Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491316003429

2018

OMB No 1545-0052

**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

		► Go to <u>www.irs.qov/Form990PF</u>	for instructions an	d the latest in	formation.	O	pen to Public Inspection
For	calen	ndar year 2018, or tax year beginning 07-01-20	)18 , aı	nd ending 06	5-30-2019		
	e of fou		•		yer identifica	tion numbe	<u> </u>
		S-RENCOURT FOUNDATION INC		51-0404	•		-
Num	ber and	street (or P O box number if mail is not delivered to street address)	Room/suite				
		STER CATCHER COURT	, noonly suite	(703) 73	ione number (si 31-8373	ee instructioi	ns)
		, state or province, country, and ZIP or foreign postal code ISLAND, SC 29455		C If exe	mption applicat	ion is pendin	ng, check here
c C	neck all	that apply Initial return Initial return of a	former public charity	D 1 For	eign organizatio	nns chack h	ere $\Box$
<b>u</b> c.	icek un	Final return Amended return	former public chartey		reign organizati		▶ ⊔
		Address change Name change			st, check here a		
<b>H</b> C	ack ty	pe of organization Section 501(c)(3) exempt private	foundation		vate foundation		
	•		e private foundation	unde	r section 507(b)	)(1)(A), chec	ck here
		T T	☑ Cash ☐ Accru	F If the	foundation is i	n a 60-mont	h termination
of '	year (fi	rom Part II, col (c),	E Cash E Accre		r section 507(b)		
line	₹16) <b>J</b>	▶\$ 850,757	be on cash basis )				
Dэ	rt I	Analysis of Revenue and Expenses (The total	<u> </u>				(d) Disbursements
г .		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investr		djusted net	for charitable
		equal the amounts in column (a) (see instructions) )	books	Income		income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)					
	2	Check ► ✓ If the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments	34		34		
	4	Dividends and interest from securities	10,457	,	10,457		
	5a	Gross rents					
	ь	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10	61,636	i			
Reverkie	ь	Gross sales price for all assets on line 6a 178,704					
Re	7	Capital gain net income (from Part IV, line 2)			61,636		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	72,127		72,127		
	13	Compensation of officers, directors, trustees, etc	0		0		0
	14	Other employee salaries and wages					
568	15	Pension plans, employee benefits					
Ē	16a	Legal fees (attach schedule)	<b>96-1</b> 2.500		1 250		1 250
Expenses	b	Accounting fees (attach schedule)	2,500		1,250		1,250
Ne.	С	Other professional fees (attach schedule)	5,348	1	4,278		1,070
Operating and Administrative	17	Interest	<b>90,</b> ] 1,145		0		25
<u>₹</u>	18	Taxes (attach schedule) (see instructions)	1,145	'	٠		25
Ē	19	Depreciation (attach schedule) and depletion		-			-
₽	20	Occupancy					
n n	21 22	Printing and publications					
e G	23	Other expenses (attach schedule)	19		10		9
Ē	24	Total operating and administrative expenses.		-			+
era		Add lines 13 through 23	9,012		5,538		2,354
o	25	Contributions, gifts, grants paid	30,000		·		30,000
	26	Total expenses and disbursements. Add lines 24 and	,,,,,				1
		25	39,012		5,538		32,354
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	33,115				
	ь	Net investment income (If negative, enter -0-)	11,110		66,589		
	С	Adjusted net income (if negative, enter -0-)					

428,095

447,485

472,259

-24,774

447,485

447,485

456,344

480,600

472,259

8,341

480,600

480,600

2

3

4 5

6

447,485

33,115

480,600

480,600 Form 990-PF (2018)

0

0

826,501

850,757

Other notes and loans receivable (attach schedule) ▶

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -

Unrestricted . . . .

Permanently restricted . . . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) .

Other increases not included in line 2 (itemize) > \_\_\_\_

Temporarily restricted

Grants payable

Less allowance for doubtful accounts ▶

	5
	6
	7
2	8
Assets	9
Ą	10a
	b

b С

11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

28

29

31

Part III

2

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

- Capital Calls	una 200000 101 142 011 2111 001					ı		
	e the kınd(s) of property sold (e g , irehouse, or common stock, 200 shs		(b) How acquii P—Purcha D—Donati	se	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1aSee Additional Data Table	e		D Borraci	011				
b								
С								
d								
e								
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale		Gain o	n <b>)</b> r (loss) ) minus (g)		
a See Additional Data Table	e ,				( )	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
b								
С								
d								
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		,	1)		
(i)	(j) Adjusted basis	ĺ	(k) s of col (i)		Gains (Col (	<b>l)</b> h) gain minus less than -0-) <b>or</b>		
F M V as of 12/31/69  a See Additional Data Table	as of 12/31/69		(j), if any		Losses (from col (h))			
-	e							
b								
d								
<u>e</u>								
2 Capital gain net income	, , , , , , , , , , , , , , , , , , , ,	If gain, also enter in F If (loss), enter -0- in I	,	}	2	61,636		
	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	)- 	}	3			
Part V Qualification U	Jnder Section 4940(e) for Re	duced Tay on Net	Investmen	t Ind	rome			
_	rivate foundations subject to the sec							
If section 4940(d)(2) applies, le	•	ction 4940(a) tax on he	et investment	IIICOIII	e )			
	e section 4942 tax on the distributal	ble amount of any year	r in the base p	eriod?	· 🗆 🗸	es 🗹 No		
If "Yes," the foundation does no	ot qualify under section 4940(e) Do	not complete this part						
1 Enter the appropriate am	nount in each column for each year,	see instructions before	making any e	entries	5			
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets		( <b>d)</b> Distribution ration (col (b) divided by column (column)			
2017	32,453		708,741		, -, -, -	0 045790		
2016	32,125		612,070			0 052486		
2015	31,983		596,045			0 053659		
2014	24,292		608,313			0 039933		
2013	28,130		561,946			0 050058		
2 Total of line 1, column (d	d)			2		0 241926		
	for the 5-year base period—divide		0, or by the	,		0 048385		
	ndation has been in existence if less ncharitable-use assets for 2018 fron		: :	<u>3</u> 4		770,737		
5 Multiply line 4 by line 3		•	}	5		37,292		
• • •	ent income (1% of Part I, line 27b)		}	6		<u> </u>		
7 Add lines 5 and 6	incline (170 of Fait 1, fille 27b)		}	7		37,958		
8 Enter qualifying distributi	one from Part VII line 4			8				
	ons from Part XII, line 4 , eater than line 7, check the box in Pa		· · · · L oplete that par		I g a 1% tax rate Se	32,354 e the Part VI		
					E	rm <b>QQN_DF</b> (2018		

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	330 11 (2010)		A - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	4=00							age (
			Activities for Which	Form 4720 May Be	Required (c	ontinue	ea)				
5a	During the year did the foundation p		•							Yes	No
	(1) Carry on propaganda, or otherw			` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		Yes	✓	No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry						_				
	on, directly or indirectly, any voter registration drive?							No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?							No			
	(4) Provide a grant to an organization other than a charitable, etc , organization described										
	in section 4945(d)(4)(A)? See in				• • [	_ Yes	✓	No			
	(5) Provide for any purpose other th		- '	• • • • • • • • • • • • • • • • • • • •	-	_	_				
L	educational purposes, or for the		•		• • [	Yes	✓	No			
b	If any answer is "Yes" to 5a(1)-(5), Regulations section 53 4945 or in a		=			bea in			5b		
	<del>-</del>						٠		30		
_	Organizations relying on a current ne		-								
С	If the answer is "Yes" to question 5a			•	-	_	_				
	tax because it maintained expenditu  If "Yes," attach the statement requir		-		[	_ Yes	Ш	No			
6a	Did the foundation, during the year,	rece	ive any funds, directly or	indirectly, to pay premit	ıms on						
	a personal benefit contract?				• [	Yes	<b>✓</b>	No			
Ь	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract?		•		6b		No
	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax year, was				L	Yes	<b>✓</b>	No			
	If yes, did the foundation receive an		•				•		7b		
8	Is the foundation subject to the sect		, , ,		in remuneratio	n or					
	excess parachute payment during th	ie ye	ar <sup>7</sup>		• • [	Yes	<b>✓</b>	No			
Pai	Information About C	ffic	ers, Directors, Trust	ees, Foundation Ma	ınagers, Hig	hly Pai	id Er	nplo	yees,		
	and Contractors										
1	List all officers, directors, trustee	s, fo	undation managers ar	•							
	(a) Name and address	(	b) Title, and average	(c) Compensation (If	(d) Contril			(e)	Expen	se acc	ount,
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee ben- deferred cor			0	ther al	lowand	es
WM B	RADFORD REYNOLDS	PRES	IDENT	0			(				(
	OYSTER CATCHER CT	2 00									
	ROOK ISLAND, SC 29455							_			
	HIA R FARRIS	DIRE 2 00	CTOR	0			C	)			(
	DX 3699 INGTON, DE 19807										
	' R MCKEEVER	DIRE	CTOR	0							
3019	MARSH HAVEN	2 00									
	ROOK ISLAND, SC 29455									HONE	**
	Compensation of five highest-pai	a en		nose included on line 1	.—see instruc			ne, e	nter	NONE.	
					(4) C				_		unt.
(a)	Name and address of each employee	paid	(b) Title, and average		(d) Contri employee			(e)	Expens	se acco	
(a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:		Expens her all	owance	es e
	more than \$50,000	paid		(c) Compensation	employee	e benefit deferre	:				es
(a)	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				25
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
	more than \$50,000	paid	hours per week	(c) Compensation	employee	e benefit deferre	:				es
NON	more than \$50,000		hours per week devoted to position	(c) Compensation	employee plans and comper	e benefit deferre	:				es (

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	nid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		- 0
Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include releving anizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form <b>990-PF</b> (2018)

_				1
2a	Tax on investment income for 2018 from Part VI, line 5 2a	a 1,332		
ь	Income tax for 2018 (This does not include the tax from Part VI ) 2b	b		
С	Add lines 2a and 2b		<b>2</b> c	1,332
3	Distributable amount before adjustments Subtract line 2c from line 1	[	3	37,205
4	Recoveries of amounts treated as qualifying distributions	[	4	0
5	Add lines 3 and 4	[	5	37,205
6	Deduction from distributable amount (see instructions)	[	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on F	Part XIII, line 1	7	37,205
Part	t XII Qualifying Distributions (see instructions)			

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

1a

1b

2

3a 3h

4

5

32,354

32.354

32,354

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Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

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

1

2

3

4

5

b

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37,205

32,354

3,658

1,193

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Form	990-PF	(20
Pa	rt XII	

90-PF (20	018)	
XIII	Undistributed Income	(see instructions)

**b** Total for prior years

a From 2013. . . . . **b** From 2014. . . . c From 2015. . .

d From 2016. . . . .

e From 2017. . . . .

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2018

same amount must be shown in column (a) )

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

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

6 Enter the net total of each column as

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

9 Excess distributions carryover to 2019.

10 Analysis of line 9

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

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

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

- 1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . .
  - Excess distributions carryover, if any, to 2018

1 807

1.851

(a)

Corpus

3.658

3,658

0

(b)

Years prior to 2017

(c)

2017



Enter gross amounts unless otherwise indicated		Unrelated bu	ısıness ıncome	Excluded by section	(e) Related or exemp		
_	n service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions )	
		<u> </u>					
	and contracts from government agencies						
_	ership dues and assessments						
	st on savings and temporary cash ments			14	34		
4 Divide	nds and interest from securities			14	10,457		
	ntal income or (loss) from real estate						
	-financed property						
	debt-financed property						
	ntal income or (loss) from personal property						
	investment income						
8 Gain d invent	r (loss) from sales of assets other than ory						
	•	+		18	61,636		
	come or (loss) from special events profit or (loss) from sales of inventory						
	revenue a						
b							
с							
d							
е							
<b>e</b> <b>2</b> Subto	cal Add columns (b), (d), and (e).		0		72,127		
e 2 Subto 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				72,127 <b>3</b>		
e 2 Subto 3 Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations )		13	· · · · · · · · · · · · · · · · · · ·		
e 2 Subto 3 Total.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See was art XV	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to		
e 2 Subto 3 Total. (See w Part XV Line No.	cal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the  Explain below how each activity for which the accomplishment of the foundation's explain the second columns.	lations ) ne Accomplish income is reporti	ment of Exempled in column (e) of	pt Purposes	ted importantly to	72,127	

(20	,10,
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
	Exempt Organizations

Part	XVII	Exempt Organia	-	a11314		and mansa		iis and r	Celatio	nsinps with Noi	iiciiaiic	abic		
		ganization directly or in- than section 501(c)(3)	directly engag								on 501		Yes	No
a Trai	nsfers f	from the reporting foun	dation to a noi	nchar	ıtable exe	empt organiza	tion	of			İ			
(1)	Cash.										.	1a(1)		No
(2)	Other	assets									.	1a(2)		No
<b>b</b> Oth	er tran	sactions									Ī			
(1)	Sales	of assets to a nonchari	table exempt	organ	ization.							1b(1)		No
(2)	Purch	ases of assets from a n	oncharitable e	exemp	t organiz	zation					[	1b(2)		No
(3)	Renta	al of facilities, equipmen	nt, or other ass	sets.							[	1b(3)		No
(4)	Reim	bursement arrangemen	ts								. [	1b(4)		No
(5)	Loans	s or loan guarantees.									. [	1b(5)		No
(6)	Perfor	mance of services or m	embership or i	fundra	aising sol	icitations					. [	1b(6)		No
c Sha	ırıng of	facilities, equipment, n	nailing lists, ot	her a	ssets, or	paid employee	es.				. [	<b>1</b> c		No
of t	he goo	ver to any of the above ds, other assets, or serv nsaction or sharing arra	vices given by	the r	eporting <sup>•</sup>	foundation If	the 1	oundation	receive	d less than fair mar	ket value			
4	,	ioadaion or onaring arra	ingernenc, ener		- C	i, the value of		90043, 00	iici usse	, 0. 50. 11005 1000.				
(a) Line	No No	(b) Amount involved	(c) Name of n	onchar	ıtable exe	mpt organization		(d) Desc	ription of	transfers, transactions	, and shar	ing arra	ngemen	its
							-							
							-							
2a Ic t	he four	ndation directly or indire	actly affiliated	with	or relate	d to one or m	ore i	tav-evemr	ot organi	zatione				
		in section 501(c) (other	•			•			_		ac 🗸	No		
		omplete the following so		301(0	.)(3)) 01 1	iii section 527	•				es L	1110		
וו ט	165, C	omplete the following so (a) Name of organizatio		1	(1	<b>b)</b> Type of organ	ızatıo	n I		(c) Description	of relatio	nship		
		(a) Hame or organization				J Type of organ	Lacio	··		(C) Description	r or relatio	ТЭТПР		
	of m	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, cor											
Sign Here	,	*****	2			2019-11-08		*	****		return		scuss th	
	7	Signature of officer or to	rustee			Date		<b>/</b>	tle		below		✓ <sub>Yes</sub> I	
		Print/Type preparer's	name I	Prepa	rer's Sıgr	nature		Date		Check if self	PTIN	200216	2010	
Paid		ALISON R QUINN								employed ▶ 📙		900210	.010	
-	arer Only		MINGTON TRU								Fırm's EI	N <b>►</b> 51	-00550	)23
			00 N MARKET ILMINGTON, D								Phone no	(302	) 651-8	8160

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 100 SHRS OF FACEBOOK Р 2018-08-22 2016-02-11 400 SHRS OF WARNER INC Ρ 2017-09-28 2018-09-24 300 SHRS OF INTERCONTINENTAL EXCHANGE Р 2013-07-16 2018-10-25 200 SHRS OF ANALOG DEVICES INC Р 2013-07-24 2018-11-12 50 SHRS OF CME GROUP INC Р 2016-07-19 2018-11-08 Р 50 SHRS OF HOME DEPOT INC 2013-05-21 2018-11-08 Р 100 SHRS OF ROCKWELL AUTOMATION INC 2016-03-16 2018-12-12 Р 160 SHRS OF ILL TOOL WORKS INC 2013-09-20 2019-02-08 180 SHRS OF SUNTRUST BKS Ρ 2016-12-19 2019-02-14 120 SHRS OF CLOROX CO Р 2019-05-03 2015-09-16 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 17,258 10.164 7,094 17,669 20,128 -2,45922,203 10,928 11,275 17,140 9.689 7,451 9,402 5,094 4,308 5,629 2,350 3,279 16,154 10,831 5,323 21,490 12,223 9,267 11,517 9,957 1,560 17,848 13,610 4,238 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 7,094 -2,459 11,275 7,451 4,308 3,279 5,323 9,267 1,560 4,238

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 143 SHRS OF KONTOUR BRANDS INC Р 2017-11-10 2019-05-23 110 SHRS OF ECOLAB INC Ρ 2014-04-08 2019-06-14 17 SHRS OF KONTOUR BRANDS INC Ρ 2017-11-10 2019-06-03 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 21,896 11,570 10,326

493		520	-27						
Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I									
Complete only for assets show	ing gain in column (h) and owned b	y the foundation on 12/31/69	Gains (Col (h) gain minus						
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) <b>(k)</b> over col( <sub>1</sub> ), ıf any	col (k), but not less than -0-) <b>or</b> (l) Losses (from col (h))						

10,326 -27

If recipient is an individual, Recipient Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 564 PARK AVENUE PRESERVATION THIRD PARTY GENERAL SUPPORT OF 1,000 FOUNDATION ODEDATIONS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

564 PARK AVENUE NEW YORK, NY 10065		OI ENATIONS
AMERICAN CIVIL RIGHTS	THIRD PARTY	GENERAL SUPPORT OF

Total .

AM 3213 DUKE ST 625 OPERATIONS

ALEXANDRIA, VA 22314			
BARRIER ISLANDS FREE MEDICAL CLINIC 3226 MAYBANK HIGHWAY SUITE 1-A JOHNS ISLAND, SC 29455	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	3,333

250

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

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

BRANDYWINE CONSERVANCY PO BOX 141 CHADDS FORD, PA 19317	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,000
CHARLESTON ANIMAL SOCIETY	THIRD PARTY	GENERAL SUPPORT OF	250

CHADDS FORD, PA 1931/			
CHARLESTON ANIMAL SOCIETY 2455 REMOUNT ROAD NORTH CHARLESTON, SC 29406	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	250
DUPONT DE NEMOURS CEMETERY	THIRD PARTY	GENERAL SUPPORT OF	2,000

2455 REMOUNT ROAD NORTH CHARLESTON, SC 29406		OPERATIONS	
DUPONT DE NEMOURS CEMETERY PO BOX 3666 WILMINGTON, DE 19807	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	2,000

DUPONT DE NEMOURS CEMETERY PO BOX 3666 WILMINGTON, DE 19807	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	2,00
Total		 ▶ 3a	30,000

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

	or substantial contributor		
a Paid during the year			
GOOD NEIGHBORS INC 2301 EAST 7TH STREET SUITE A-248	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,0

,000

3,333

30,000

OS ANGELES, CA 90023		
GUNSTON HALL REGENTS 0709 GUNSTON ROAD	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS

or substantial contributor

Name and address (home or business)

Total .

GUNSTON HALL REGENTS 10709 GUNSTON ROAD MASON NECK, VA 22079	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	3
HAGLEY ANNUAL FUND	THIRD PARTY	GENERAL SUPPORT OF	1

MASON NECK, VA 22079		OPERATIONS	
HAGLEY ANNUAL FUND 298 BUCK ROAD EAST WILMINGTON, DE 19807	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,000

MASON NECK, VA 22079			
HAGLEY ANNUAL FUND 298 BUCK ROAD EAST WILMINGTON, DE 19807	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LANDMARK LEGAL FOUNDATION THIRD PARTY GENERAL SUPPORT OF 2,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

19415 DEERFIELD AVENUE SUITE 312 LEESBURG, VA 20176		OPERATIONS	
LAW ENFORCEMENT LEGAL DEFENSE FUND	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	

Total .

LAW ENFORCEMENT LEGAL DEFENSE FUND 1611 KENT STREET ARLINGTON, VA 22209	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	2,500
MAKE A WISH SOUTH CAROLINA	THIRD PARTY	GENERAL SUPPORT OF	150

ARLINGTON, VA 22209			
MAKE A WISH SOUTH CAROLINA 3520 MEEKS FARM ROAD 10HNS ISLAND SC 29455	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	150

•			
MAKE A WISH SOUTH CAROLINA 3520 MEEKS FARM ROAD JOHNS ISLAND, SC 29455	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	150

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year -00

CAROLINA FOUNDATION 18 BEE STREET CHARLESTON, SC 29425	THIRD PARTY	OPERATIONSGENERAL SUPPORT OF OPERATIONS	500
NEMOURS WILDLIFE FOUNDATION	THIRD PARTY	GENERAL SUPPORT OF	450

NEMOURS WILDLIFE FOUNDATION NEMOURS PLANTATION DRIVE YEMASSEE, SC 29945	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	450
ST JAMES SANTEE BRICK CHURCH 205 OAK STREET	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	3,334

YEMASSEE, SC 29945			
ST JAMES SANTEE BRICK CHURCH 205 OAK STREET MCCLELLANVILLE, SC 29458	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	3,334

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE FEDERALIST SOCIETY THIRD PARTY GENERAL SUPPORT OF 1.000 ODEDATIONS 10TH CEDEET NIM CHITE 43E

WASHINGTON, DC 20036		OPERATIONS	
THE METROPOLITAN MUSEUM OF ART 1000 5TH AVE NEW YORK, NY 10028	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	2,500
THE SUPREME COURT HISTORICAL SOCIETY OPPERMAN HOUSE 224 EAST CAPITOL STREET WASHINGTON DC 20003	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	250

Total .

▶ 3a

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

TRUSTEES OF PHILIPPS ACADEMY 180 MAIN STREET ANDOVER, MA 01810	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	150
VANDERBILT UNIVERSITY - ELLIOTT E	THIRD PARTY	GENERAL SUPPORT OF	2 500

VANDERBILT UNIVERSITY - ELLIOTT E CHEATHAM SCHOLARSHIP FUND 131 21ST AVENUE NASHVILLE, TN 37203	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	2,500
CHRISTIANA CARE	THIRD PARTY	GENERAL SUPPORT OF	1,500

131 21ST AVENUE NASHVILLE, TN 37203		or Entitle No	
CHRISTIANA CARE 13 READS WAY SUITE 203	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,500

NASHVILLE,⊤N 37203			
CHRISTIANA CARE 13 READS WAY SUITE 203 NEW CASTLE, DE 19720	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,50

11/10/11/2222/ 11/1 0/200			
CHRISTIANA CARE 13 READS WAY SUITE 203 NEW CASTLE DE 19770	THIRD PARTY	GENERAL SUPPORT OF OPERATIONS	1,50

Total .

CHRISTIANA CARE	I I I I I I I I I I I I I I I I I I I	GENERAL SUPPORT OF	1,500
13 READS WAY SUITE 203		OPERATIONS	
NEW CASTLE, DE 19720			

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TY 2018 Accounting Fees Schedule							
5							
	Name: REY		ENCOURT FOU	NDATION INC			
Category	Amount	Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
TAX PREPARATION FEE		2,500	1,250		1,250		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	Γ	DLN: 93491316003429
TY 2018 Investments Corpora	te Stock Schedule	1	
Name:	REYNOLDS-RENCOURT	FOUNDATION INC	
EIN:	51-0404246		
Investments Corporation Stock Schedule			
Name of Stock	k	End of Year Book	End of Year Fair

MORGAN STANLEY

Value

456,344

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491316003429
TY 2018 Other Expenses Sche	edule			
	DEVALOUES DEV	10011DT F011ND 4	TTON THE	
Name:	REYNOLDS-REN	ICOURT FOUNDAT	ITON INC	
EIN:	51-0404246			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	19	10		9

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491316003429  TY 2018 Other Professional Fees Schedule							
Name: REYNOLDS-RENCOURT FOUNDATION INC EIN: 51-0404246							
Category Amount Net Investment Adjusted Net Disbursements							

Purposes	Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable
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4,278

1,070

5,348

INVESTMENT FEES

efile GRAPHIC print - DO NOT PROC	ESS As Filed Data	-	DL	N: 93491316003429
TY 2018 Taxes Schedule				
	me: REYNOLDS- EIN: 51-0404246		PATION INC	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	1,120	0		0
FRANCHISE TAX	25	0		25