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DLN: 93491011002121

2019

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

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

Inspection

Open to Public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019, or tax year beginning 05-01-2019 , and ending 04-30-2020 A Employer identification number J EDWIN TREAKLE FOUNDATION INC 54-6051620 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) BOX 1157 (804) 693-0881 City or town, state or province, country, and ZIP or foreign postal code GLOUCESTER, VA 23061 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply: **D 1.** Foreign organizations, check here....... 2. Foreign organizations meeting the 85% test, check here and attach computation ... Amended return ☐ Final return Address change ☐ Name change If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation **H** Check type of organization: under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method: ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col. (c), under section 507(b)(1)(B), check here ☐ Other (specify) line 16) ▶\$ 5,589,999 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books equal the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check \blacktriangleright lacksquare if the foundation is **not** required to attach 2 2.633 2.633 3 Interest on savings and temporary cash investments Dividends and interest from securities 131,500 131,500 Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 79,233 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 213,366 213,366 13 Compensation of officers, directors, trustees, etc. 53,000 20,001 32,999 14 Other employee salaries and wages 3,453 1,381 2,072 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 9,370 0 Accounting fees (attach schedule) 9,370 9 Other professional fees (attach schedule) 33,340 33,340 0 [چە 2,928 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 1.650 825 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 9.335 4.667 4,668 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 113,076 69,584 40,564 225,000 225,000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 338,076 69,584 265,564 27 Subtract line 26 from line 12: Excess of revenue over expenses and -124,710 disbursements Net investment income (if negative, enter -0-) 143,782 Adjusted net income (if negative, enter -0-) . . .

5,360,845

6,071,430

4,311

4,326

6,067,104

6,067,104

6,071,430

502,139

5 **9%**

4,883,537

5 589 999

11

2,928

2,939

5,587,060

5,587,060

5,589,999

6,067,104

-124,710

5,942,394

5,587,060 Form **990-PF** (2019)

355,334

1

2

3

4

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465,086

4,883,537

5.589.999

465,086

	4
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	6
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ß	8
Assets	9
Ă	10

C 11

12

13

14

15

16

17

18

19 20

21

22 23

24

25

28

30

Part III

2

3

Liabilities

Fund Balances

ō 26

Assets 27

Net 29 Prepaid expenses and deferred charges . . .

Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule)

Investments—other (attach schedule)

Less: accumulated depreciation (attach schedule) ► 5,049

Accounts payable and accrued expenses

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

Analysis of Changes in Net Assets or Fund Balances

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

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

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

Foundations that follow FASB ASC 958, check here

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

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . .

Net assets with donor restrictions . . .

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) -

Enter amount from Part I, line 27a

Less: allowance for doubtful accounts ▶ Inventories for sale or use . . .

Land, buildings, and equipment: basis

instructions. Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Grants payable

Receivables due from officers, directors, trustees, and other

disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) ▶

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

Investments—corporate bonds (attach schedule)

Page **3**

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(m	(c) ate acquired o., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Table	9					
b						
c						
d						
e						
	(f)		(g)			h)
(e) Gross sales price	Depreciation allowed (or allowable)		other basis pense of sale		Gain o	r (loss)) minus (g)
a See Additional Data Table	e					
b						
c						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69			I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) s of col. (i) l. (j), if any	cc	ol. (k), but not	h) gain minus less than -0-) or om col.(h))
a See Additional Data Table		3701 00	()// !! all/			,
b						
c						
d						
 e						
	yain or (loss) as defined in sections rt I, line 8, column (c) (see instructi	. ,		3		79,233
Part V Qualification L	Jnder Section 4940(e) for Re	educed Tax on Ne	t Investment	, Income		
(For optional use by domestic p	rivate foundations subject to the se	ction 4940(a) tax on n	et investment inc	ome.)		
if section 4940(d)(2) applies, le	eave this part blank.					
	e section 4942 tax on the distributa ot qualify under section 4940(e). Do			od?	∐ Y€	es 🔽 No
	nount in each column for each year;	see instructions befor	e making any ent	ries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital	ble-use assets	(col.	(d) Distribution rati . (b) divided by c	
2018	341,930		5,791,397			0.059041
2017	449,523		6,032,826			0.074513
2016	440,396		5,778,641			0.076211
2015	437,847		5,891,143			0.074323
2014	442,560		6,334,436			0.069866
2 Total of line 1, column (d	•			2		0.353954
number of years the foun	for the 5-year base period—divide dation has been in existence if less	than 5 years	i . <u> </u>	3		0.070791
	ncharitable-use assets for 2019 fron	•		4		5,410,622
	(40) (50 + 7 1) (271)		· · · · · · -	5		383,023
	ent income (1% of Part I, line 27b)		· · · · · -	6		1,438
			├	7		384,461
If line 8 is equal to or gre	ons from Part XII, line 4 ,			B sing a 1°	% tax rate. Se	265,564 e the Part VI
instructions.						

Pai	Statements Regar	aing	Activities for Which	Form 4/20 May Be	Requirea (continuea)			
5a	During the year did the foundation	pay o	r incur any amount to:				Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisla	ation (section 4945(e))?	☐ Yes 🗸	No		
	(2) Influence the outcome of any s	specific	public election (see sect	ion 4955); or to carry				
	on, directly or indirectly, any v	oter re	gistration drive?		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individua	ilar purposes?	☐ Yes ✓	No				
(4) Provide a grant to an organization other than a charitable, etc., organization described								
in section 4945(d)(4)(A)? See instructions								
	(5) Provide for any purpose other	than r	eligious, charitable, scient	tific, literary, or				
	educational purposes, or for th		,		I YES IVI	No		
b	If any answer is "Yes" to $5a(1)-(5)$							
	Regulations section 53.4945 or in a	a curre	nt notice regarding disast	ter assistance? See instr	uctions	5b		
	Organizations relying on a current	notice	regarding disaster assista	ance check here	▶ □			
С	If the answer is "Yes" to question 5			·				
	tax because it maintained expendit	ure re	sponsibility for the grant?	?	· · □ Yes □	No		
	If "Yes," attach the statement requ	ired b	Regulations section 53.4	4945–5(d).				
5a	Did the foundation, during the year	r, rece	ive any funds, directly or	indirectly, to pay premiu	ims on			
	a personal benefit contract?				· 🗌 Yes 🗸	No		
b	Did the foundation, during the year	r, pay	premiums, directly or ind	irectly, on a personal ber	nefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.							
7a	At any time during the tax year, wa	as the	foundation a party to a p	rohibited tax shelter trar	nsaction? Yes	No		
b	If "Yes", did the foundation receive	any p	roceeds or have any net	income attributable to th		7b		
3	Is the foundation subject to the sec	ction 4	960 tax on payment(s) o	f more than \$1,000,000	in remuneration or			
	excess parachute payment during t	the ye	ar?		· · 🗌 Yes 🗸	No L		
	Information About	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, Highly Paid Er		,	
Par	and Contractors			•	, , ,		•	
1	List all officers, directors, truste	es, fo	undation managers an	d their compensation.	See instructions			
		(b) Title, and average	(c) Compensation (If	(d) Contributions to	(e) Expe	nse acc	ount
	(a) Name and address		hours per week	not paid, enter	employee benefit plans and		illowani	
VNITI	HIA B HORSLEY	CECD	devoted to position ETARY & GRANT ADMIN	-0-)	deferred compensation			
	WELLFORD LANE	8.00	ETART & GRANT ADMIN	17,000	C	'		0
	ICESTER, VA 23061							
ANC'	Y POWELL		PRESIDENT AND TREASUR	17,000	C			0
	OX 854	8.00						
	S CREEK, VA 23035	20.50	TREAT AND SOUNDATION A					
	RT A MAY	1.00	IDENT AND FOUNDATION M	17,000	C)		0
	PINE HALL ROAD IEWS, VA 23109							
	ERBYLA	DIRE	CTOR	2,000	C			0
	OX 465	0.25		_,,,,,				•
	IEWS, VA 23109							
2	Compensation of five highest-pa	aid en	iployees (other than th	nose included on line 1		ne, enter `	'NONE	<u>"</u>
'a)	Name and address of each employee	bica e	(b) Title, and average		(d) Contributions to employee benefit	(e) Exper	NED 3000	unt
(a)	more than \$50,000	paid	hours per week	(c) Compensation	plans and deferred	other al		
			devoted to position		compensation			
ONE	E							
ota	I number of other employees paid o	ver \$5	0.000.		 •			0
		. υ. ψυ	-,				O DE	

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	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 produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form 990-PF (2019)

5

6

7

1a

1b

2

3a 3b

4

5

267.655

267.655

265,564

265.564

265,564

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Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

income. Enter 1% of Part I, line 27b. 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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

5

6

1

2

3

4

5

b

Part XII

a From 2014.

e From 2018.

f Total of lines 3a through e.

d Applied to 2019 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2019.

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

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

Subtract lines 7 and 8 from line 6a

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. . .

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract 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 —see instructions 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 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

indicated below:

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

b From 2015. . . . c From 2016. . .

d From 2017. . . .

265,564

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2,091

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Form 990-PF (2	019)
Part XIII	Ur

2

90-PF	(2019
XIII	U

art XIII	Undistributed
Distributab	le amount for 2019 f
Undistribut	ed income, if any, as
Enter amo	unt for 2019 only

from Part XI, line 7 s of the end of 2019: a Enter amount for 2018 only.

b Total for prior years: 20______, 20______ Excess distributions carryover, if any, to 2019:

Income (see instructions)

133.846 149,394 156.612

145.920 58,710

(a)

Corpus

644,482

2,091

642,391

131.755

510,636

149.394 156,612

145.920

58.710

(b)

Years prior to 2018

(c)

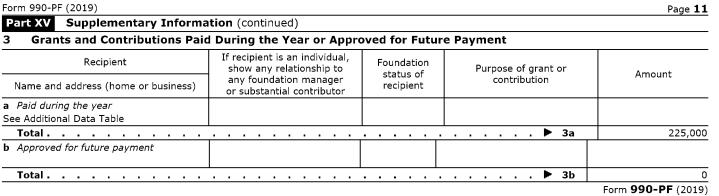
2018

Page **10**

1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organization	on is a private oper	ating foundation des	scribed in section \Box] 4942(j)(3) or □] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	1	Prior 3 years	,	
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed	(-,	(-,	(-)	(,	
b	85% of line 2a					
	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed.					
С	"Support" alternative test—enter:					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income	(Complete this		foundation had	 ¢E 000 ou move	<u> </u>
Pa	rt XV Supplementary Information assets at any time during th	e year-see inst		Toundation nad	\$5,000 or more	ın
1	Information Regarding Foundation Man- List any managers of the foundation who have		than 2% of the tota	l contributions receiv	ved by the foundatio	n
-	before the close of any tax year (but only if					
b	List any managers of the foundation who ow ownership of a partnership or other entity)				arge portion of the	
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Pro	ograms:		
	Check here ▶ ☐ if the foundation only mak	es contributions to :	oreselected charitab	le organizations and	does not accept	
	unsolicited requests for funds. If the founda					
	other conditions, complete items 2a, b, c, a	nd d. See instructior	ıs			
а	The name, address, and telephone number of	or e-mail address of	the person to whom	n applications should	be addressed:	
	MR ROBERT A MAY PRESIDENT					
	BOX 1157 GLOUCESTER, VA 23061					
	(804) 693-0881					
b	The form in which applications should be sul	omitted and informa	tion and materials t	hey should include:		
_	APPLICATION SUPPLIED BY FOUNDATION					
C	Any submission deadlines:					
	JANUARY 1 TO APRIL 30 EACH YEAR					

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



ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section		(e) Related or exempt
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a					
b					
d					
e					
f					
q Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	2,633	
Dividends and interest from securities			14	131,500	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
inventory			10	70 222	
Net income or (loss) from special events:			18	79,233	
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b					
с					
d					
u					
e					
e		0		213,366	(
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		0	1	213,366 3	213,366
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcu	lations.)				
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's axis.	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation's explain the foundation's explain the foundation the foundat	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplisi income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
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Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation's explain the foundation's explain the foundation the foundat	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation's explain the foundation's explain the foundation the foundat	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the second se	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	lations.) le Accomplis income is report	hment of Exempted in column (e) of	pt Purposes F Part XVI-A contribu	3	

٠.	>> (20	/			
		Information Regarding Transfers To and Transactions and Relationships With Noncharit	able		
i	Part XVII Exempt Organizations				
L	Did the organ	nization directly or indirectly engage in any of the following with any other organization described in section 501			

1		organization directly or ir er than section 501(c)(3)						ion 501	Yes	No
а	Transfer	s from the reporting four	ndation to a no	oncharitable e	xempt organization	of:				
_										No
	` '	ner assets.						. 1a(1)		No
h		ansactions:						(-)		
-		es of assets to a nonchar	ritable evemnt	organization				1b(1)		No
		rchases of assets from a		-				1b(2)		No
		ntal of facilities, equipme						1b(2)		No
		mbursement arrangemen	· ·					. 1b(3)		No
								. 1b(4)		
		ans or loan guarantees.						— · · ·		No
		ormance of services or m	•	_				. 1b(6)		No
	-	of facilities, equipment,		•						No
	of the g	nswer to any of the above bods, other assets, or sel ransaction or sharing arra	vices given by	the reporting	g foundation. If the	foundation receive	ed less than fair ma	rket value		
(a)	Line No.	(b) Amount involved	(c) Name of r	noncharitable ex	empt organization	(d) Description of	transfers, transactions	s, and sharing arrai	ngement	ts
2a	Is the fo	oundation directly or indir	ectly affiliated	l with, or relat	ed to, one or more	tax-exempt organ	izations			
	describe	d in section 501(c) (othe	r than section	501(c)(3)) or	in section 527? .		🗆 Y	'es 🗹 No		
b	If "Yes,"	complete the following s	schedule.							
	·	(a) Name of organizati	on		(b) Type of organizati	on	(c) Description	n of relationship		
		nder penalties of perjury,								
		my knowledge and belie	, ,	rrect, and con	nplete. Declaration	of preparer (other	than taxpayer) is b	ased on all infor	mation	of
Si.	gn "	nich preparer has any kn	owieage.		1			Manually IDC 1		
		*****			2021-01-11	*****		May the IRS dis return	scuss th	IS
П	ere	-						with the prepar	er show	'n
		Signature of officer or t	trustee		Date	Title		below		
		g						(see instr.) 🗹	Yes □	No
		Print/Type preparer'	s name	Preparer's Sid	nature	Date		PTIN		
		Tring Type preparer	- Harrie	. reparer 5 Dig	g. iacai c	Date	Check if self-			
							employed ▶ □	P00585	830	
D a	ıid	PETER N THACKER	R JR			2021-01-07	. ,			
_		CPA								
	epare		NER KIRKHAM	KEEL & ROBE	ERTSON PC			Firm's EIN ▶54	09871	21
٤٠	e Onl	-	012 MONUMEN	IT AVENUE C	ITTE 300					
		riiiii s address 🚩 - 50	OIZ MONUMEN	NI AVENUE SU	11E 300			B1 (5-1)		
		R	ICHMOND, VA	232303632				Phone no. (804)	288-0	1496

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) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 2010-02-04 2019-05-03 2591.317 SHS JOHN HANCOCK FDS III DISCPILINED VALUE MID CAP FUND 1987.29 SHS JOHN HANCOCK FDS III DISCPILINED VALUE MID CAP FUND Ρ 2010-06-04 2019-05-03 829.549 SHS JOHN HANCOCK FDS III DISCPILINED VALUE MID CAP FUND Р 2010-07-16 2019-05-03 1250 SHS UNDISCOVERED MANAGERS FDS BEHAVIORAL VALUE FUND Ρ 2015-10-19 2019-06-13 250 SHS UNDISCOVERED MANAGERS FDS BEHAVIORAL VALUE FUND Ρ 2015-12-01 2019-06-13 Ρ 1000 SHS ISHARES CORE MSCI EMERGING MKTS 2017-04-05 2019-06-07 Ρ 370 SHS ISHARES CORE MSCI EMERGING MKTS 2017-11-09 2019-06-07 Р 2019-06-07 485 SHS ISHARES CORE MSCI EMERGING MKTS 2018-04-01 Ρ 2015-10-21 450 SHS ISHARES MSCI EAFE ETF 2019-06-07 250 SHS ISHARES MSCI EAFE ETF Ρ 2016-03-14 2019-06-07 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Cost or other basis (e) Gross sales price Depreciation allowed Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 53.692 22,881 30.811 41,177 18,760 22,417 17,188 7,706 9,482 75,150 71.975 3,175 15,030 15,060 -30 48,325 841 49,166 18,191 20,752 -2,56123,845 25,472 -1,62729,085 27,566 1,519 16,158 13.982 2,176 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. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 30,811 22,417 9,482 3,175 -30 841 -2,561-1,6271,519 2,176

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) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation 500 SHS ISHARES MSCI EAFE ETF Р 2016-05-17 2019-06-07 1125 SHS ISHARES MSCI EAFE ETF Ρ 2016-11-15 2019-06-07 455 SHS ISHARES MSCI JAPAN ETF NEW Р 2017-06-13 2019-05-06 915 SHS ISHARES MSCI JAPAN ETF NEW Ρ 2017-06-13 2019-05-06 485 SHS ISHARES MSCI JAPAN ETF NEW Ρ 2017-10-11 2019-05-06 Ρ 275 SHS ISHARES MSCI JAPAN ETF NEW 2017-11-01 2019-05-06 Ρ 250 SHS 3M CO 2015-02-10 2019-05-23 Р 2019-05-23 280 SHS AT&T INC 2018-07-19 550 SHS DOWDUPONT INC Ρ 2017-09-01 2019-05-23 512 SHS DOWDUPONT INC Ρ 2017-09-01 2019-05-23 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) 32,317 28.832 3,485 72,713 64,030 8,683 25,138 24,845 293 50,553 49.936 617 26,796 27,136 -340 -864 15,193 16,057 41,797 41,532 265 9,017 9,118 -101 17,354 10,985 6,369 19,174 -3,019 16,155 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. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 3,485 8,683 293 617 -340 -864 265 -101 10,985 -3,019

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) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation Р 2018-10-01 2019-05-23 40 SHS GARRETT MOTION INC 25 SHS GOLDMAN SACHS GROUP INC Ρ 2015-12-03 2019-06-14 75 SHS GOLDMAN SACHS GROUP INC Р 2016-05-17 2019-06-14 100 SHS GOLDMAN SACHS GROUP INC Ρ 2016-08-02 2019-06-14 250 SHS RAYTHEON CO Ρ 2010-10-14 2020-04-03 Ρ 100 SHS RAYTHEON CO 2013-07-25 2020-04-03 Ρ 66 SHS RESIDEO TEHCNOLOGIES INC 2018-10-29 2019-05-23 Р 2005-09-03 100 SHS UNITED TECHNOLOGIES CORP. 2020-04-03 Ρ 2006-01-05 200 SHS UNITED TECHNOLOGIES CORP. 2020-04-03 50 SHS UNITED TECHNOLOGIES CORP. Ρ 2016-08-02 2020-04-03 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) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 716 198 518 4,762 4,764 -2 14,286 11,745 2,541 19,048 15,595 3,453 11,360 11,360 0 4,544 6,975 -2,431 1,455 519 936 4,391 4,649 -258 8,782 11,202 -2,4202,195 5,307 -3,112 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. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 518 -2 2,541 3,453 -2,431 936 -258 -2,420-3,112

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 acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation 1000 SHS WEYERHAEUSER CO Ρ 2016-01-14 2019-05-23 250 SHS WEYERHAEUSER CO Ρ 2016-05-17 2019-05-23 50 SHS PEPSICO INC Ρ 2015-06-03 2020-04-30 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Gain or (loss) Depreciation allowed Cost or other basis (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) (f) 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 Excess of col. (i) (i) F.M.V. as of 12/31/69 Adjusted basis **(I)** Losses (from col.(h))

Complete only for posets showing gain in column (h) and symbol by the foundation on 13/31/60 Coinc (Col. (h) asia minus							
Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I							
50,000		49,865	135				
5,865		7,722	-1,857				
23,461		27,938	-4,477				

(k) over col. (j), if any

-4,477 -1,857 135

(i) as of 12/31/69

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			
ABINGDON VOLUNTEER FIRE AND RESCUE PO BOX 9	EXEMPT 501 (C) (3) P	PAY FOR EQUIPMENT, TRAINING, AND MAINTENANCE	36,000

BENA, VA 23018			
ANIMAL CARE SOCIETYPO BOX 121 MATHEWS, VA 23109	(C) (3) P	HELP PET OWNERS WITH EMERGENCY VET BILLS AND PROVIDE LOW-COST SPAY/NEUTER	3,000

ANIMAL CARE SOCIETYPO BOX 121 MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	HELP PET OWNERS WITH EMERGENCY VET BILLS AND PROVIDE LOW-COST SPAY/NEUTER	3,00
ANTIOCH BAPTIST CHURCH	NO IRS	MAINTENANCE OF CEMETARY	50

MATHEWS, VA 23109	(C) (3) P	EMERGENCY VET BILLS AND PROVIDE LOW-COST SPAY/NEUTER	
ANTIOCH BAPTIST CHURCH	NO IRS	MAINTENANCE OF CEMETARY	50

		SPAY/NEUTER	
ANTIOCH BAPTIST CHURCH PO BOX 124 110 ANTIOCH ROAD	NO IRS RULINGS	MAINTENANCE OF CEMETARY	500

225,000

3a

NTIOCH BAPTIST CHURCH	NO IRS	MAINTENANCE OF CEMETARY	50
O BOX 124 110 ANTIOCH ROAD	RULINGS		
USAN, VA 23163			

PO BOX 124 110 ANTIOCH ROAD	RULINGS	
SUSAN, VA 23163		

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 **BAY AGING** EXEMPT 501 FUND TRANSPORTATION FOR 4,000 5306 OLD VIRGINIA STREET P O BOX (C) (3) P ELDERLY, DELIVER MEALS ON 610 WHEELS, AND HELP FUND

URBANNA, VA 23175			BATHROOMS FOR GLOUCESTER ADULT DAY CARE	
BOYS & GIRLS CLUBS OF THE VIRGINIA PENINSULA 11825 ROCK LANDING DRIVE CHESAPEAKE BUILDING NEWPORT NEWS, VA 23606	l l	EXEMPT 501 (C) (3) P	PROVIDE GENERAL OPERATING FUNDS FOR MATHEWS AND GLOUCESTER CLUBS TO SERVE YOUTH	2,000

11825 ROCK LANDING DRIVE CHESAPEAKE BUILDING NEWPORT NEWS, VA 23606		GLOUCESTER CLUBS TO SERVE YOUTH	
CHRISTOPHER NEWPORT UNIVERSITY EDUCATIONAL FOUNDATION 1 AVENUE OF THE ARTS		PROVIDE SCHOLARSHIPS FOR GLOUCESTER AND MATHEWS STUDENTS	5,000

▶ 3a

225,000

NEWPORT NEWS, VA 236063072

Total . .

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

PO BOX 112 GLOUCESTER POINT, VA 23062 (C) (3) P PHYSICALLY CHALLEN PEOPLE WITH PROSTH				a Paid during the year
OTHER NEEDS	1,000	ASSIST MENTALLY AND PHYSICALLY CHALLENGED PEOPLE WITH PROSTHESES AND OTHER NEEDS	121112211	PO BOX 112

		E)/E14DE E04		
FIRST BAPTIST CHURCHPO BOX 84 MATHEWS, VA 23109	1	(C) (3) P	FUND COMMUNITY EVENT FOR SCHOOL KIDS AND FREE HEALTH CHECK EVENT	
			OTHER NEEDS	

MATHEWS, VA 23109	(C) (3) P	SCHOOL KIDS AND FREE HEALTH CHECK EVENT	
FOODBANK OF THE VIRGINIA PENSINSULA	EXEMPT 501 (C) (3) P	PROVIDE FOOD FOR NEEDY IN GLOUCESTER AND MATHEWS	5,0

MATHEWS, VA 23109	(C)	, (-, -	SCHOOL KIDS AND FREE HEALTH CHECK EVENT	
FOODBANK OF THE VIRGINIA PENSINSULA			PROVIDE FOOD FOR NEEDY IN GLOUCESTER AND MATHEWS	5,00

			THE RETURN OF TECK EVENT	
FOODBANK OF THE VIRGINIA PENSINSULA 2401 ALUMINUM AVENUE HAMPTON, VA 23661		EXEMPT 501 (C) (3) P	PROVIDE FOOD FOR NEEDY IN GLOUCESTER AND MATHEWS	5,000
	l .			

500

225,000

За

FOODBANK OF THE VIRGINIA	EXEMPT 501	PROVIDE FOOD FOR NEEDY IN	5,0
PENSINSULA	(C) (3) P	GLOUCESTER AND MATHEWS	
2401 ALUMINUM AVENUE			
HAMPTON, VA 23661			

LINSTINSOLA	1(0)	(3) 1	OLOGCESTER AND MATHEMS	
401 ALUMINUM AVENUE				
AMPTON, VA 23661				

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

a Daid during the year

Total .

a raid during the year			
GIRL SCOUT COUNCIL OF COLONIAL COAST 912 CEDAR ROAD CHESAPEAKE, VA 23322	EXEMPT 501 (C) (3) P	CREATE STEM CABIN AND BUY STEM EQUIPMENT FOR CAMP BURKE'S MILL POND	2,000
CLOUGESTER COUNTY 4 LIPO ROY 4 EC	EVENABE FOA	DAY FOR COURT ARCHER	2 000

GLOUCESTER COUNTY 4-HPO BOX 156 GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	PAY FOR SCHOLARSHIPS, COUNSELOR TRAINING, FEES, AND TRANSPORTATION TO AND FROM 4-H CAMP	3,000
GLOUCESTER COUNTY PUBLIC	EXEMPT 501	FUND ENTRY FEES FOR	1,000

		FROM 4-H CAMP	
GLOUCESTER COUNTY PUBLIC SCHOOLS EDUCATIONAL FOUNDATION 6099 TC WALKER ROAD GLOUCESTER, VA 23061		FUND ENTRY FEES FOR STUDENTS TO PARTICIPATE IN STATE AND NATIONAL COMPETITIONS	1,000

▶ 3a

225,000

		FROM 4-H CAMP	
GLOUCESTER COUNTY PUBLIC SCHOOLS EDUCATIONAL FOUNDATION 6099 TC WALKER ROAD GLOUCESTER VA 23061		FUND ENTRY FEES FOR STUDENTS TO PARTICIPATE IN STATE AND NATIONAL COMPETITIONS	1,00

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				
GLOUCESTER FAMILY YMCA		EXEMPT 501	SUPPORT THEIR PROGRAMS IN	2,000

O BOX 1485 LOUCESTER, VA 23061	(C) (3) P	GLOUCESTER	
LOUCESTER HOUSING PARTNERSHIP	EXEMPT 501 (C) (3) P	FUND PROJECTS TO HELP NEEDY	

GLOUCESTER HOUSING PARTNERSHIP NC P O BOX 772 HAYES, VA 23072	EXEMPT 501 (C) (3) P	FUND PROJECTS TO HELP NEEDY	
GLOUCESTER VOLUNTEER FIRE AND	EXEMPT 501	REPLACE 6 LIFE PAK	

Total .

HAYES, VA 23072			
GLOUCESTER VOLUNTEER FIRE AND RESCUE SQUAD P O BOX 1417 6595 MAIN STREET	(C) (3) P	REPLACE 6 LIFE PAK MONITOR/DEFIBS THAT COST \$30,415.20 PER UNIT	36,000

6,000

225,000

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GLOUCESTER VOLUNTEER FIRE AND RESCUE SQUAD P O BOX 1417 6595 MAIN STREET GLOUCESTER, VA 23061		REPLACE 6 LIFE PAK MONITOR/DEFIBS THAT COST \$30,415.20 PER UNIT	36,000

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

a Paid during the year			
GLOUCESTER-MATHEWS CARE CLINIC 6031 INDUSTRIAL DRIVE GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	EXPAND AND SUPPORT NURSING PROGRAM	10,000

,			1
GLOUCESTER-MATHEWS HUMANE SOCIETY	EXEMPT 501 (C) (3) P	FUND REPLACEMENT OF INDUSTRIAL DRYER	
6620 JACKSON LANE GLOUCESTER, VA 23061			

GLOUCESTER-MATHEWS HUMANE SOCIETY 6620 JACKSON LANE GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	FUND REPLACEMENT OF INDUSTRIAL DRYER	4,000
GWYNN'S ISLAND CIVIC LEAGUE FOR GWYNN'S ISLAND CEMETARY FUND	EXEMPT 501 (C) (3) P	REMOVE BRUSH AND ROOTS, AND REPAIR TOPS OF TOMB	500

SOCIETY 6620 JACKSON LANE GLOUCESTER, VA 23061	(C) (3) P	INDUSTRIAL DRYER	
GWYNN'S ISLAND CIVIC LEAGUE FOR GWYNN'S ISLAND CEMETARY FUND		REMOVE BRUSH AND ROOTS, AND REPAIR TOPS OF TOMB	50

GLOUCESTER, VA 23061			
GWYNN'S ISLAND CIVIC LEAGUE FOR GWYNN'S ISLAND CEMETARY FUND	l .	REMOVE BRUSH AND ROOTS, AND REPAIR TOPS OF TOMB	500
PO BOX 313		STONES	

·			
WYNN'S ISLAND CIVIC LEAGUE FOR WYNN'S ISLAND CEMETARY FUND D BOX 313	EXEMPT 501 (C) (3) P	REMOVE BRUSH AND ROOTS, AND REPAIR TOPS OF TOMB STONES	5

WYNN, VA 23066 Total		▶ 3a	225,000
O BOX 313	(C) (3) P	STONES	

GWYNN, VA 23066	STONE	:5
Total		▶ 3a 225

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

	or substantial continuator			
a Paid during the year				
HABITAT FOR HUMANITY OF GLOUCESTERMATHEWS 4910 GEORGE WASHINGTON MEMORIAL HIGHWAY HAYES, VA 23072		EXEMPT 501 (C) (3) P	REMODEL 2 HOMES WITH FLOORS, WINDOWS, BATHROOM, AND DOORS	2,000

HAYES, VA 23072			
HANDS ACROSS MATHEWSPO BOX 1301 MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	HELP NEEDY FAMILIES WITH FOOD, CLOTHING, SHELTER, MEDICATIONS, FUEL, UTILITIES, RENT, HOME REPAIRS	6,000

MATHEWS, VA 23109	() ()	FOOD, CLOTHING, SHELTER, MEDICATIONS, FUEL, UTILITIES, RENT, HOME REPAIRS	
HAYNES CEMETERY INC 1745 FITCHETTS WHARF ROAD MOON VA 23119	EXEMPT 501 (C) (3)	ADD TO PERPETUAL CARE FUND TO MAINTAIN CEMETERY	500

▶ 3a

225,000

,		MEDICATIONS, FÚEL, UTILITIES, RENT, HOME REPAIRS	
HAYNES CEMETERY INC 1745 FITCHETTS WHARF ROAD MOON, VA 23119	EXEMPT 501 (C) (3)	ADD TO PERPETUAL CARE FUND TO MAINTAIN CEMETERY	50

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

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

recipient

225,000

▶ 3a

any foundation manager

Name and address (home or business)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
JACOB'S LADDER INCPO BOX 555 URBANNA, VA 23175		EXEMPT 501 (C) (3) P	FUND 3 MATHEWS CHILDREN IN PROGRAM	3,000
LITERACY VOLUNTEERS OF GLOUCESTER INC PO BOX 28 WHITE MARSH, VA 23183			PAY FOR TEACHING MATERIALS AND COMMUNITY OUTREACH	1,000
MATHEWS BAPTIST CHURCH 8284 BUCKLEY HALL ROAD HUDGINS, VA 23076		NO IRS RULINGS	MAINTAIN CEMETERY WHERE TREAKLE FAMILY IS BURIED	600

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

Total .

<u> </u>			
MATHEWS COUNTY TRIAD INC PO BOX 185 MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	PAY FOR MEDICAL ALERT TO 6 INDIGENT SENIORS	2,000
MATHEWS FAMILY YMCAPO BOX 1536	EXEMPT 501	PURCHASE AND PREPARE FOOD	2,000

MATTIEWS, VA 23103			
MATHEWS FAMILY YMCAPO BOX 1536 MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	PURCHASE AND PREPARE FOOD FOR SUMMER CAMP	2,000
MATHEWS HIGH SCHOOL CREW PO BOX 38 MATHEWS, VA 23109		FUND REPAIRS, TRAVEL, EQUIPMENT, AND FUNDS FOR INDIGENT KIDS	2,000

225,000

MATHEWS FAMILY TMCAPO BOX 1536 MATHEWS, VA 23109		FOR SUMMER CAMP	2,000
MATHEWS HIGH SCHOOL CREW PO BOX 38 MATHEWS, VA 23109	SCHOOL RU	FUND REPAIRS, TRAVEL, EQUIPMENT, AND FUNDS FOR INDIGENT KIDS	2,000

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

			40.000
MATHEWS MEMORIAL LIBRARY INC FRIENDS OF PO BOX 127 MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	SUPPORT MATHEWS LIBRARY	10,000
a Paid during the year			

MATHEWS, VA 23109			
MATHEWS VOLUNTEER FIRE DEPARTMENT PO BOX 1130 MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	BUY 30 SETS OF TURN OUT GEAR AT \$2,600 PER SET	18,000
MATHEWS VOLUNTEER RESCUE SOUAD	EXEMPT 501	TOWARD PURCHASE OF	18,000

PO BOX 1130 MATHEWS, VA 23109	(C) (3) P	GEAR AT \$2,000 PER SET	
MATHEWS VOLUNTEER RESCUE SQUAD INC 94 CRICKET HILL ROAD MATHEWS, VA 23109	EXEMPT 501 (C) (3) P	TOWARD PURCHASE OF ADVANCED LIFE SUPPORT AMBULANCE	18,000

Total .

▶ 3a

225,000

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			
PEARTREE CEMETARY ASSOCIATION PO BOX 43	EXEMPT 501 (C) (3)	PAY FOR GRASS CUTTING AND REPAIRING TOMBSTONES	500

100N, VA 25115			
APPAHANNOCK COMMUNITY COLLEGE	EXEMPT 501 (C) (3) P	FUND 5 SCHOLARSHIPS AND BUY LIBRARY MATERIALS	
O BOX 923	` ` ` ` `		
VΔRSΔW VΔ 22572			

RAPPAHANNOCK COMMUNITY COLLEGE EDUCATIONAL FOUNDATION INC PO BOX 923 WARSAW, VA 22572	EXEMPT 501 (C) (3) P	FUND 5 SCHOLARSHIPS AND BUY LIBRARY MATERIALS	5,000
READING IS FUNDAMENTAL - BOTETOURT ELEMENTARY SCHOOL	EXEMPT 501 (C) (3) P	BUY BOOKS FOR STUDENTS TO KEEP	2,000

NARSAW, VA 22572			
READING IS FUNDAMENTAL - BOTETOURT ELEMENTARY SCHOOL 3361 MAIN STREET	EXEMPT 501 (C) (3) P	BUY BOOKS FOR STUDENTS TO KEEP	2,000

READING IS FUNDAMENTAL - BOTETOURT ELEMENTARY SCHOOL 6361 MAIN STREET GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	BUY BOOKS FOR STUDENTS TO KEEP	2,000
Total	 	▶ 3a	225,000

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			
RURAL INFANT SERVICES PROGRAM PO BOX 40 SALUDA, VA 23149	EXEMPT 501 (C) (3) P	BUY PROGRAM EQUIPMENT AND MATERIALS	1,000

CALLVATION ADAMY CLOUGESTED	EVENART FOA	ACCICE NEEDY WITH DENT	
SALVATION ARMY - GLOUCESTER	EXEMPT 501	ASSIST NEEDY WITH RENT,	
SERVICE CENTER	(C) (3) P	MORTGAGE, HOUSING,	
PO BOX 267		UTILITIES, FOOD,	
HAYES, VA 23072		MEDICATIONS, SUMMER CAMPS	
		FOR KIDS	

PO BOX 267 HAYES, VA 23072		UTILITIES, FOOD, MEDICATIONS, SUMMER CAMPS FOR KIDS	
SAMARITAN GROUP THEPO BOX 784	EXEMPT 501	AID NEEDY WITH UTILITIES,	

HAYES, VA 23072		MEDICATIONS, SUMMER CAMPS FOR KIDS	
SAMARITAN GROUP THEPO BOX 784 WHITE MARSH, VA 231830784		AID NEEDY WITH UTILITIES, RENT, TRANSPORTATION, AND	5,

.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		FOR KIDS	
SAMARITAN GROUP THEPO BOX 784 WHITE MARSH, VA 231830784		AID NEEDY WITH UTILITIES, RENT, TRANSPORTATION, AND MEDICAL BILLS	5,000

8,000

WHITE MARSH, VA 231830784	(C) (3) P	RENT, TRANSPORTATION, AND MEDICAL BILLS	3,000

WHITE MARSH, VA 231830784	(C) (3) P	RENT, TRANSPORTATION, AND MEDICAL BILLS	
Total	 	▶ 3a	225,000

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)

Hame and dadress (nome or business)	or substantial contributor			
a Paid during the year				
VERSABILITY RESOURCES INC		EXEMPT 501	PROVIDE EMPLOYMENT AND DAY	

1520 58TH STREET HAMPTON, VA 23661	(C) (3) P	SUPPORT TO 50 PEOPLE WITH DISABILITIES	
GLOUCESTER LIBRARY FRIENDS OF O BOX 1392 GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	BUY BOOKS, PERIODICALS, AND MATERIALS	10

,			
GLOUCESTER LIBRARY FRIENDS OF PO BOX 1392 GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	BUY BOOKS, PERIODICALS, AND MATERIALS	10,000
GLOUCESTER UNITED EMERGENCY SHELTER TEAM PO ROX 1544	EXEMPT 501 (C) (3) P	PAY FOR SHELTER OPERATIONS EXPENSES	3,400

1,000

225,000

GLOUCESTER, VA 23061			
GLOUCESTER UNITED EMERGENCY SHELTER TEAM PO BOX 1544 GLOUCESTER, VA 23601	l .	PAY FOR SHELTER OPERATIONS EXPENSES	3,400

GLOUCESTER, VA 23001			
GLOUCESTER UNITED EMERGENCY SHELTER TEAM PO BOX 1544 GLOUCESTER, VA 23601	EXEMPT 501 (C) (3) P	PAY FOR SHELTER OPERATIONS EXPENSES	3,400
			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

PARK PARTNERSPO BOX 329 GLOUCESTER, VA 23061	EXEMPT 501 (C) (3) P	FUND THEATER CAMP, SKATE CAMP, AND ARCHERY CAMP, AND NECESSARY SUPPLIES FOR EACH	500
	1		

,	, , , ,	AND NECESSARY SUPPLIES FOR EACH	
ST PAUL CEMETERIES ASSOCIATION 1150 ANTIOCH ROAD SUSAN, VA 23163	EXEMPT 501 (C) (3)	MAINTENANCE AND UPKEEP OF CEMETERY	500
WARE ACADEMY	EXEMPT 501	PROVIDE COMMUNITY	1,000

1150 ANTIOCH ROAD SUSAN, VA 23163	(C) (3)	CEMETERY	300
WARE ACADEMY 7936 JOHN CLAYTON MEMORIAL HIGHWAY	EXEMPT 501 (C) (3) P	PROVIDE COMMUNITY SCHOLARSHIPS	1,000

SUSAN, VA 23163	(0) (3)	CEMETER	
WARE ACADEMY 7936 JOHN CLAYTON MEMORIAL HIGHWAY	EXEMPT 501 (C) (3) P	PROVIDE COMMUNITY SCHOLARSHIPS	1,00

<u> </u>			
WARE ACADEMY 7936 JOHN CLAYTON MEMORIAL HIGHWAY GLOUCESTER, VA 23061		PROVIDE COMMUNITY SCHOLARSHIPS	1,000

225,000

GLOUCESTER, VA 23061			
IIIOIIWAI		l .	1

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

recipient

Name and address (home or business)	or substantial contributor			
a Paid during the year				
WEST MATHEWS COMMUNITY LEAGUE		EXEMPT 501	REPLACE 5 WINDOWS IN	500

29

any foundation manager

93 BABY LANE MATHEWS, VA 23109	(C) (3) P	BUILDING	
Total	 	▶ 3a	225,000

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

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491011002121
TY 2019 Accounting Fees Sch	edule		_	
_				
Name:	J EDWIN TRE	AKLE FOUNDA	TION INC	
EIN:	54-6051620			
				1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUDIT OF FINANCIAL STATEMENTS	9,370	9,370		0

AND PREPARATION OF FORM 990-PF

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	
TY 2019 Investments Corporate	e Bonds Sche	dule

No. 22 - 1 FOWIN TREAM F FOUNDATION INC

DLN: 93491011002121

Name: J EDWIN TREAKLE FOUNDATION INC

EIN: 54-6051620

Investments Corporate Bonds Schodule

Investments Corporate Bonds Schedule				
Name of Bond	End of Year Book Value	End of Year Fair Market Value		
100 SHS TOTAL CAP INTL SA GTD NT	102,380	102,380		
50 SHS JOHN DEERE CAP CO SR NT	51,677	51,677		
50 SHS APPLE INC SR UNSECD NT	52,413	52,413		
50 SHS VISA INC UNSECD SR GLBL NT	50,400	50,400		
50 SHS AMERICAN HONDA FIN CORP	49,871	49,871		
50 SHS CHEVRON CORP NEW	51,580	51,580		
100 SHS JPMORGAN CHASE & CO	106,765	106,765		

TY 2019 Investments Corporate Stock Schedule

Name: J EDWIN TREAKLE FOUNDATION INC

EIN: 54-6051620

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
10 SHS MATHEWS YACHT CLUB	50	50
650 SHS ABBVIE INC	53,430	53,430
200 SHS AIR PRODUCTS & CHEMICALS INC	45,116	45,116
65 SHS ALPHABET INC	87,535	87,535
35 SHS AMAZON COM INC	86,590	86,590
125 SHS AMGEN INC	29,903	29,903
400 SHS APPLE INC	117,520	117,520
450 SHS AUTOMATIC DATA PROCESSING INC	66,010	66,010
300 SHS BECTON DICKINSON & CO	75,759	75,759
100 SHS BLACKROCK INC	50,204	50,204
400 SHS CAPITAL ONE FINL CORP	25,904	25,904
350 SHS CARRIER GLOBAL CORP.	6,199	6,199
700 SHS CENTENE CORP	46,606	46,606
400 SHS CHEVRON CORP	36,800	36,800
1250 SHS CISCO SYSTEMS	52,975	52,975
500 SHS CITIGROUP INC	24,280	24,280
1000 SHS COCA COLA CO	45,890	45,890
100 SHS COSTCO WHSL CORP	30,300	30,300
354 SHS DOW INC	12,988	12,988
300 SHS EOG RES INC	14,253	14,253
600 SHS EXXON MOBIL CORPORATION	27,882	27,882
250 SHS FACEBOOK INC CL A	51,177	51,177
200 SHS GENERAL DYNAMICS CORP	26,124	26,124
300 SHS GILEAD SCIENCES INC	25,200	25,200
300 SHS HOME DEPOT INC	65,949	65,949
400 SHS HONEYWELL INTERNATIONAL INC	56,760	56,760
200 SHS INTERNATIONAL BUSINESS MACHINES CORP	25,112	25,112
650 SHS J P MORGAN CHASE & CO	62,244	62,244
300 SHS JOHNSON & JOHNSON	45,012	45,012
250 SHS LILLY ELI & CO	38,660	38,660

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
200 SHS LINDE PLC	36,798	36,798
650 SHS MERCK & CO INC	51,571	51,571
1150 SHS MICROSOFT CORP	206,092	206,092
850 SHS MORGAN STANLEY	33,515	33,515
165 SHS NORTHROP GRUMMAN CORP	54,561	54,561
175 SHS OTIS WORLDWIDE CORP.	8,909	8,909
140 SHS PAYPAL HOLDINGS INC	17,220	17,220
500 SHS PFIZER INC	19,180	19,180
500 SHS PHILIP MORRIS INTERNATIONAL INC	37,300	37,300
300 SHS PNC FINANCIAL SERVICES GROUP INC.	32,001	32,001
1167.18 SHS RAYTHEON TECHNOLOGIES CORP.	75,645	75,645
500 SHS SALESFORCE.COM INC	80,975	80,975
350 SHS TEXAS INSTRS INC	40,625	40,625
750 SHS US BANCORP	27,375	27,375
400 SHS VALERO ENERGY CORP NEW	25,340	25,340
500 SHS VISA INC	89,360	89,360
350 SHS YUM BRANDS INC	30,250	30,250
2825 SHS ISHARES EDGE MSCI USA QUALITY FACTOR ETF	257,047	257,047
465 SHS ISHARES IBOXX \$ INVEST GRADE CORP	60,064	60,064
2375 SHS ISHARES MSCI EAFE ETF	134,354	134,354
1520 SHS ISHARES MSCI INDIA ETF	41,116	41,116
1200 SHS ISHARES RUSSELL 1000 GROWTH INDEX	207,336	207,336
1200 SHS ISHARES RUSSELL 1000 VALUE ETF	132,324	132,324
525 SHS ISHARES US AEROSPACE & DEFENSE ETF	81,774	81,774
1840 SHS SPIDER BLOOMBERG BARCLAYS SHORT TERM HIGH YIELD BOND ETF	45,227	45,227
855 SHS SPIDER S&P 500 ETF	248,360	248,360
3640 SHS VANGUARD FTSE EMERGING MKTS ETF	131,659	131,659
1215 SHS VANGUARD INDEX TR TOTAL STK MKT VIPERS	177,196	177,196
1460 SHS VANGUARD LARGE-CAP ETF	195,334	195,334
1930 SHS VANGUARD MID-CAP ETF	290,253	290,253

Investments Corporation Stock Schedule Name of Stock

2000 SHS VANGUARD SMALL-CAP FTF

8500 SHS PRINCIPAL PFD SECS FUND

CAP FUND

1190 SHS VANGUARD SHORT TERM BOND ETF

2250 SHS VICTORY SMALL CO OPPTY FUND CL I

5402.959 SHS JOHN HANCOCK FDS III DISCPILINED VALUE MID

Value	
98,389	

End of Year Book

98,389

264,480

63.075

95,092

81,770

79,538

End of Year Fair Market Value

7500 SHS FIDELITY ADVISOR FLOATING RATE HIGH INCOME FUND.

264,480 63,075

95,092

81,770

79,538

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	N: 93491011002121
TY 2019 Investments - Other S	Schedule			
Name: 1	J EDWIN TREAKLE	FOUNDATIO	N INC	
EIN:	54-6051620			
nvestments Other Schedule 2				
Category / Item	Liste	d at Cost or	Book Value	End of Year Fair

FMV

COINS & PAPERS

FMV

Market Value

D	escription		Amount
EIN:	54-6051620		4
Name:	J EDWIN TREA	AKLE FOUNDATION INC	
TY 2019 Other Decreases Sch	edule		
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491011002121
C1			DIN 004040440045

Description Amount UNREALIZED LOSS 355,334

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491011002121						
TY 2019 Other Expenses Schedule								
Name:	J EDWIN TREA	AKLE FOUNDATION INC						
EIN:	54-6051620							
Other Expenses Schedule								

EIN	: 54-6051620			
Other Expenses Schedule				
Description	Revenue and	Net Investment	Adjusted Net	Dishurse

			 	. 1	
EIN:	54-6051	620			
	5 ==		 		

P.O. BOX RENT

POSTAGE

TELEPHONE

OFFICE SUPPLIES

1	I.		
Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
6,239	3,119		3,120
315	157		158
	Expenses per Books 6,239	Expenses per Books Income 3,119	Expenses per Books Income Income 6,239 3,119

1,731

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491011002121			
TY 2019 Other Liabilities Schedule							
Name:	J EDWIN TREA	KLE FOUNDA	ATION INC				
EIN:	54-6051620						
Description	า		Beginning of Year - Book Value	End of Year - Book Value			
EXCISE TAXES PAYABLE			4,311	2,928			

efile GRAPHIC print - DO NOT PROCESS			DLN	N: 93491011002121				
TY 2019 Other Professional Fees Schedule								
Name: J EDWIN TREAKLE FOUNDATION INC EIN: 54-6051620								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				

33,340

33,340

TRUST FEES FOR MAINTAINING

INVESTMENT ASSETS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN: 93491011002121	
TY 2019 Taxes Schedule				
Name: J EDWIN TREAKLE FOUNDATION INC				
EIN: 54-6051620				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAXES	2,928	0		0