Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491066012700

2019

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.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20	19 , aı	nd er	nding 12-31-	2019	
		indation FAMILY FOUNDATION			A Employer Id	entification numbe	r
C/	O N BO	ATWRIGHT			57-1088077		
		I street (or P O box number if mail is not delivered to street address) VIEW FARMS RD	Room/suite		B Telephone nu	mber (see instruction	ns)
					(864) 599-4449)	
		ı, state or province, country, and ZIP or foreign postal code SC 29356			C If exemption	application is pendin	g, check here
G Ch	neck al	I that apply Initial return Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere \Box
		Final return Amended return	,			ganizations meeting	▶ ⊔
		Address change Name change			test, chec	k here and attach co	mputation 🕨 🔲
H Ch	eck ty	pe of organization Section 501(c)(3) exempt private f	oundation			undation status was t n 507(b)(1)(A), chec	
	Section	4947(a)(1) nonexempt charitable trust	private foundation				
			🗹 Cash 🔲 Accru	al		ation is in a 60-month	
		rom Part II, col (c), ▶\$ 2,028,418	be on cash basis)		under sectio	n 507(b)(1)(B), chec	k here
Da	rt I	Analysis of Revenue and Expenses (The total	,			<u> </u>	(d) Diskumsomer
ΓŒ	1 .	of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions))	books		income	income	purposes (cash basıs only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	2,300				
	2	Check ► ✓ If the foundation is not required to attach	2,555				
	_	Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	38,338		38,338		
	5a	Gross rents Net rental income or (loss)					
ē	b 6a	Net gain or (loss) from sale of assets not on line 10	72,892				
e K	b		, 2,032				
Revenue	7	Gross sales price for all assets on line 6a 332,475 Capital gain net income (from Part IV, line 2)			72,892		
Œ	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	113,530		111,230		
	13	Compensation of officers, directors, trustees, etc	0		0		0
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
Ē	16a	Legal fees (attach schedule)	05-1 1.150		675		675
Operating and Administrative Expenses	b	Accounting fees (attach schedule)	1,150		675		675
Ve	17	, , ,					
ratı	17 18	Interest	4 ,520		4,520		0
JI St	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	1,320		1,320		<u> </u>
<u>=</u>	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
and	22	Printing and publications					
ģ	23	Other expenses (attach schedule)	18,750		9,362		9,388
atıı	24	Total operating and administrative expenses.					
ber		Add lines 13 through 23	24,420		14,557		10,063
0	25	Contributions, gifts, grants paid	90,000				90,000
	26	Total expenses and disbursements. Add lines 24 and 25	114,420		14,557		100,063
	27	Subtract line 26 from line 12	114,420		14,337		100,003
	a	Excess of revenue over expenses and					
	<u>ا</u>	disbursements Net investment income (if negative, enter -0-)	-890		0.5.5=		
	b c	Adjusted net income (if negative, enter -0-)			96,673		
		Tajastea nee meeme (n negative, enter 6) 1 1 1					

1,221,789

1,748,042

1,565,695

182,347

1,748,042

1,748,042

242,417

1,454,212

1,747,152

1,565,695

181,457

1,747,152

1,747,152

1

2

3

4

5

6

1,748,042

1,747,152

1,747,152 Form **990-PF** (2019)

-890

0

0

281,724

1,733,569

2,028,418

283,633

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

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

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

Less accumulated depreciation (attach schedule) ▶ _____

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

Foundations that follow FASB ASC 958, check here ▶

Less accumulated depreciation (attach schedule) ▶ ____

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

Land, buildings, and equipment basis ▶ _

instructions Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶.

Other increases not included in line 2 (itemize) -

Net assets without donor restrictions . . .

Net assets with donor restrictions

Other assets (describe > _

Other liabilities (describe ▶_

Grants payable

	6
	7
£	8
Assets	9
As	10
	ı

11

12

13 14

15

16

17

18

19

20 21

22

23

24

25

26

28

29

30

Part III

2

3

Liabilities

Fund Balances

ŏ

Assets 27

Net

Part IV Capital Gains	and Losses for Tax on Invest	mont Tucomo			rage 3
(a) List and descri	be the kind(s) of property sold (e g , rarehouse, or common stock, 200 shs	real estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1aSee Additional Data Tab	ole				
b					
c					
d					
<u>е</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) or (loss) on minus (g)
a See Additional Data Tab	ole				
b					
C					
d					
e					
Complete only for asset	ts showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	1)
(i) F M V as of 12/31/6	(j)	Excess	(k) s of col (ı) l (յ), ıf any	Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a See Additional Data Tab		0701 001	. ()), a,		(,/
b					
С С					
d					
If gain, also enter in P in Part I, line 8	gain or (loss) as defined in sections : art I, line 8, column (c) (see instructi	ons) If (loss), enter -0	}	3	72,892
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
(For optional use by domestic	private foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	ne)	
If "Yes," the foundation does r	he section 4942 tax on the distributa not qualify under section 4940(e) Do	not complete this part	·		es 🗹 No
	mount in each column for each year,	see instructions perore	: making any entrie	s (d)	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		Distribution rat (col (b) divided by d	col (c))
2018	97,365		1,942,995		0 050111
2017	92,712		1,871,060		0 049551
2016	93,000		1,732,709		0 053673
2015	88,996		1,829,440		0 048647
2014	81,000		1,835,985	<u> </u>	0 044118
2 Total of line 1, column	, ,				0 246100
number of years the fou	io for the 5-year base period—divide i Indation has been in existence if less oncharitable-use assets for 2019 fron	than 5 years	0, or by the 3		0 049220
5 Multiply line 4 by line 3			5		1,909,935 94,007
	nent income (1% of Part I, line 27b)		6		94,007
	·				
	tions from Part VII line 4				94,974
	tions from Part XII, line 4 , reater than line 7, check the box in Pa			I ng a 1% tax rate Se	100,063 e the Part VI
IIISUIUCUOIIS					

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Pai	t VIII-B Statements Regard	ing Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation p	ay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	•		☐ Yes ✓	No		
	(2) Influence the outcome of any sp	·	• • • • • • • • • • • • • • • • • • • •				
	on, directly or indirectly, any vot	-		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individual i	• • • • • • • • • • • • • • • • • • • •		☐ Yes 🗹	No		
	(4) Provide a grant to an organization		· -				
	in section 4945(d)(4)(A)? See in (5) Provide for any purpose other th			·· ·	No		
	,, ,	• •	* * * * * * * * * * * * * * * * * * * *				
h	educational purposes, or for the If any answer is "Yes" to $5a(1)-(5)$,	·		⊔ Yes 🖭	No		
b	Regulations section 53 4945 or in a c	•		•	5b		
	Organizations relying on a current no				35		
c	If the answer is "Yes" to question 5a						
Ĭ	tax because it maintained expenditure	• • •	•				
	If "Yes," attach the statement requir			' ' ∐ Yes ∐	No		
6a	Did the foundation, during the year,	· -		ıms on			
	a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,					
ь	Did the foundation, during the year,			⊔ Yes 🖭	No 6b		No
	If "Yes" to 6b, file Form 8870	. , , , ,	,, ,				
7a	At any time during the tax year, was	the foundation a party to a p	orohibited tax shelter trai	nsaction? Yes	No.		
b	If "Yes", did the foundation receive a	ny proceeds or have any net	income attributable to th	ne transaction?	7b		
8	Is the foundation subject to the section	on 4960 tax on payment(s)	of more than \$1,000,000	in remuneration or			
	excess parachute payment during th	e year [?]		· · 🔲 Yes 🗸	No L		
	Information About O	fficers, Directors, Trus	tees, Foundation Ma	nagers, Highly Paid En		,	
Ра	t VIIII and Contractors						
1	List all officers, directors, trustee	s, foundation managers a	nd their compensation	See instructions			
	(-) None and address	(b) Title, and average	(c) Compensation (If	(d) Contributions to	(e) Expe	nse acc	ount,
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation	other a	llowan	ces
See /	Addıtıonal Data Table	'	,	'			
_2	Compensation of five highest-pai	d employees (other than t	hose included on line :		ne, enter "	NONE	."
(2)	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	CO 3000	ount
(a)	more than \$50,000	nours per week	(c) Compensation	plans and deferred	other al		
		devoted to position		compensation			
NON							
-							
Tota	I number of other employees paid ove						
	Hamber of other employees paid ove	. φου,ουσι ι ι ι ι	 		Form 99	O-DE	(2010

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id 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		·
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see II	nstructions)	
Describe the two largest program-related investments made by the foundation during th	<u> </u>	Amount
1	,	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form 990-PF (2019)

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

3a 3h

4

5

100.063

967

99.096

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

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

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

4

5

24,363

70,167

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0

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Pa	rt XIII		

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7411			Ш

-PF (20	019)	
(IIII)	Undistributed Income	(see instructions)

- 1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only.

(a)

Corpus

0

0

(b)

Years prior to 2018

(c)

2018

75,700

75,700

- Excess distributions carryover, if any, to 2019
- **b** Total for prior years a From 2014. **b** From 2015.
- c From 2016. . . .
- d From 2017.
- e From 2018.
- f Total of lines 3a through e.
- 4 Qualifying distributions for 2019 from Part

 - XII, line 4 ▶ \$
- a Applied to 2018, but not more than line 2a
- **b** Applied to undistributed income of prior years (Election required—see instructions).

same amount must be shown in column (a))

c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2019

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 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must

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

6 Enter the net total of each column as

be distributed in 2020 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 2014 not

9 Excess distributions carryover to 2020.

10 Analysis of line 9 a Excess from 2015. . **b** Excess from 2016. . c Excess from 2017. . . . d Excess from 2018. . . e Excess from 2019. . .

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

Subtract lines 7 and 8 from line 6a

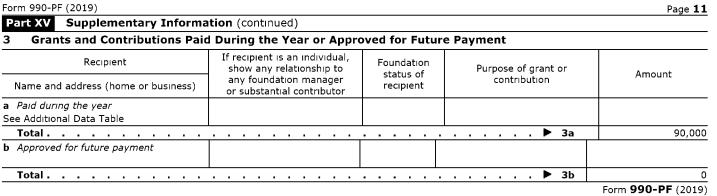
indicated below:

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

c Any submission deadlines MARCH 1 OF EACH CALENDAR YEAR UNLESS THE GRANT REVIEW COMMITTEE SETS OTHERWISE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors SEE ATTACHED COPY OF THE FOUNDATION'S SCHOLARSHIP AND GRANT PLAN



	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
	and contracts from government agencies					
3 Intere	ership dues and assessments					
	ends and interest from securities.			14	38,338	
	ental income or (loss) from real estate				,	
a Debi	t-financed property					
	debt-financed property					
	ental income or (loss) from personal property					
	Investment income					
invent	• •			18	72,892	
	come or (loss) from special events			10	72,032	
10 Gross	profit or (loss) from sales of inventory					
11 Other	revenue a					
	·					
	tal Add columns (b), (d), and (e).		0		111,230	0
	. Add line 12, columns (b), (d), and (e).				3	111,230
(See v	vorksheet in line 13 instructions to verify calcu	lations)				222/200
Part XV	I-B Relationship of Activities to the					
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's exinstructions)					
	· ·					

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharita Exempt Organizations	able	
Did the organ	pization directly or indirectly engage in any of the following with any other organization described in section 501		

Part >	(VII	Exempt Organi		ranst	ers 10 a	anu iransacti	ons and	Keiatio	nsnips with Non	icnaritable	1	
		anization directly or in han section 501(c)(3)	directly enga							on 501	Yes	No
a Trans	sfers fr	om the reporting foun	dation to a n	oncha	rıtable exe	empt organizatio	n of	_				
(1)	Cash.									. 1a(1	.)	No
(2)	Other	assets								. 1a(2	2)	No
b Othe	r trans	actions										
		of assets to a nonchar	•	_						. 1b(1	.)	No
(2)	Purcha	ises of assets from a r	oncharitable	exem	pt organız	zation				1b(2	2)	No
` '		of facilities, equipmen	•							1b(3)	No
		ursement arrangemen								. 1b(4	' 	No
		or loan guarantees.								. 1b(5	-	No
		nance of services or m	•		_					. 1b(6	5)	No
	-	acılıtıes, equipment, n			-					1 <u>c</u>		No
		er to any of the above s, other assets, or ser										
		saction or sharing arra										
	. 1	413.4					. IN D			1.1		
(a) Line N	NO	(b) Amount involved	(c) Name or	noncna	гиаріе ехеі	mpt organization	(a) De	scription of	transfers, transactions,	and sharing ar	rangeme	nts
2a Is the	e found	dation directly or indire	ectly affiliated	d with,	, or relate	d to, one or more	e tax-exer	mpt organ	zations			
descr	ribed ir	n section 501(c) (othei	than section	501(c)(3)) or ı	in section 527? .			🗆 Ye	es 🗹 No		
b If "Ye	es," co	mplete the following s	chedule									
		(a) Name of organization	on		(E	b) Type of organiza	ion		(c) Description	of relationship		
								1				
	Unde	r penalties of perjury,	I declare that	t I hav	/e examin	ed this return, in	cluding ac	companyi	ng schedules and sta	atements, an	d to the	best
	of my	knowledge and belief	, it is true, co									
c:	which	preparer has any kno	wledge			1						
Sign	*	****				2020-02-19		*****		May the IRS return	discuss t	this
Here	_						— b			with the pre	oarer sho	wn
	s	ignature of officer or t	rustee			Date	,	Tıtle		below		п
										(see instr)	Yes	⊔ No
		Print/Type preparer's	name	Prepa	arer's Sigr	nature	Date			PTIN		
									Check if self-	P013	39787	
		AMY A GREER							employed 🕨 🗹	, 013	33,0,	
Paid												
Prepa		Firm's name ► MAG	NOLIA OFFIC	ES LL	С		•		1,	Fırm's EIN ▶4	5-3792	297
Use O	nly		. DOV 4.575 :							CIN P		
		Firm's address ► PC	BOX 16721									
		GF	REENVILLE, S	C 29	606				F	Phone no (86	64) 525	-1485

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, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date sold Date acquired P-Purchase (mo, day, yr) (mo, day, yr) D-Donation FIDELITY FAHCX 2017-01-01 2019-02-20 DIAMOND HILL DIAMX 2017-01-01 2019-02-20 VANGUARD BDC 2015-12-29 2019-10-02 MFS GROWTH MFEIX 2017-01-01 2019-10-02 VANGUARD VTV 2013-05-15 2019-10-02 Ρ CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Gain or (loss) (e) Gross sales price Depreciation allowed Cost or other basis (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 50,543 52,021 -1,478 99,436 62,837 36.599 82,358 76,173 6,185 49,013 46,314 2,699 34,880 22,238 12,642 16,245 16,245 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) **(1)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any -1,47836,599 6.185 2,699 12,642 16,245

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JAMES W KELLETT **PRESIDENT** ٥ 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 MICHAEL P KELLETT 0 0 0 CHAIRMAN, DIRECTOR 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 NANCY K BOATWRIGHT **TREASURER** 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 WILLIAM W KELLETT IV DIRECTOR 0 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 LYDIA W KELLETT 0 0 **SECRETARY** 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 JOSH KELLETT DIRECTOR 0 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 EDEN MARTIN DIRECTOR 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** LANDRUM, SC 29356 PLAYER OWEN DIRECTOR 0 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 WIM KELLETT DIRECTOR 0 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS** RD LANDRUM, SC 29356 MICHAEL P KELLETT JR DIRECTOR 0 0 0 25 C/O N BOATWRIGHT 190 FAIRVIEW **FARMS**

LANDRUM, SC 29356

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			
721 MINISTRIES4 SEMINOLE DRIVE GREENVILLE, SC 29605	PC	CHARITABLE - GENERAL PURPOSE	1,200
CANCER SUPPORT COMMUNITY ATLANTA 5775 PEACHTREE DUNWOODY RD BI DG	PC	CHARITABLE - GENERAL PURPOSE	5,000

ATLANTA 5775 PEACHTREE DUNWOODY RD BLDG C SUITE 225 ATLANTA, GA 30342		PURPOSE	
CHILDREN OF PROMISEPO BOX 123	PC	CHARITABLE - GENERAL	3,750

ATLANTA, GA 30342			
CHILDREN OF PROMISEPO BOX 123	PC	CHARITABLE - GENERAL	3,75

Total .

PRINSBURG, MN 56281		PURPOSE	
CHILDREN OF PROMISEPO BOX 123	PC	CHARITABLE - GENERAL	3,750

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

DEE NORTON CHILD ADVOCACY CENTER 1061 KING STREET CHARLESTON, SC 29403	PC	CHARITABLE - GENERAL PURPOSE	5,000

CHARLESTON, SC 25103			
EAST COOPER COMMUNITY OUTREACH 1145 SIX MILE RD MT PLEASANT, SC 29466	PC	CHARITABLE - GENERAL PURPOSE	2,500
FAITH MEMORIAL CHAPEL	PC	CHARITABLE - GENERAL	3,333

MT PLEASANT, SC 29466		FORFOSE	
FAITH MEMORIAL CHAPEL 11 FAITH CHAPEL ROAD CEDAR MTN, NC 28718	PC	CHARITABLE - GENERAL PURPOSE	3,333

Total .

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
GATEWAY HOUSEPO BOX 4241 GREENVILLE, SC 29608	PC	CHARITABLE - GENERAL PURPOSE	3,000
GHS - KELLETT SCHOLARSHIP ENDOWMENT	PC	CHARITABLE - GENERAL PURPOSE	6,000

recipient

ENDOWMENT 300 E MCBEE AVE GREENVILLE, SC 29601	PC	PURPOSE	6,000
HALOS 4995 LACROSS ROAD SUITE 1250 N CHARLESTON, SC 29406	PC	CHARITABLE - GENERAL PURPOSE	2,500

300 E MCBEE AVE GREENVILLE, SC 29601		PURPOSE	
HALOS 4995 LACROSS ROAD SUITE 1250 N CHARLESTON, SC 29406	PC	CHARITABLE - GENERAL PURPOSE	2,5

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

HANDS ON ATLANTA 600 MEANS STREET SUITE 100 ATLANTA, GA 30318	PC	CHARITABLE - GENERAL PURPOSE	5,000
HUGHES ACADEMY122 DEOYLEY AVE	PC	CHARITABLE - GENERAL	500

HUGHES ACADEMY122 DEOYLEY AVE GREENVILLE, SC 29605	PC	CHARITABLE - GENERAL PURPOSE	500
PLEASANT VALLEY CONNECTION 510 OLD AUGUSTA RD GREENVILLE, SC 29607	PC	CHARITABLE - GENERAL PURPOSE	1,000

· · · · · · · · · · · · · · · · · · ·			
PLEASANT VALLEY CONNECTION 510 OLD AUGUSTA RD GREENVILLE, SC 29607	PC	CHARITABLE - GENERAL PURPOSE	1,000
Total	 	▶ 3a	90,000

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			
SAFE HARABORPO BOX 174 GREENVILLE, SC 29602	PC	CHARITABLE - GENERAL PURPOSE	8,625
CAFE HAVEN FAMILY CHELTED	DC.	CHADITABLE CENEDAL	1 500

SAFE HAVEN FAMILY SHELTER 1234 3RD AVENUE SOUTH NASHVILLE, TN 37210	PC	CHARITABLE - GENERAL PURPOSE	1,500
SALAMA URBAN MINISTRIES	PC	CHARITABLE - GENERAL	3,500

Total	 	▶ 3a	90,000
SALAMA URBAN MINISTRIES 1205 8TH STREET NASHVILLE, TN 37203	PC	CHARITABLE - GENERAL PURPOSE	3,500
NASHVILLE, IN 3/210			

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

recipient

90,000

any foundation manager

Name and address (home or business)

Total .

Traine and dadress (neme or business)	or substantial contributor			
a Paid during the year				
SHAREPO BOX 10204 GREENVILLE, SC 29603		PC	CHARITABLE - GENERAL PURPOSE	1,000
TRANSYLVANIA HABITAT FOR HUMANITY 692 ECUSTA RD BREVARD, NC 28712		PC	CHARITABLE - GENERAL PURPOSE	3,333
WATER MISSIONS INTERNATIONAL PO BOX 71489 N CHARLESTON, SC 29415		PC	CHARITABLE - GENERAL PURPOSE	7,084

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
USC UPSTATE SCHOLARSHIP 800 UNIVERSITY WAY SPARTANBURG, SC 29303	PC	CHARITABLE - GENERAL PURPOSE	1,000
CLEMSON UNIVERSITY SCHOLARSHIP	PC	CHARITABLE - GENERAL	1,000

recipient

CLEMSON UNIVERSITY SCHOLARSHIP BOX 345307 G-08 SIKES HALL CLEMSON, SC 29634	PC	CHARITABLE - GENERAL PURPOSE	1,000
FIRST PRESBYTERIAN CHURCH 200 W WASHINGTON STREET GREENVILLE SC 29604	PC	CHARITABLE - GENERAL PURPOSE	2,000

BOX 345307 G-08 SIKES HALL CLEMSON, SC 29634		PURPOSE	
FIRST PRESBYTERIAN CHURCH 200 W WASHINGTON STREET GREENVILLE, SC 29604	PC	CHARITABLE - GENERAL PURPOSE	2,000

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

recipient

2,500

90,000

any foundation manager

Name and address (home or husiness)

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
SARA COLLINS ELEMENTARY 1200 PARKINS MILL RD GREENVILLE, SC 29607		PC	CHARITABLE - GENERAL PURPOSE	600

CRUPO BOX 628222 ORLANDO, FL 32862	PC	CHARITABLE - GENERAL PURPOSE	
FOUNDATION FOR REFORMED THEOLOGY 4103 MONUMENT AVE	PC	CHARITABLE - GENERAL PURPOSE	

ı	OKLANDO, TE 32002		FORFOSE	
	FOUNDATION FOR REFORMED THEOLOGY 4103 MONUMENT AVE RICHMOND, VA 23230	PC	CHARITABLE - GENERAL PURPOSE	5,000
ı	, ,	i	l .	I

ORLANDO, FL 32862		PURPOSE	
FOUNDATION FOR REFORMED THEOLOGY 4103 MONUMENT AVE	PC	CHARITABLE - GENERAL PURPOSE	5,

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			
LANDRUM UNITED METHODIST CHURCH 225 N HOWARD STREET LANDRUM, SC 29356	PC	CHARITABLE - GENERAL PURPOSE	2,000

LANDROM, SC 29356			1
TRIUNE MERCY CENTER 222 RUTHERFORD STREET GREENVILLE, SC 29601	PC	CHARITABLE - GENERAL PURPOSE	7,500
GRACE CHURCHIOL W MCREE AVE	PC	CHARITABLE - GENERAL	2 000

222 RUTHERFORD STREET GREENVILLE, SC 29601		PURPOSE	
GRACE CHURCH101 W MCBEE AVE GREENVILLE, SC 29601	PC	CHARITABLE - GENERAL PURPOSE	2,000

90,000

▶ 3a

GREENVILLE, SC 29601			
GRACE CHURCH101 W MCBEE AVE GREENVILLE, SC 29601	PC	CHARITABLE - GENERAL PURPOSE	2,00

Total .

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

Recipient

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

Recipient

Recipient

Amount

Show any relationship to status of contribution

recipient

90,000

any foundation manager

Name and address (home or business)

GREENVILLE, SC 29601

Total.

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
CLEMENT'S KINDNESS 630 E WASHINGTON STREET		PC	CHARITABLE - GENERAL PURPOSE	2,575

efile GRAPHIC print - DO NOT P	ROCESS As F	iled Data -		D	LN: 93491066012700		
TY 2019 Accounting Fe	es Schedul	е					
	Name: KEL	LETT FAMI	LY FOUNDATI	ON			
	C/O N BOATWRIGHT						
	EIN: 57-1088077						
Category	Amount	Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

675

675

1,150

ACCOUNTING FEES

efile GRAPHIC	print - DO NOT PI	ROCESS As Filed D	Data -	D	LN: 93491066012700

TY 2019 General Explanation Attachment

Name: KELLETT FAMILY FOUNDATION

C/O N BOATWRIGHT

EIN: 57-1088077

General Explanation Attachment

		1	
Identifier	Return Reference	Explanation	
1	RESTRICTIONS AND LIMITATIONS ON AWARDS	FORM 990- PF PART XV	KELLETT FAMILY FOUNDATION SCHOLARSHIP AND GRANT PLANTHE KELLETT FAMILY FOUNDATION SCHOLARSHIP IS INTENDED TO RECOGNIZE A LANDRUM HIGH SCHOOL STUDENT WHO HAS DEMONSTRATED CURRENT AND ON-GOING COMMITMENT TO THEIR COMMUNITY BY PERFORMING UNPAID VOLUNTEER SERVICE IN THE LANDRUM AREA SCHOLARSHIP REQUIREMENTS-HIGH SCHOOL SENIOR AT LANDRUM HIGH SCHOOL IN LANDRUM, SC-BE ELIGIBLE TO ATTEND A TWO- OR FOUR- YEAR COLLEGE OR UNIVERSITY WITH A FULL COURSE OF STUDY-BE A LEGAL U. S. RESIDENTSUBMIT REQUIRED DOCUMENTATION BY MARCH 1ST TO THE LHS GUIDANCE OFFICE OR MAIL DIRECTLY TO THE FOLLOWING NANCY BOATWRIGHT190 FEILERS GUIDANCE OFFICE OR MAIL DIRECTLY TO THE FOLLOWING NANCY BOATWRIGHT190 FEILERS GUIDANCE OFFICE OR MAIL DIRECTLY TO THE FOLLOWING NANCY BOATWRIGHT190 FEILERS FORWIS AND SUCH INFORMATION AS WHY THEY FEEL VOLUNTEEMENTS - LETTER, PERSONAL STATEMENT OR BRIEF ESSAY FROM THE APPLICANT ABOUT THEIR SERVICE EFFORTS AND SUCH INFORMATION AS WHY THEY FEEL VOLUNTEERISM IS IMPORTANT, HOW IT HAS IMPACTED THEIR LIFE, WHY THEY DO VOLUNTEER WORK, ETC - LETTER(S) OF RECOMMENDATION FROM THE ORGANIZATION WHERE THE VOLUNTEER WORK IS PERFORMED LETTER SHOULD INCLUDE INFORMATION ABOUT LENGTH OF SERVICE, WORK PERFORMED AND ANY OTHER INFORMATION THAT WOULD BE USEFUL IN EVALUATION OF THE APPLICANT - LETTER OF RECOMMENDATION MUST BE FROM A PERSON THAT IS AT LEAST 21 YEARS OF AGE AND MAY NOT BE A PARENT, GUARDIAN OR FAMILY MEMBERVOLUNTEER SERVICES MUST BE HELPING NON-FAMILY MEMBERSAWARD SPECIFICS-TOTAL AMOUNT AWARDED \$1,000 (ONE-TIME)-ONE TIME AWARD PAY ABLE DIRECTLY TO THE SCHOOL DESIGNATED BY THE RECIPIENT SCHOOL ASHIP RECIPIENT MUST PROVIDE STUDENT ID NUMBER FOR REMITTANCE OF FUNDS TO SCHOOL-SCHOLARSHIP RECIPIENT MUST PROVIDE STUDENT ID NUMBER FOR THE RECIPIENT SCHOOL SCHOOL-SCHOLARSHIP RECIPIENT MUST PROVIDE STUDENT ID NUMBER FOR THE SCHOOL DURING THE ACADEMIC YEAR FOLLOWING THEIR GRADUATION-FAILURE TO COMPLY WITH ANY OF THE ABOVE REQUIREMENT IN A TIMELY MANNER MAY RESULT IN FORFEITURE OF THE SCHOLARSHIP -RECIPIENT SELECTED BY THE KELLE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491066012700
TY 2019 Investments Corpora	te Bonds Schedule	
	KELLETT FAMILY FOUNDATION C/O N BOATWRIGHT	
	57-1088077	

Investments Corporate Bonds Schedule | Name of Bond | End of Year Book | End of Year Fair | Value | Market Value |

281,724

283,633

NFP CORP SVC

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491066012700
TY 2019 Investments Corpora	ate Stock Sche	dule	
Name:	KELLETT FAMILY	FOUNDATION	
	C/O N BOATWRIG	6HT	

EIN: 57-1088077 Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
NFP CORP SVC	1,454,212	1,733,569

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491066012700	
TY 2019 Other Expenses Sche	dule			_	
Name:	KELLETT FAMIL	Y FOUNDATION			
	C/O N BOATWRIGHT				
EIN:	57-1088077				
Other Expenses Schedule		,			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INVESTMENT MGT FEES	18,725	9,362		9,363	

POSTAGE

efile GRAPHIC print - DO NOT PRO	CESS	As Filed Data		DL	N: 93491066012700
TY 2019 Taxes Schedule	1				
P	(KELLETT FAN C/O N BOAT 57-1088077		I	
Category	Δ	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX		4,520	4,520		0