GEORGE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance COLLEGE OF CHARLESTON 23-7069236 501(C)(3) 79,403 MULTIPLE GRANTS

AWARDED

FOUNDATION					AWARDED
66 GEORGE STREET					
CHARLESTON, SC 29424					
COLLETON CENTER	20-4536007	501(C)(3)	6,000		MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 468

WALTERBORO, SC 29488

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0966741 501(C)(3) 15.830 COLLETON COUNTY ARTS MULTIPLE GRANTS COUNCIL INC IAWARDED 334 WHITMAN STREET

WALTERBORO, SC 29488 COLLETON COUNTY FIRST 57-1097790 501(C)(3) 11.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WALTERBORO, SC 29488

SPECIAL PROJECT STEPS SUPPORT 609 COLLETON LOOP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant ıf applıcable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance COLLETON COUNTY MEMORIAL OTHER 9,500 SPECIAL PROJECT

LIBRARY 600 HAMPTON STREET WALTERBORO, SC 29488					SUPPORT
COLLETON HABITAT FOR HUMANITY INC	57-0894246	501(C)(3)	7,000		GENERAL OPERATING SUPPORT

PO BOX 887

WALTERBORO, SC 29488

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-6007869 501(C)(3) 15.000 COLUMBIA MUSEUM OF ART MULTIPLE GRANTS PO BOX 2068 IAWARDED

PO BOX 2068
COLUMBIA, SC 29202

COMMUNITIES IN SCHOOLS
OF CHARLOTTE-MECKLENBURG
INC
601 E 5TH STREET SUITE 300

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLOTTE, NC 28202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 57-0915384 501(C)(3) 37,283 MULTIPLE GRANTS COMMUNITIES IN SCHOOLS OF THE CHARLESTON AREA IAWARDED

INC 1090 EAST MONTAGUE AVENUE NORTH CHARLESTON, SC 29405					
COMMUNITY FOUNDATION OF	56-2170220	E01(C)(3)	60,000		SPECIAL PROJECT

COMMUNITY FOUNDALION OF 30-Z1/UZZU 201(C)(2) טטט,טטט SPECIAL PROJECT SUPPORT BURKE COUNTY PO BOX 1156

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MORGANTON, NC 28680

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0756987 501(C)(3) 17,075 COMMUNITY FOUNDATION OF MULTIPLE GRANTS

PO BOX 23019 HILTON HEAD ISLAND, SC 299253019					AWARDED
CONVERSE COLLEGE 580 EAST MAIN STREET	57-0314380	501(C)(3)	10,500		MULTIPLE GRANTS AWARDED

580 EAST MAIN STREET SPARTANBURG, SC

293021931

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

IAWARDED

COOPER SCHOOL 13 OAKDALE PLACE CHARLESTON, SC 29407	20-8818159	501(C)(3)	6,000		GENERAL OPERATING SUPPORT
DAVIDSON COLLEGE	56-0529961	501(C)(3)	6,500		MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 7170

DAVIDSON, NC 280357170

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-0905724 501(C)(3) 103.970 DEE NORTON LOWCOUNTRY MULTIPLE GRANTS CHILDREN'S CENTER IAWARDED

1061 KING STREET CHARLESTON, SC 29403

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29417

DIOCESE OF CHARLESTON 57-0314369 501(C)(3) 17.800 MULTIPLE GRANTS PO BOX 31257 AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0405151 501(C)(3) 25.000 IGENERAL OPERATING DIVINE REDEEMER PARISH SCHOOL SUPPORT

| SCHOOL | SOFFORT | SOFFO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 5030

HAGERSTOWN, MD 21741

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

MULTIPLE GRANTS

AWARDED

DONORSCHOOSEORG	13-4129457	501(C)(3)	35,773		MULTIPLE GRANTS
MAIL CODE 6656 PO BOX 7247					AWARDED
PHILADELPHIA.PA 19170					

27.750

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

DOORS TO FREEDOM

1317-M N MAIN ST 263

SUMMERVILLE, SC 29483

90-0671470

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance DORCHESTER BOARD OF OTHER 21.642 IGENERAL OPERATING

DISABILITIES & SPECIAL NEEDS					SUPPORT
PO BOX 2950 SUMMERVILLE, SC 29484					
SOTHIERVILLE, SC 25101					
DORCHESTER HARITAT FOR	91-1914868	501(C)(3)	18 250		MULTIPLE GRANTS

201(C)(2) 10,230 HUMANITY AWARDED PO BOX 1685

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUMMERVILLE, SC 29484

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-0620182 501(C)(3) 38.004 DORCHESTER PAWS MULTIPLE GRANTS

136 FOUR PAWS LANE
SUMMERVILLE, SC 29483

DORCHESTER TWO 46-3049858 501(C)(3) 24,000

EDUCATIONAL FOUNDATION
115 DEVON ROAD

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUMMERVILLE, SC 29483

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 45-4938941 501(C)(3) 9.500 DRAYTON HALL MULTIPLE GRANTS PRESERVATION TRUST IAWARDED

MULTIPLE GRANTS

AWARDED

13.404

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PRESERVATION TRUST
3380 ASHLEY RIVER ROAD
CHARLESTON, SC 29414

DUKE UNIVERSITY 56-0532129 501(C)(3)

BOX NUMBER 104145

DURHAM, NC 27708

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0939280 501(C)(3) 65.795 EAST COOPER COMMUNITY MULTIPLE GRANTS OUTREACH IAWARDED

1145 SIX MILE ROAD MOUNT PLEASANT, SC 29466 EAST COOPER HABITAT FOR 57-0903917 501(C)(3) 23.250 HUMANITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MOUNT PLEASANT, SC 29465

MULTIPLE GRANTS AWARDED PO BOX 1990

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance EAST COOPER MEALS ON 501(C)(3) 39.975 57-0804618 MULTIPLE GRANTS WHEELS INC IAWARDED

PO BOX 583
MOUNT PLEASANT, SC 29465

EMORY UNIVERSITY 58-0566256 501(C)(3) 5,035
200 DOWMAN DRIVE
BOISFEUILLET JONES

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CENTER SUITE 300 ATLANTA, GA 30322

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ETV ENDOWMENT OF SOUTH 57-0657549 501(C)(3) 7,400 MULTIPLE GRANTS

SUPPORT

CAROLINA INC 401 EAST KENNEDY STREET - SUITE B1 SPARTANBURG, SC 29302					AWARDED
EXTRA MILE CLUB OF THE	46-3127074	501(C)(3)	7.000		GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

. ( \_ ) ( \_ ) LOWCOUNTRY PO BOX 1915

BEAUFORT, SC 29901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 20-5647589 501(C)(3) 15.000 GENERAL OPERATING FAMILY PROMISE OF BEAUFORT COUNTY ISUPPORT 181 BLUFFTON ROAD D101 57-1127412 501(C)(3) 8.000 SPECIAL PROJECT SUPPORT

BLUFFTON, SC 29910 FAMILY RESOURCE CENTER FOR DISABILITIES AND SPECIAL NEEDS 1575 SAVANNAH HIGHWAY SUITE 6

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29407

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0324920 501(C)(3) 36,000 FAMILY SERVICES INC MULTIPLE GRANTS IAWARDED ACROCC ROAD CUITE

215 CHARLESTON, SC 29406					AWARDED
FATHER TO FATHER PROJECT INC 5675 WOODBINE AVENUE	57-1121606	501(C)(3)	8,000		GENERAL OPERATING SUPPORT

NORTH CHARLESTON, SC

29406

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance FENNELL ELEMENTARY OTHER 17.000 MULTIPLE GRANTS

SCHOOL 131 YEMASSEE HIGHWAY YEMASSEE, SC 299450427				AWARDED
4		· '		1

CHARLESTON, SC 294131117

501(C)(3) 9.500 MULTIPLE GRANTS FIELDS TO FAMILIES 03-0608779 PO BOX 21117 AWARDED

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FOLINDATION FOR THE 56-6047886 501(0)(3) 142 775 MILL TIPLE GRANTS

CAROLINAS 220 NORTH TRYON STREET CHARLOTTE, NC 28202	30 0047000	301(0)(3)	172,773		AWARDED
FOUR HOLES INDIAN ORGANIZATION EDISTO	57-0570165	501(C)(3)	18,000		MULTIPLE GRANTS AWARDED

TRIBAL INC 1125 RIDGE ROAD RIDGEVILLE, SC 29472

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FRESH FUTURE FARM INC 46-5699947 501(C)(3) 15.750 MULTIPLE GRANTS 2008 SUCCESS STREET IAWARDED

NORTH CHARLESTON, SC 29405 FRESHSTART 81-1440642 501(C)(3) 8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MOUNT PLEASANT, SC 29464

MULTIPLE GRANTS 721 LONGPOINT ROAD SUITE AWARDED 405

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0725866 501(C)(3) 17.000 MULTIPLE GRANTS FRIENDS OF CAROLINE HOSPICE OF BEAUFORT INC IAWARDED

1110 13TH STREET PORT ROYAL, SC 29935						
FRIENDS OF COASTAL SOUTH CAROLINA PO BOX 1131 MOUNT PLEASANT, SC	57-1039362	501(C)(3)	13,000		I	MULTIPLE GRANTS AWARDED

294651131

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-4474266 501(C)(3) 9.059 FRIENDS OF COLLETON MULTIPLE GRANTS COUNTY ANIMAL SHELTER IAWARDED 33 POOR FARM ROAD WALTERBORO, SC 29488

MULTIPLE GRANTS

AWARDED

9.800

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

FRIENDS OF FISHER HOUSE

CHARLESTON, SC 29402

CHARLESTON INC

PO BOX 1678

46-2521401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 45-5205655 501(C)(3) 6.250 FRIENDS OF THE SPANISH MULTIPLE GRANTS MOSS RAIL TRAIL IAWARDED

AWARDED

MOSS RAIL TRAIL
PO BOX 401
BEAUFORT, SC 29901
FRIENDSHIP PLACE INC 57-1073276 501(C)(3) 5,400

MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 282

GEORGETOWN, SC 29442

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-2098292 OTHER 20.000 IGENERAL OPERATING FUNDERS FOR REPRODUCTIVE EQUITY INC SUPPORT

PO BOX 750 ROCKVILLE, MD 208480750 GAILLARD PERFORMANCE 90-0616040 501(C)(3) 6.000 HALL FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29401

MULTIPLE GRANTS AWARDED 334 EAST BAY STREET 152

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 53-0196584 501(C)(3) 10.000 SCHOLARSHIP GEORGE WASHINGTON UNIVERSITY

SUPPORT

800 21ST ST NW SUITE GROUND WASHINGTON, DC 20052				
GEORGETOWN COUNTY	OTHER	10,000		GENERAL OPERATING

COUNCIL ON AGING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2104 LINCOLN STREET GEORGETOWN, SC 29440

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0648722 OTHER 10.000 IGENERAL OPERATING GEORGETOWN PRESBYTERIAN CHURCH ISUPPORT

DAHLONEGA, GA 30533

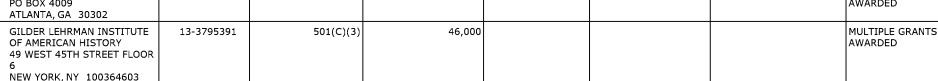
558 BLACK RIVER ROAD
GEORGETOWN, SC 29440

GEORGIA FORESTWATCH INC
81 CROWN MOUNTAIN PLACE
BUILDING C
SUITE 200

GEORGIA FORESTWATCH INC
81 CROWN MOUNTAIN PLACE
BUILDING C
SUITE 200

GENERAL OPERATING
SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance GEORGIA STATE UNIVERSITY OTHER 9.434 MULTIPLE GRANTS PO BOX 4009 IAWARDED



(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance GIRL SCOUTS OF EASTERN 57-0341216 501(C)(3) 6,500 MULTIPLE GRANTS SOUTH CAROLINA IAWARDED

7257 CROSS COUNTY ROAD NORTH CHARLESTON, SC 29418						
GOOD NEIGHBOR FREE MEDICAL CLINIC 30 PROFESSIONAL VILLAGE	26-0335357	501(C)(3)	30,500		I	MULTIPLE GRANTS AWARDED

CIRCLE

BEAUFORT, SC 29907

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0632511 501(C)(3) 6.400 GOODWILL INDUSTRIES OF MULTIPLE GRANTS LOWER SC INC IAWARDED

2150 EAGLE DRIVE BUILDING 100 NORTH CHARLESTON, SC 29406				

CHARLESTON, SC 29401

GRACE EPISCOPAL CHURCH OTHER 8.544 MULTIPLE GRANTS 98 WENTWORTH STREET IAWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT

GREEN HEART PROJECT INC 759 A KING STREET	46-0829120	501(C)(3)	11,500		MULTIPLE GRANTS AWARDED
CHARLESTON, SC 29403					

GREEN RIVER PRESERVE 56-1554526 501(C)(3) 10,000 GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

301 GREEN RIVER ROAD

CEDAR MOUNTAIN, NC 28718

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance GREENE COUNTY COUNCIL ON 22-2142380 501(C)(3) 43.750 MULTIPLE GRANTS IAWARDED

THE ARTS PO BOX 463 CATSKILL, NY 12414 HABITAT FOR HUMANITY OF 57-0907019 501(C)(3) 32.500 MULTIPLE GRANTS

BERKELEY COUNTY AWARDED 1 BFI KNAP RD GOOSE CREEK, SC 29445

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance HARRY R E HAMPTON 57-0727731 501(C)(3) 17.500 MULTIPLE GRANTS MEMODIAL WILDLIFE FUND AWADDED

SPECIAL PROJECT

SUPPORT

INC PO BOX 2641 COLUMBIA, SC 29202					AWARDED
HEALING SPECIES INC	57-1087949	501(C)(3)	5.048		SPECIAL PROJEC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ORANGEBURG, SC 291161202

P O BOX 1202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 71-0699939 501(C)(3) 5.200 HEIFER INTERNATIONAL MULTIPLE GRANTS

FOUNDATION IAWARDED POST OFFICE BOX 8058 LITTLE ROCK, AK 72203

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUMMERVILLE, SC 29484

HELP OF SUMMERVILLE 57-0624976 501(C)(3) 5.750 MULTIPLE GRANTS

PO BOX 1871 AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-0858549 501(C)(3) 64.978 HELPING AND LENDING MULTIPLE GRANTS OUTREACH SUPPORT IAWARDED

MULTIPLE GRANTS

IAWARDED

4995 LACROSS ROAD SUITE
1250
NORTH CHARLESTON, SC
29406

15.748

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

HELPING HAND CENTER INC.

1263 COHEN ROAD

PINELAND, SC 29934

80-0751064

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0883461 501(C)(3) 15.000 HELPING HANDS OF MULTIPLE GRANTS GEORGETOWN INC IAWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 11

BEAUFORT, SC 29901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 57-6000599 501(C)(3) 15.200 HISTORIC CHARLESTON MULTIPLE GRANTS FOUNDATION IAWARDED

PO BOX 1120 CHARLESTON SC 294021120 HOLE IN THE WALL GANG 06-1157655 501(C)(3) 10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW HAVEN, CT 06511

IGENERAL OPERATING FUND INC SUPPORT 555 LONG WHARF DRIVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-2904529 501(C)(3) 10.000 HOME OF MONTCLAIR MULTIPLE GRANTS ECUMENICAL CORP IAWARDED

17 TALBOT STREET MONTCLAIR. NJ 07042 HOME WORKS OF AMERICA 56-2027026 501(C)(3) 9.500 MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBIA, SC 29204

AWARDED INC 3823 W BELTLINE BLVD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-1063332 501(C)(3) 30.583 HOPEFUL HORIZONS INC MULTIPLE GRANTS IAWARDED

PO BOX 1775 BEAUFORT, SC 29901 HOWARD UNIVERSITY 53-0204707 501(C)(3) 6.585 2400 SIXTH STREET NW -

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS AWARDED SUITE 218 WASHINGTON, DC 20059

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

SPECIAL PROJECT

SUPPORT

HUMAN NEEDS FOOD PANTRY INC	22-3057065	501(C)(3)	10,000		GENERAL OPERATING SUPPORT
9 LABEL STREET					
MONTCLAIR, NJ 07042					

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

INSPIRE ARTS AND MUSIC INC

PO BOX 51391

BOSTON, MA 02205

04-3081057

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-3398254 501(C)(3) 243,028 MULTIPLE GRANTS INTERNATIONAL AFRICAN

AMARDED

PO BOX 22761 CHARLESTON, SC 29413					AWARDED
IRAQ AND AFGHANISTAN VETERANS OF AMERICA INC 119 WEST 40TH ST 19TH FLOOR	20-1664531	501(C)(3)	10,000		GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AMEDICAN MUCEUM

NEW YORK, NY 10018

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 14MES T BRYAN 1R - LISS 57-0646242 OTHER 11 765 SPECIAL PROJECT

YORKTOWN CV-10 ASSOCIATION INC POST OFFICE BOX 1021 MOUNT PLEASANT, SC 29465	37 0040242	O I I I	11,703		SUPPORT
JAZZ HOUSE KIDS INC	56-2303577	501(C)(3)	30.000		MULTIPLE GRANTS

347 BLOOMFIELD AVENUE AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOWER LEVEL MONTCLAIR, NJ 07042

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance JDRF INTERNATIONAL 23-1907729 501(C)(3) 12,202 MULTIPLE GRANTS

1122 LADY STREET SUITE 1000 COLUMBIA, SC 29201					AWARDED
JENKINS INSTITUTE FOR CHILDREN INC	57-6025599	501(C)(3)	6,135		MULTIPLE GRANTS AWARDED

3923 AZALEA DRIVE NORTH CHARLESTON, SC 29405

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 57-0477845 501(C)(3) 14.950 JUNIOR ACHIEVEMENT OF MULTIPLE GRANTS GREATER SOUTH CAROLINA IAWARDED INC

2711 MIDDLEBURG DRIVE SUITE 105 COLUMBIA, SC 29204 JUNIOR LEAGUE OF 57-0335419 501(C)(3) 10.288

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29407

MULTIPLE GRANTS CHARLESTON INC IAWARDED 51 FOLLY ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance KAHAL KADOSH BETH FLOHIM 57-0406806 501(C)(3) 43.568 MULTIPLE GRANTS

90 HASELL STREET CHARLESTON, SC 29401		, , ,	·		AWARDED
KISKIMINETAS SPRINGS SCHOOL	25-0995765	501(C)(3)	10,000		MULTIPLE GRANTS AWARDED

1888 BRETT LANE SALTSBURG, PA 156818951

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-0727884 501(C)(3) 10.000 LITERACY VOLUNTEERS OF MULTIPLE GRANTS THE LOWCOUNTRY INC IAWARDED

PO BOX 3725 BLUFFTON, SC 29910

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COATSVILLE, PA 19320

LITTLE ACORN HOUSE 82-2093264 501(C)(3) 10.000 IGENERAL OPERATING 1916 BERUE DRIVE SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-3979178 501(C)(3) 190.945 LOWCOUNTRY ALLIANCE FOR MULTIPLE GRANTS MODEL COMMUNITIES IAWARDED

2125 DORCHESTER ROAD NORTH CHARLESTON, SC 29405					AWARD
LOWCOUNTRY AQUATIC	81-4634465	501(C)(3)	12,000		MULTIP

MT PLEASANT, SC 29465

TPLE GRANTS PROJECT SWIMMING IAWARDED PO BOX 2416

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LOWCOUNTRY FOOD BANK INC 57-0751835 501(C)(3) 84.007 MULTIPLE GRANTS 2864 AZALEA DRIVE IAWARDED

CHARLESTON, SC 29405

LOWCOUNTRY LAND TRUST 57-0809313 501(C)(3) 44,200

MULTIPLE GRANTS AWARDED AVENUE SUITE 107

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29403

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 56-2202319 501(C)(3) 15.000 IGENERAL OPERATING LOWCOUNTRY LEGAL VOLUNTEERS SUPPORT

PO BOX 2496 BLUFFTON, SC 29910 LOWCOUNTRY LOCAL FIRST 87-0792700 501(C)(3) 13.350

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 294059440

MULTIPLE GRANTS 1630 MEETING STREET ROAD AWARDED BLDG 2

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 26-1108081 501(C)(3) 9.500 LOWCOUNTRY ORPHAN RELIEF MULTIPLE GRANTS PO BOX 70185 IAWARDED NORTH CHARLESTON, SC 57-0794782 501(C)(3) 6.862 MULTIPLE GRANTS AWARDED

29415 LUTHERAN SOCIAL SERVICES OF THE GREATER CHARLESTON AREA 2105 COSGROVE AVENUE NORTH CHARLESTON, SC

29405

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MAKE-A-WICH FOUNDATION 57-0786110 E01/C1/31 0.021 MILL TIDLE CDANTS

FOUNDATION

PO BOX 18819 ATLANTA, GA 31126

OF SC INC 225 SOUTH PLEASANTBURG DRIVE C17 GREENVILLE, SC 29607	37-0700113	301(0)(3)	3,301		AWARDED
MARCH OF DIMES	13-1846366	501(C)(3)	8,633		MULTIPLE GRANTS

AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MARSHALL-WYTHE SCHOOL OF 54-1224563 501(C)(3) 10.000 IGENERAL OPERATING LAW FOUNDATION SUPPORT

PO BOX 3527 WILLAMSBURG, VA 23187 MASSACHUSETTS INSTITUTE 04-2103594 501(C)(3) 17.500 MULTIPLE GRANTS OF TECHNOLOGY AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

77 MASSACHUSETTS AVENUE

CAMBRIDGE, MA 02139

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

SPECIAL PROJECT

SUPPORT

MEALS ON WHEELS OF SUMMERVILLE PO BOX 592 SUMMERVILLE, SC 29484	57-0730993	501(C)(3)	14,500		MULTIPLE GRANTS AWARDED

7.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

MEALS ON WHEELS

PO BOX 23691

29925

BLUFFTON-HILTON HEAD INC

HILTON HEAD ISLAND, SC

57-0691109

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT

MEDIA REFORM SC INC PO BOX 20241 CHARLESTON, SC 29413	46-2474438	501(C)(3)	6,100		MULTIPLE GRANTS AWARDED
MED-I-ASSIST INC	32-0212924	501(C)(3)	15,000		GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 3164 BLUFFTON, SC 29910

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance OTHER 37.000 MEDICAL UNIVERSITY OF MULTIPLE GRANTS SOUTH CAROLINA IAWARDED 99 JONATHAN LUCAS ST MSC

160
CHARLESTON, SC 29425

MEDICAL UNIVERSITY OF 57-6028985 501(C)(3) 61,898
SOUTH CAROLINA FOUNDATION 59 BEE STREET MSC 201

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29425

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MEET THE NEEDS 47-2703106 501(C)(3) 35.000 MULTIPLE GRANTS

FLOOR

NEW YORK, NY 10017

CHARLESTON 275 BEECH HILL MOUNT PLEASANT, SC 29464					AWARDED
MEMORIAL SLOAN-KETTERING CANCER CENTER 885 SECOND AVENUE 7TH	91-2154267	501(C)(3)	5,500		MULTIPLE GRANTS AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 57-0670742 501(C)(3) 7.000 IGENERAL OPERATING MENTAL HEALTH AMERICA OF BEAUFORT-JASPER SUPPORT

PO BOX 1925 BLUFFTON, SC 29910 MEPKIN ABBEY CATHOLIC 57-0416728 501(C)(3) 8.500 CONFERENCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MONCKS CORNER, SC 29461

MULTIPLE GRANTS AWARDED 1098 MEPKIN ABBEY ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-2816066 501(C)(3) 20.000 IGENERAL OPERATING MESOTHELIOMA APPLIED SUPPORT

RESEARCH FOUNDATION INC 1615 L STREET NW SUITE 430 WASHINGTON, DC 20036 METANOIA 20-0310400 63.789

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

29405

501(C)(3) MULTIPLE GRANTS 2005 REYNOLDS AVENUE AWARDED NORTH CHARLESTON, SC

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 13-1624086 501(C)(3) 6.500 METROPOLITAN MUSEUM OF MULTIPLE GRANTS

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

P O BOX 1007

GEORGETOWN, SC 29442

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-2383515 501(C)(3) 6.500 MISSION COLLECTIVE MULTIPLE GRANTS 142 SPORTSMAN ISLAND DR IAWARDED

UNIT C
CHARLESTON, SC 29492

MONTCLAIR FILM FESTIVAL 27-1732322 501(C)(3) 105,000

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

41 WATCHUNG PLAZA 345 MONTCLAIR, NJ 07042

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 82-0558746 501(C)(3) 10,000 GENERAL OPERATING MONTCLAIR FREE PUBLIC CURRORT

50 SOUTH FULLERTON AVENUE MONTCLAIR, NJ 07042					SUPPORT
MONTCLAIR KIMBERLY ACADEMY FOUNDATION	23-7365263	501(C)(3)	22,000		SPECIAL PROJECT

ACADEMY FOUNDATION 201 VALLEY ROAD

MONTCLAIR, NJ 07042

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-7082731 501(C)(3) 8.040.091 ISPECIAL PROJECT MORGAN STANLEY GLOBAL

IMPACT FUNDING TRUST INC
150 CLOVE ROAD
LITTLE FALLS, NJ 07424

MOUNT CARMEL BAPTIST
CHURCH
SPECIAL PROJECT
SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

367 KEANS NECK ROAD SEABROOK, SC 29940

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 56-1071426 501(C)(3) 6,500 MOUNTAIN AREA HEALTH ISPECIAL PROJECT EDUCATION CENTED INC SUPPORT

121 HENDERSONVILLE ROAD ASHEVILLE, NC 28803						SUPPORT
MULTIDISCIPLINARY ASSOCIATION FOR PSYCHEDELIC STUDIES	59-2751953	501(C)(3)	100,000		I	SPECIAL PROJECT SUPPORT

1115 MISSION STREET SANTA CRUZ, CA 95060

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT

52-0959336 501(C)(3) 15.760 MULTIPLE GRANTS MULTIPLYING GOOD 3365 SHADOW MOSS LANE IAWARDED MURRELLS INLET, SC 29576

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3030 OLYMPIC BLVD

SANTA MONICA, CA 90404

MUSICARES FOUNDATION INC. 95-4470909 501(C)(3) 10,000 GENERAL OPERATING

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

MY SISTER'S HOUSE INC PO BOX 71171 NORTH CHARLESTON, SC 294151171	57-0730861	501(C)(3)	35,833		I	MULTIPLE GRANTS AWARDED
NATIONAL AUDUBON SOCIETY	13-1624102	501(C)(3)	29,000			MULTIPLE GRANTS AWARDED

635 RUTLEDGE AVENUE SUITE 107 CHARLESTON, SC 29403

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance NATURAL RESOURCES 13-2654926 501(C)(3) 10.000 IGENERAL OPERATING SUPPORT

DEFENSE COUNCIL INC 40 WEST 20TH STREET NEW YORK NY 10011

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MOUNT PLEASANT, SC 29464

NATURE CONSERVANCY INC 53-0242652 501(C)(3) 66.000 MULTIPLE GRANTS 1417 STUART ENGALS AWARDED BOULEVARD

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NECHAMA - JEWISH 41-1998750 501(C)(3) 26,404 SPECIAL PROJECT

RESPONSE TO DISASTER 12219 NICOLLET AVENUE BURNSVILLE, MN 55337					SUPPORT
NEIGHBORHOOD OUTREACH CONNECTION PO BOX 23558	54-2083947	501(C)(3)	5,250		MULTIPLE G AWARDED

GRANTS HILTON HEAD ISLAND, SC 29925

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance OTHER 11.333 NEW ROSEMONT MULTIPLE GRANTS HOMEOWNERS ASSOCIATION IAWARDED

1841 B DOSCHER AVENUE
CHARLESTON, SC 29405

NEW YORK HISTORICAL 13-1624124 501(C)(3) 30,000

MULTIPLE GRANTS
SOCIETY
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170 CENTRAL PARK WEST NEW YORK, NY 10024

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-3015230 501(C)(3) 10.000 IGENERAL OPERATING NEW YORK PUBLIC RADIO

AWARDED

160 VARICK STREET 8TH ISUPPORT FLOOR NEW YORK, NY 10013 57-0314404 501(C)(3) 5.189 MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEWBERRY COLLEGE 2100 COLLEGE STREET

NEWBERRY, SC 29108

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NORTH CAROLINA A&T STATE OTHER 10.000 SCHOLARSHIP

UNIVERSITY 1601 EAST MARKET STREET GREENSBORO, NC 27411						
NORTH CAROLINA SCHOOL OF SCIENCE & MATHEMATICS	56-1250756	501(C)(3)	100,000		1	SPECIAL PROJECT SUPPORT

FOUNDATION PO BOX 2733

DURHAM, NC 27715

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance OTHER 11.500 NORTH CAROLINA STATE MULTIPLE GRANTS UNIVERSITY IAWARDED

BOX 7302
RALEIGH, NC 276957302

NORTH CHARLESTON POPS 35-2450311 501(C)(3) 12,500

MULTIPLE GRANTS AWARDED AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

29418

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-0789483 501(C)(3) 205.545 ONE80 PLACE MULTIPLE GRANTS IAWARDED

PO BOX 20038 CHARLESTON, SC 294130038 OPERATION HOME INC. 62-1745925 501(C)(3) 61.330 3973 RIVERS AVE SUITE 104

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS AWARDED NORTH CHARLESTON, SC 29405

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 45-3449443 501(C)(3) 29,500 MULTIPLE GRANTS OPERATION SIGHT

1101 CLARITY ROAD SUITE 100 MOUNT PLEASANT, SC 29464					AWARDED
ORCHESTRA OF ST LUKE'S SUPPORT CORPORATION 450 WEST 37TH STREET SUITE 502	27-2622704	501(C)(3)	25,000		GENERAL OPERATING SUPPORT

NEW YORK, NY 10018

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance OREGON BALLET THEATRE 93-1009305 501(C)(3) 10.000 IGENERAL OPERATING 0720 SW BANCROFT ST SUPPORT

PORTLAND, OR 97239 OUR LADY OF MERCY 57-0905488 501(C)(3) 43.160 COMMUNITY OUTREACH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS IAWARDED PO BOX 607 JOHNS ISLAND, SC 29457

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 57-0907043 501(C)(3) 7.000 PALMETTO CONSERVATION MULTIPLE GRANTS

FOUNDATION IAWARDED 722 KING STREET COLUMBIA, SC 29205

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29402

PALMETTO PROJECT INC. 57-0807801 501(C)(3) 37.692 MULTIPLE GRANTS

PO BOX 183 AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0735284 501(C)(3) 6.259 IGENERAL OPERATING PARENTS AND GUARDIANS ASSOCIATION OF THE SUPPORT

MULTIPLE GRANTS

IAWARDED

26,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

COASTAL CENTER 9995 JAMISON ROAD SUMMERVILLE, SC 29485

20-3419262

PATTISON'S DREAM ACADEMY

CHARLESTON, SC 29416

PO BOX 80426

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

AWARDED

PENICK VILLAGE FOUNDATION 500 E RHODE ISLAND AVENUE SOUTHERN PINES, NC 28387		501(C)(3)	5,801		GENERAL OPERATING SUPPORT
PEOPLE AGAINST RAPE	23-7415034	501(C)(3)	6,000		MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 1723

CHARLESTON, SC 29402

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 56-1282557 501(C)(3) 733.898 PLANNED PARENTHOOD MULTIPLE GRANTS SOUTH ATLANTIC IAWARDED

1312 ASHLEY RIVER ROAD CHARLESTON, SC 29407 POLARIS TECH CHARTER 81-5150351 501(C)(3) 10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RIDGELAND, SC 29936

ISPECIAL PROJECT SCHOOL SUPPORT 1508 GRAYS HIGHWAY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-4431922 501(C)(3) 15.000 PORT ROYAL SOUND MULTIPLE GRANTS

AWARDED

OKATIE, SC 29909	45 2701202	F01/C)/2)	12.501		MULTIPLE CO
FOUNDATION 310 OKATIE HIGHWAY					AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

300 ALBEMARLE ROAD

CHARLESTON, SC 29407

|MULTIPLE GRANTS PORTER-GAUD FOUNDATION 45-2701202 501(C)(3)| 13,581

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT

PORTER-GAUD SCHOOL 300 ALBEMARLE ROAD CHARLESTON, SC 29407	57-0342032	501(C)(3)	13,500		MULTIPLE GRANTS AWARDED

POSSE FOUNDATION 13-3840394 501(C)(3) 20,000 GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

14 WALL STREET SUITE 8A-60

NEW YORK, NY 10005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 57-6020356 501(C)(3) 12.000 POST AND COURIER MULTIPLE GRANTS FOUNDATION IAWARDED 134 COLUMBUS STREET CHARLESTON, SC 29403 57-0923523 501(C)(3) 7.500 GENERAL OPERATING PREGNANCY CENTER AND CLINIC OF THE LOW COUNTRY SUPPORT 1 CARDINAL ROAD - SUITES

HILTON HEAD ISLAND, SC

29926

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0439524 501(C)(3) 286.693 PRESERVATION SOCIETY OF MULTIPLE GRANTS IAWARDED

CHARLESTON PO BOX 521 CHARLESTON, SC 29402 PROJECT OKURASE 46-3211555 10.000 IGENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 104

CHARLESTON, SC 29470

501(C)(3) 176 CROGHAN SPUR ROAD SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 04-3481253 501(C)(3) 10.000 SPECIAL PROJECT REACH OUT AND READ INC 18 PLOTT DRIVE SUPPORT SYLVA, NC 28779 77-0568469 501(C)(3) 82.375 MULTIPLE GRANTS

IAWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

READING PARTNERS 6296 RIVERS AVENUE SUITE 305 NORTH CHARLESTON, SC

294064973

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1224516 501(C)(3) 10.000 IGENERAL OPERATING REFUGEES INTERNATIONAL SUPPORT

2001 S STREET NW SUITE 700
WASHINGTON, DC 20009

RONALD MCDONALD HOUSE
CHARITIES OF CHARLESTON
SC INC
81 GADSDEN STREET

SUPPORT

MULTIPLE GRANTS

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 294011156

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 58-1630107 501(C)(3) 15.000 RONALD MCDONALD HOUSE ISPECIAL PROJECT CHARITIES OF THE COASTAL ISUPPORT

**EMPIRE** 4710 WATERS AVENUE SAVANNAH, GA 31404 501(C)(3) 25,387 ROPER ST FRANCIS 57-1068509 FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29403

MULTIPLE GRANTS AWARDED 125 DOUGHTY STREET STE 790

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SC FIRST STEPS TO SCHOOL 57-1098007 501(C)(3) 5.500 MULTIPLE GRANTS READINESS BOARD OF IAWARDED

IAWARDED

TRUSTEES 6215 MURRAY DRIVE HANAHAN, SC 29410

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 2716

GEORGETOWN, SC 29442

SALVATION ARMY 58-0660607 501(C)(3) 28,819 MULTIPLE GRANTS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0840667 501(C)(3) 32.000 SEA ISLAND HABITAT FOR MULTIPLE GRANTS HUMANITY IAWARDED

2545 BOHICKET ROAD
JOHNS ISLAND, SC 29455

SEACOAST CHRISTIAN 57-1045195 501(C)(3) 10,000

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

750 LONG POINT ROAD MOUNT PLEASANT, SC 29464

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 57-0938469 501(C)(3) 22.500 SECOND HELPINGS MULTIPLE GRANTS 20 PALMETTO PARKWAY SUITE IAWARDED

ISUPPORT

H
HILTON HEAD ISLAND, SC
29925

SIGMA KAPPA FOUNDATION 35-1778450 501(C)(3) 20,000 SPECIAL PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

695 PRO MED LANE SUITE 300

CARMEL, IN 46032

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-0707233 501(C)(3) 10.000 MULTIPLE GRANTS SMALLS INSTITUTE FOR MUSIC AND YOUTH LAWARDED

LEADERSHIP					7
PO BOX 13497 CHARLESTON, SC 294223497					
SOMOS AMIGOS MEDICAL MISSIONS	77-0553014	501(C)(3)	10,000		GENERAL OPERATING

PO BOX 2351 SARASOTA, CA 95070

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 57-0909189 501(C)(3) 5.500 SOS HEALTH CARE INC MULTIPLE GRANTS IAWARDED

PO BOX 7136 MYRTLE BEACH, SC 295727136

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JOHNS ISLAND, SC 29455

SOULFULLY CREATIVE KIDS 82-1761165 501(C)(3) 8.352 MULTIPLE GRANTS 1861 BOHICKET ROAD AWARDED

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SOUTH CAROLINA AQUARIUM 57-0961897 501(C)(3) 14,700 MULTIPLE GRANTS

PO BOX 130001 CHARLESTON, SC 294139001						AWARDED
SOUTH CAROLINA ARTS FOUNDATION 1989 1026 SUMTER STREET SUITE 200	57-0892045	501(C)(3)	32,722		1	SPECIAL PROJECT SUPPORT

COLUMBIA, SC 29201

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0887278 501(C)(3) 132.098 MULTIPLE GRANTS SOUTH CAROLINA COASTAL CONCEDIVATION LEAGUE INC. IAWARDED

PO BOX 1765 CHARLESTON, SC 294029940						AWARDED
SOUTH CAROLINA ENVIRONMENTAL LAW PROJECT INC	57-1031430	501(C)(3)	39,000		l .	MULTIPLE GRANTS AWARDED

PO BOX 1380

PAWLEYS ISLAND, SC 29585

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SOUTH CAROLINA HISTORICAL 57-0323800 501(C)(3) 6.200 MULTIPLE GRANTS

SOCIETY 100 MEETING STREET CHARLESTON, SC 294012299		(-)(-)	,,			AWARDED
SOUTH CAROLINA HOSPITAL RESEARCH AND EDUCATION FOUNDATION	57-6026361	501(C)(3)	7,500		l .	SPECIAL PROJECT SUPPORT

1000 CENTER POINT RAOD COLUMBIA, SC 29210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance SOUTH CAROLINA JUNIOR 57-1021847 501(C)(3) 12 000 SPECIAL PROJECT

GOLF FOUNDATION PO BOX 286 IRMO, SC 29063	3, 102101,	301(0)(3)	12,000		1	SUPPORT
SOUTH CAROLINA SPECIAL	57-0680248	501(C)(3)	9,670			MULTIPLE GRANTS

AWARDED OLYMPICS 107 CROMWELL STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUMMERVILLE, SC 29485

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SOUTH CAROLINA STATE OTHER 25.400 MULTIPLE GRANTS

UNIVERSITY PO BOX 7425 ORANGEBURG, SC 29117					AWARDED
SOUTH CAROLINA YOUTH ADVOCATE PROGRAM INC	34-1652048	501(C)(3)	10,100		MULTIPLE GRANTS AWARDED

140 STONERIDGE DRIVE SUITE 350 COLUMBIA, SC 29210

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SOUTHERN APPALACHIAN 62-1098890 501(C)(3) 120.000 IGENERAL OPERATING SUPPORT

HIGHLANDS CONSERVANCY 372 MERRIMON AVENUE ASHEVILLE, NC 28801

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HOT SPRINGS, NC 28743

SOUTHERN DHARMA RETREAT 56-1695711 501(C)(3) 15.000 IGENERAL OPERATING CENTER INC SUPPORT 1661 WEST ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 52-1436778 501(C)(3) 75.000 SOUTHERN ENVIRONMENTAL MULTIPLE GRANTS LAW CENTER IAWARDED 463 KING STREET SUITE B MULTIPLE GRANTS

463 KING STREET SUITE B
CHARLESTON, SC 29403

SPECIALIZED ALTERNATIVES
FOR FAMILIES & YOUTH OF SC
INC
4925 LACROSS ROAD SUITE
1111

MULTIPLE
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29406

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance F GRANTS

AWARDED

SPELMAN COLLEGE 350 SPELMAN LANE SW ATLANTA, GA 30314	58-0566243	501(C)(3)	19,500		MULTIPLE AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

14 GEORGE STREET

CHARLESTON, SC 29401

57-0660848 394.971 MULTIPLE GRANTS SPOLETO FESTIVAL USA 501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 41.000 IGENERAL OPERATING SPRING HILL COLLEGE 63-0302179 4000 DAUPHIN STREET ISUPPORT

MOBILE, AL 36608

ST ANDREWS CHURCH - MT
PLEASANT
440 WHILDEN STREET

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MOUNT PLEASANT, SC 29464

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-6180215 501(C)(3) 7.000 ST ANDREWS CHURCH - MT CAPITAL/BUILDING PLEASANT LAND TRUST SUPPORT

PLEASANT LAND TRUST
440 WHILDEN STREET
MOUNT PLEASANT, SC 29464

ST ANDREW'S SCHOOL OF 51-0079506 501(C)(3) 10,000
DELAWARE INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

350 NOXONTOWN ROAD MIDDLETOWN, DE 19709

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance OTHER 10.000 IGENERAL OPERATING ST CASSIAN ROMAN CATHOLIC CHURCH SUPPORT

187 BELLEVUE AVENUE
UPPER MONTCLAIR, NJ 07043

ST MATTHEW'S LUTHERAN 57-0350582 501(C)(3) 5,209

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

405 KING STREET CHARLESTON, SC 29403

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 46-6361161 501(C)(3) 6.448 ST MICHAEL'S CHURCH MULTIPLE GRANTS 14 ST MICHAELS ALLEY IAWARDED

CHARLESTON, SC 29401

ST PHILIPS EPISCOPAL
CHURCH
142 CHURCH STREET

AWARDED

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OTHER 14,000 STELLA MARIS ROMAN MULTIPLE GRANTS CATHOLIC CHURCH AMARDED

PO BOX 280					AWARDED
SULLIVANS ISLAND, SC 29482					
STORYCORPS INC	13-3753011	501(C)(3)	10.000		GENERAL OPERATIN

BROOKLYN, NY 11217

80 HANSON PLACE 2ND FLOOR SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

AWARDED

STORYTREE THEATRE PO BOX 2248 MT PLEASANT, SC 29465	45-3828491	501(C)(3)	9,000		MULTIPLE GRANTS AWARDED

SUMMERVILLE FAMILY YMCA 57-0643100 501(C)(3) 14.803 MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

140 SOUTH CEDAR STREET

SUMMERVILLE, SC 29483

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OTHER 15.000 IGENERAL OPERATING SUNRISE PRESBYTERIAN

CHURCH SUPPORT PO BOX 517 SULLIVANS ISLAND, SC 29482

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SWEET BRIAR, VA 24595

SWEET BRIAR INSTITUTE 54-0534105 501(C)(3) 18.400 MULTIPLE GRANTS PO BOX 1057 AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 12.500 IGENERAL OPERATING SYMPHONY SPACE INC 13-2941455 2537 BROADWAY ISUPPORT

2537 BROADWAY
NEW YORK, NY 10025

SYRIAN AMERICAN MEDICAL
SOCIETY FOUNDATION

SOCIETY FOUNDATION

SUPPORT

SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 34115

WASHINGTON, DC 20043

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-3541913 501(C)(3) 15.000 TEACH FOR AMERICA INC MULTIPLE GRANTS 7301 RIVERS AVENUE SUITE IAWARDED

160
CHARLESTON, SC 29406

TEACHERS SUPPLY CLOSET
2731 GORDON STREET
NORTH CHARLESTON, SC

AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

29405

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance TECHNICAL COLLEGE OF THE 57-0767394 E01/C1/31 17 500 MILL TIDLE CDANTS

LOWCOUNTRY FOUNDATION INCORPORATED PO BOX 2614 BEAUFORT, SC 29901	37-0707304	301(C)(3)	17,300		AWARDED	
THE CHARLESTON CATHOLIC	57-0930700	OTHER	29.653		MULTIPLE GRANTS	

25,055 SCHOOL AWARDED 888-A KING STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29403

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-0694183 501(C)(3) 68.002 THE CHARLESTON STAGE MULTIPLE GRANTS COMPANY INC IAWARDED

AWARDED

COMPANY INC
PO BOX 356
CHARLESTON, SC 29402
THE CITADEL FOUNDATION 57-6020493 501(C)(3) 52,310

MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

171 MOULTRIE STREET

CHARLESTON, SC 29409

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-3412540 501(C)(3) 10.000 IGENERAL OPERATING THE DOE FUND INC 232 EAST 84TH STREET ISUPPORT

232 EAST 84TH STREET
NEW YORK, NY 10029

THE GEORGE WASHINGTON 54-0525507 501(C)(3) 10,000

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FREDERICKSBURG, VA 22401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-1727184 501(C)(3) 9.670 THE GULLAH SOCIETY ISPECIAL PROJECT PO BOX 2187 ISUPPORT

MT PLEASANT, SC 29465 THE JAMES BEARD 13-2752108 501(C)(3) 12,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10011

GENERAL OPERATING FOUNDATION INC. SUPPORT 167 WEST 12TH STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-5644916 501(C)(3) 5,734 MULTIPLE GRANTS THE LEUKEMIA & LYMPHOMA

LAULABBER

ISUPPORT

941 HOUSTON NORTHCUTT BOULEVARD SUITE 203 MOUNT PLEASANT, SC 29464					AWARDED
THUMBS UP INC	57-1025876	501(C)(3)	7,500		GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

914 HAMAR STREET

BEAUFORT, SC 29902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0752796 501(C)(3) 22.129 TIDELANDS COMMUNITY MULTIPLE GRANTS HOSPICE INC IAWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

B500

COLUMBIA, SC 292234570

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance TRIANGLE STRATEGIC AND 47-4540775 501(C)(3) 6,595 MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NORTH CHARLESTON, SC

29406

FINANCIAL ADVISING FOR NOT-FOR-PROFIT 28 WYECREEK AVENUE CHARLESTON, SC 29412					AWARDED
TRI-COUNTY CRADLE-TO- CAREER COLLABORATIVE 6296 RIVERS AVENUE SUITE 308	46-2902337	501(C)(3)	11,000		MULTIPLE GRANTS AWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance OTHER 14.518 TRI-COUNTY TECHNICAL MULTIPLE GRANTS

AWARDED

COLLEGE
PO BOX 587
PENDLETON, SC 29670

TRIDENT ACADEMY INC 57-0542727 501(C)(3) 21,143

MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1455 WAKENDAW ROAD

MOUNT PLEASANT, SC 29464

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0721308 501(C)(3) 63.873 TRIDENT LITERACY MULTIPLE GRANTS ASSOCIATION IAWARDED

6185-D RIVERS AVENUE NORTH CHARLESTON, SC 29406

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 294238067

TRIDENT TECHNICAL COLLEGE OTHER 33,500 MULTIPLE GRANTS PO BOX 118067 IAWARDED

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0699317 501(C)(3) 46.329 TRIDENT TECHNICAL COLLEGE MULTIPLE GRANTS FOUNDATION INC IAWARDED

PO BOX 118067
CHARLESTON, SC 294238067

TRIDENT UNITED WAY INC
PO BOX 63305
NORTH CHARLESTON, SC

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

29419

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 06-0646927 501(C)(3) 10.000 TRINITY COLLEGE ISPECIAL PROJECT 300 SUMMIT STREET ISUPPORT

## HARTFORD, CT 06106

TRINITY EPISCOPAL 57-0314419 501(C)(3) 28,500

CATHEDRAL 1100 SUMTER STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBIA, SC 29201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

MULTIPLE GRANTS

IAWARDED

TURNING LEAF PROJECT PO BOX 80112 CHARLESTON, SC 29416	46-0671501	501(C)(3)	52,700		MULTIPLE GRANTS AWARDED

12,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

13-3076376

UNDER 21

PO BOX 731

NEW YORK, NY 101080900

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance UNDER ONE ROOF SERVICES 27-0981486 501(C)(3) 12.000 GENERAL OPERATING INC SUPPORT

PO BOX 1901 BEAUFORT, SC 29901

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1469 F MAIN STREET COLUMBUS, OH 43205

UNITED SCHOOLS NETWORK 46-2265149 501(C)(3) 8.000 IGENERAL OPERATING SUPPORT INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0405847 501(C)(3) 103.476 UNITED WAY OF THE MULTIPLE GRANTS LOWCOUNTRY INC IAWARDED PO BOX 202 BEAUFORT, SC 299010202 OTHER 10.000 SCHOLARSHIP

UNIVERSITY OF CENTRAL FLORIDA

P O BOX 160115 ORLANDO, FL 328160115

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance OTHER 13.000 UNIVERSITY OF MULTIPLE GRANTS PENNSYLVANIA IAWARDED

3451 WALNUT STREET
PHILADELPHIA, PA 191046270

UNIVERSITY OF SOUTH
CAROLINA

AWARDED

MULTIPLE GRANTS
AWARDED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

516 SOUTH MAIN STREET COLUMBIA, SC 29208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance OTHER 23.500 UNIVERSITY OF SOUTH MULTIPLE GRANTS CAROLINA - BEAUFORT IAWARDED

1600 HAMPTON STREET SUITE 736 COLUMBIA, SC 29208 OTHER 12,000 UNIVERSITY OF SOUTH CAROLINA - UPSTATE 300 NORTH CAMPUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS AWARDED BOULEVARD SPARTANBURG, SC 29303

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance UNIVERSITY OF SOUTH 57-6017985 501(C)(3) 1,106,000 MULTIPLE GRANTS

CAROLINA EDUCATIONAL FOUNDATION 1027 BARNWELL STREET COLUMBIA, SC 29208				AWARDED
UNIVERSITY OF VIRGINIA	OTHER	13,141		MULTIPLE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

229040331

E GRANTS IAWARDED PU BUX 400331 CHARLOTTESVILLE, VA

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance VISION TO LEARN 45-3457853 501(0)(3) 13 0001 MILL TIPLE GRANTS

11611 SAN VICENTE BLVD LOS ANGELES, CA 90049	43 3437033	301(0)(3)	13,000		AWARDED
VITAL AGING OF WILLIAMSBURG COUNTY INC	58-2276534	501(C)(3)	10,000		GENERAL OPERATING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 450

KINGSTREE, SC 29556

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 57-1116978 501(C)(3) 40.250 WATER MISSIONS MULTIPLE GRANTS INTERNATIONAL IAWARDED

PO BOX 63320 CHARLOTTE, NC 282633320 WINDWOOD FARM HOME FOR 57-0807424 501(C)(3) 38.000 MULTIPLE GRANTS AWARDED

CHILDREN INC 4857 WINDWOOD FARM ROAD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AWENDAW, SC 29429

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

AWARDED

WINGS FOR KIDS	57-1055054	501(C)(3)	81,500		MULTIPLE GRANTS
476 MEETING STREET SUITE E					AWARDED
CHARLESTON, SC 294034841					

WINTHROP UNIVERSITY OTHER 29,348 MULTIPLE GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

22 TILLMAN HALL

ROCK HILL, SC 29733

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-0314422 501(C)(3) 25.500 WOFFORD COLLEGE MULTIPLE GRANTS 429 NORTH CHURCH STREET IAWARDED

SPARTANBURG, SC 293033663 81-0775184 501(C)(3) 114.500 WOMEN'S RIGHTS AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MULTIPLE GRANTS EMPOWERMENT NETWORK AWARDED 1201 MAIN STREET SUITE 320 COLUMBIA, SC 29201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance YALE UNIVERSITY 06-0646973 501(C)(3) 19.000 MULTIPLE GRANTS

P O BOX 208288 IAWARDED NEW HAVEN, CT 06520

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHARLESTON, SC 29401

YESCAROLINA 20-3562766 501(C)(3) 8.870 MULTIPLE GRANTS 171 CHURCH ST SUITE 212 AWARDED

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 57-1092673 501(C)(3) 10,500 MULTIPLE GRANTS YOUTH EMPOWERMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

113

CHARLESTON, SC 29407

SERVICES PO BOX 41784 CHARLESTON, SC 29423					AWARDED
YWCA OF GREATER CHARLESTON 1064 GARDNER ROAD SUITE	57-0518147	501(C)(3)	24,803		MULTIPLE GRANTS AWARDED

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Data	a -	DLN: 934	9305	5012	:000
Sch	edule J	Com	pensati	ion Information	OM	IB No	1545-(	0047
(For	n 990)	For certain Officers,	Directors, T	rustees, Key Employees, and Hig	hest			
		➤ Complete if the organi	Compensa zation answ	ited Employees ered "Yes" on Form 990, Part IV,	line 23.	20	18	ζ .
	a		▶ Attach	to Form 990. instructions and the latest inform			to Pul	
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/r</u>	<u>:огт1990</u> тог	instructions and the latest inforn	nation.		ectio	
	me of the organiza				Employer identificat	ion nu	ımber	
COA	STAL COMMONITY F	OUNDATION			23-7390313			
Pa	rt I Questi	ons Regarding Compensation	n					
							Yes	No
1a				the following to or for a person listed y relevant information regarding thes				
		or charter travel		Housing allowance or residence for j				
	_	companions	님	Payments for business use of persor				
		nification and gross-up payments	H	Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cner)			
b		kes in line 1a are checked, did the o ill of the expenses described above?		ollow a written policy regarding paym plete Part III to explain	ent or reimbursement	<b>1</b> b		
2				or allowing expenses incurred by all	1-2	2		
	directors, truste	es, officers, including the CEO/Exec	utive Director	r, regarding the items checked in line	lar			
3				d to establish the compensation of th	ie			
	_	EO/Executive Director Check all that d organization to establish compens		CEO/Executive Director, but explain i	n Part III			
	✓ Compensa	tion committee	<b>✓</b>	Written employment contract				
	_ '	ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	<b>☑</b>	Approval by the board or compensa:	tion committee			
4	During the year,	did any person listed on Form 990,	, Part VII, Se	ction A, line 1a, with respect to the fi				
	related organiza	tion						
а	Receive a sever	ance payment or change-of-control	payment?			4a		No
b	•	receive payment from, a suppleme	•	•		4b		No
С		receive payment from, an equity-b		nsation arrangement? Ilicable amounts for each item in Part	TTT	4c		No
	ir les to ally c	illies 4a-c, list the persons and pro	ovide tile app	incable amounts for each item in Part	111			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) or	ganizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section A, ontingent on the revenues of	line 1a, did	the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A, ontingent on the net earnings of	line 1a, did i	the organization pay or accrue any				
а	The organization	17				6a		No
b	Any related orga					6b		No
_	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A, escribed in lines 5 and 6? If "Yes," d		the organization provide any nonfixed rt III	1	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow th	ne rebuttable	presumption procedure described in	Regulations section	9		No
For I	Danarwark Badu	ction Act Notice, see the Instru	ctions for Ea	orm 990 Cat No. 5	0053T Schedule 1		, 000)	2018

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990. Part VII

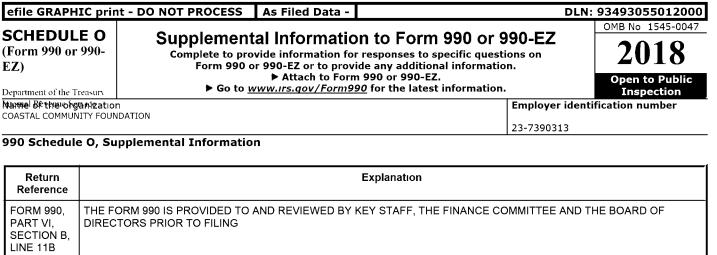
							D) and (E) amounts for that individual			
(A) Name and Title		(B) Breakdown (i) Base compensation	n of W-2 and/or 1099-MIS( (ii) Bonus & incentive compensation		(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990		
1 DARRIN GOSS CEO	(i)	204,467	0	0	5,244	15,755	225,466	0		
	(ii)	0	0	0	0	0	0	0		
	+-									
	+-	<u> </u>	<u> </u>							
	+-	<u> </u>	<u> </u>							
	<u> </u>	<u> </u>	<u> </u>							
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Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

efil	e GRAPHIC pi	int - DO NOT PR	OCESS	As Filed Data -		DLN:	9349305	5012	000
	EDULE M			loncash Contri	hutions		OMB No 1	545-0	047
(For	m 990)		•	toncasn contri	Dutions		20	10	•
		l -	_	ons answered "Yes" on F	orm 990, Part IV, lines 2	9 or 30.	<b>20</b>	10	
		► Attach to Form		000 ( 11 1-1 1-1 (					
Interna	tment of the Treasury al Revenue Service		iov/Form9	190 for the latest informa	tion.		Open to Inspe	ection	
	e of the organizat TAL COMMUNITY FO					Employer identi	fication n	umbei	•
						23-7390313			
Pa	rt I Types	of Property		<b>.</b>	,	_			
			(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	noncash cor	(d) of determin ntribution a		:s
1	Art—Works of ar	t							
	Art—Historical tr								
	Art—Fractional ir								
	Books and public								
5	Clothing and hou goods	isenoia • • • • •							
6	Cars and other v								
7	Boats and planes								
	Intellectual prope	•							
	Securities—Publi		X	97	6,941,10	O AVG HI/LO ON G	IFT DATE		
	Securities—Close								
11	Securities—Partr or trust interest		X	14	211,78	4 FMV			
12	Securities—Misce				,				
13	Qualified conserve contribution—H structures	istoric							
14	Qualified conserve contribution—O	vation							
	Real estate—Res								
	Real estate—Cor								
17	Real estate—Oth								
18 19	Collectibles . Food inventory								
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	ts							
23	Scientific specim	ens							
	Archeological art								
	Other ▶ (								
	Other ▶ (								
	Other ► (	•				1			
	Other ► (		ho organiza	l ation during the tax year for	contributions	<del>                                     </del>			
29				ation during the tax year for 3, Part IV, Donee Acknowled		29			
	_	·			-			Yes	No
30a	must hold for at	least three years fr	om the date	y contribution any property e of the initial contribution,	and which is not required to	be used for exem	pt <b>30a</b>		No
b	If "Yes," describ	e the arrangement (	n Part II				554		1
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the revie	w of any nonstandard contr	ibutions?	31	Yes	<u> </u>
	contributions?			or related organizations to s		ash · · · ·	32a	Yes	<u></u>
	If "Yes," describ								
33	-	•	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part								
For D	anerwork Deduction	on Act Notice, see the	Instruction	se for Form 000	Cat No 512271	Schadu	ile M (Form	0001	2018

Schedule M (Form 990) (2018)	Page <b>2</b>
I, column (b), t	<b>Information.</b> rmation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part he number of contributions, the number of items received, or a combination of both. Also complete additional information.
Return Reference	Explanation
PART I, LINE 32B	FOR REAL ESTATE GIFTS THE FOUNDATION HAS HIRED AGENTS TO REPRESENT IT IN THE MARKETING AND SALE
	Schedule M (Form 990) (2018)



Return Explanation Reference

990 Schedule O, Supplemental Information

FORM 990. ANNUALLY. THE BOARD AND OFFICERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSUR PART VI. E DOCUMENT THIS DOCUMENT REQUESTS DISCLOSURE OF ANY POTENTIAL CONFLICTS SUCH AS VENDOR RE LATIONSHIPS OR GRANT RECIPIENT RELATIONSHIPS IN ADDITION, AT EACH BOARD MEETING, MEMBERS ARE ASKED TO DISCLOSE ANY POTENTIAL CONFLICTS AND, UPON SUCH DISCLOSURES, TO LEAVE THE MEE TING AND REFRAIN FROM VOTING

SECTION B. LINE 12C

## 990 Schedule O, Supplemental Information

Doturn

Reference	Едріанаціон
FORM 990,	THE ORGANIZATION HAS ENGAGED COMPENSATION CONSULTANTS TO REVIEW THE APPROPRIATE SALARY RAN
PART VI,	GES FOR THE PRESIDENT AND OTHER STAFF POSITIONS THIS REPORT PROVIDES COMPARATIVE DATA AND
SECTION B,	INCLUDES INFORMATION FROM LOCAL AND NATIONAL MARKETS ALL SALARIES ARE APPROVED BY THE BO
LINE 15	ARD AS PART OF THE ANNUAL BUDGET ADDITIONALLY, COMPENSATION FOR THE PRESIDENT IS BASED ON
	THE RECOMMENDATION OF THE FINANCE COMMITTEE AFTER THE COMPLETION OF THE ANNUAL REVIEW

Evolunation

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, STATEMENTS, INCLUDING FORM 990, AVAILABLE ON REQUEST SECTION C, LINE 19

Return Explanation

990 Schedule O, Supplemental Information

Kelerence	
FORM 990,	CHANGE IN CASH VALUE OF LIFE INSURANCE 97,712 CHANGE IN BENEFICIAL INTEREST IN TRUST 145,472 REAL
PART XI,	ESTATE IMPAIRMENT
LINE 9	

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. THE PROCESS HAS NOT CHANGED PART XII,

LINE 2C

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - SCHEDULE R | Related

Data - DLN: 93493055012000
OMB No 1545-0047

**Related Organizations and Unrelated Partnerships** 

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

(Form 990)

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

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

Name of the organization COASTAL COMMUNITY FOUNDATION Employer identification number 23-7390313

Name, address, and EIN (If applicable) of disregarded entity		Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity		
(1) TCF REALTY LLC 635 RUTLEDGE AVENUE CHARLESTON, SC 29403 23-7390313		REAL ESTATE TITLE	SC		0 (	COASTAL COMMUNITY FOUN	DATION	_
								_
								_
								_
Part II Identification of Related Tax-Exempt Organiz	ations Co	mplete if the organ	uzation answered '	'Yes" on Form 990	Part IV line 34	necause it had one or	more	
related tax-exempt organizations during the tax ye (a)  Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	( Section	<b>g)</b> n 512(b
							en <b>Yes</b>	No.
(1)FRANCES P BUNNELLE FOUNDATION 95 CENTERMARSH LANE		RTING ORGANIZATION- MAKING	SC	501(C)(3)	509(A)(3) (TYPE1)	COASTAL COMMUNITY FOUNDATION		No
PAWLEYS ISLAND, SC 29585 57-1095197								
(2)JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON 1691 TURNBULL AVE N CHARLESTON, SC 29405		RTING ORGANIZATION- MAKING	SC	501(C)(3)	509(A)(3) (TYPE1)	COASTAL COMMUNITY FOUNDATION AND CHARLESTON JEWISH FEDERATION		No
57-1042419						FEDERATION		
(3)SAUL ALEXANDER FOUNDATION 1691 TUNBULL AVE		RTING ORGANIZATION- MAKING	SC	501(C)(3)	509(A)(3) (TYPE3)	N/A		No
N CHARLESTON, SC 29405 23-7420175								
(4)WACCAMAW COMMUNITY FOUNDATION 3655 S HIGHWAY 17 BUSINESS		RTING ORGANIZATION- MAKING	SC	501(C)(3)	509(A)(3) (TYPE1)	COASTAL COMMUNITY FOUNDATION		No
MURRELLS INLET, SC 29576 56-2121992								<u> </u>
or Panerwork Reduction Act Notice, see the Instructions for Fo	rm 990		Cat No 5013	5Y		Schedule R (Form	990) 2	018

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	nary Legal	(d) Direct controlling entity	Direct Predominant itrolling income(related,	(f) Share of total income				(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	ox managing partner?		(k) Percent owners
					314)			Yes	No		Yes	No	
					1								
Identification of Related Organiz because it had one or more related of	ations Taxable as a (	Corporation s a corporation	or Trus	<b>t</b> Complete st during th	ıf the organ	ızatıon ansv	wered "Yes	" on Fo	orm 99	90, Part IV	, lıne	34	
Identification of Related Organiz because it had one or more related of (a) Name, address, and EIN of related organization	ations Taxable as a Gorganizations treated as (b) Primary activity	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e)	vered "Yes  (f) Share of total income	Share	(g) of end- year assets	of- Perce	, line h) intage	Se (1	(I) ection 51 .3) contr entity
because it had one or more related (  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 .3) contr
because it had one or more related (  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity
because it had one or more related (  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity
because it had one or more related (  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity
because it had one or more related (  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity

Schedule R (Form 990) 2018	Pag	e <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on	Form 990, Part IV, line 34, 35b, or 36.	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organization	nizations listed in Parts II-IV?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)	1c Yes	
<b>d</b> Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)	10	No
p Reimbursement paid to related organization(s) for expenses		No
<b>q</b> Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)		No
f s Other transfer of cash or property from related organization(s)		No

(a) Name of related organization (b) Transaction type (a-s) (d) Method of determining amount involved (c) Amount involved

Schedule R (Form 990) 2018

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General o managin partner	g	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
													_
	•								•	Schedul	e R (Forn	1 99	0) 2018



## **Additional Data**

THE FRANCES P BUNNELLE FOUNDATION

THE FRANCES P BUNNELLE FOUNDATION

WACCAMAW COMMUNITY FOUNDATION INC

THE FRANCES P BUNNELLE FOUNDATION

WACCAMAW COMMUNITY FOUNDATION INC

THE SAUL ALEXANDER FOUNDATION

JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON

JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON

THE SAUL ALEXANDER FOUNDATION

(1)

(1)

(2)

(3)

(4)

(5) (6)

(7)

(8)

## Software ID: **Software Version: EIN:** 23-7390313

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Form 990, Schedule R, Part V - Transactions With Related Organizations			
(a)	(b)	(c)	
Name of related organization	Transaction	Amount Involved	(d)
•	type(a-s)		Method of determining amount involved