



| Part II Balance Sheets                                                                                       |                                                                                                                                               | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) |                |                       |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|----------------|-----------------------|
|                                                                                                              |                                                                                                                                               | Beginning of year                                                                                                    | End of year    |                       |
|                                                                                                              |                                                                                                                                               | (a) Book Value                                                                                                       | (b) Book Value | (c) Fair Market Value |
| Assets                                                                                                       | <b>1</b> Cash—non-interest-bearing . . . . .                                                                                                  | 77,376                                                                                                               | 87,468         | 87,468                |
|                                                                                                              | <b>2</b> Savings and temporary cash investments . . . . .                                                                                     | 52,379                                                                                                               | 76,365         | 76,365                |
|                                                                                                              | <b>3</b> Accounts receivable ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                                                         |                                                                                                                      |                |                       |
|                                                                                                              | <b>4</b> Pledges receivable ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                                                          |                                                                                                                      |                |                       |
|                                                                                                              | <b>5</b> Grants receivable . . . . .                                                                                                          |                                                                                                                      |                |                       |
|                                                                                                              | <b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .    |                                                                                                                      |                |                       |
|                                                                                                              | <b>7</b> Other notes and loans receivable (attach schedule) ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                          |                                                                                                                      |                |                       |
|                                                                                                              | <b>8</b> Inventories for sale or use . . . . .                                                                                                |                                                                                                                      |                |                       |
|                                                                                                              | <b>9</b> Prepaid expenses and deferred charges . . . . .                                                                                      |                                                                                                                      |                |                       |
|                                                                                                              | <b>10a</b> Investments—U.S. and state government obligations (attach schedule)                                                                | 45,165                                                                                                               | 20,407         | 20,407                |
|                                                                                                              | <b>b</b> Investments—corporate stock (attach schedule) . . . . .                                                                              | 857,147                                                                                                              | 1,038,050      | 1,038,050             |
|                                                                                                              | <b>c</b> Investments—corporate bonds (attach schedule) . . . . .                                                                              | 189,387                                                                                                              | 219,360        | 219,360               |
|                                                                                                              | <b>11</b> Investments—land, buildings, and equipment: basis ▶ _____<br>Less: accumulated depreciation (attach schedule) ▶ _____               |                                                                                                                      |                |                       |
|                                                                                                              | <b>12</b> Investments—mortgage loans . . . . .                                                                                                |                                                                                                                      |                |                       |
|                                                                                                              | <b>13</b> Investments—other (attach schedule) . . . . .                                                                                       |                                                                                                                      |                |                       |
|                                                                                                              | <b>14</b> Land, buildings, and equipment: basis ▶ _____<br>Less: accumulated depreciation (attach schedule) ▶ _____                           |                                                                                                                      |                |                       |
| <b>15</b> Other assets (describe ▶ _____)                                                                    |                                                                                                                                               |                                                                                                                      |                |                       |
| <b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) | 1,221,454                                                                                                                                     | 1,441,650                                                                                                            | 1,441,650      |                       |
| Liabilities                                                                                                  | <b>17</b> Accounts payable and accrued expenses . . . . .                                                                                     |                                                                                                                      |                |                       |
|                                                                                                              | <b>18</b> Grants payable . . . . .                                                                                                            |                                                                                                                      |                |                       |
|                                                                                                              | <b>19</b> Deferred revenue . . . . .                                                                                                          |                                                                                                                      |                |                       |
|                                                                                                              | <b>20</b> Loans from officers, directors, trustees, and other disqualified persons                                                            |                                                                                                                      |                |                       |
|                                                                                                              | <b>21</b> Mortgages and other notes payable (attach schedule) . . . . .                                                                       |                                                                                                                      |                |                       |
|                                                                                                              | <b>22</b> Other liabilities (describe ▶ _____)                                                                                                |                                                                                                                      |                |                       |
|                                                                                                              | <b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .                                                                        | 0                                                                                                                    | 0              |                       |
| Net Assets or Fund Balances                                                                                  | <b>Foundations that follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/><br><b>and complete lines 24, 25, 29 and 30.</b> |                                                                                                                      |                |                       |
|                                                                                                              | <b>24</b> Net assets without donor restrictions . . . . .                                                                                     | 1,221,454                                                                                                            | 1,427,735      |                       |
|                                                                                                              | <b>25</b> Net assets with donor restrictions . . . . .                                                                                        |                                                                                                                      | 13,915         |                       |
|                                                                                                              | <b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/><br><b>and complete lines 26 through 30.</b>         |                                                                                                                      |                |                       |
|                                                                                                              | <b>26</b> Capital stock, trust principal, or current funds . . . . .                                                                          |                                                                                                                      |                |                       |
|                                                                                                              | <b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund                                                                      |                                                                                                                      |                |                       |
|                                                                                                              | <b>28</b> Retained earnings, accumulated income, endowment, or other funds                                                                    |                                                                                                                      |                |                       |
|                                                                                                              | <b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .                                                               | 1,221,454                                                                                                            | 1,441,650      |                       |
| <b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .                         | 1,221,454                                                                                                                                     | 1,441,650                                                                                                            |                |                       |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|                                                                                                                                                                             |          |           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------|
| <b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . . | <b>1</b> | 1,221,454 |
| <b>2</b> Enter amount from Part I, line 27a . . . . .                                                                                                                       | <b>2</b> | 35,065    |
| <b>3</b> Other increases not included in line 2 (itemize) ▶ _____                                                                                                           | <b>3</b> | 185,131   |
| <b>4</b> Add lines 1, 2, and 3 . . . . .                                                                                                                                    | <b>4</b> | 1,441,650 |
| <b>5</b> Decreases not included in line 2 (itemize) ▶ _____                                                                                                                 | <b>5</b> | 0         |
| <b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .                                                              | <b>6</b> | 1,441,650 |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b)<br>How acquired<br>P—Purchase<br>D—Donation | (c)<br>Date acquired<br>(mo., day, yr.) | (d)<br>Date sold<br>(mo., day, yr.) |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|-------------------------------------|
| <b>1 a PUBLICLY TRADED SECURITIES</b>                                                                                              |                                                 |                                         |                                     |
| <b>b</b> LIBERTY BROADBAND CO (LBRDK) 41.000 SHARES                                                                                | D                                               | 2019-12-31                              | 2020-01-02                          |
| <b>c</b> ALPHABET INC CL A (GOOGL) 12.000 SHARES                                                                                   | D                                               | 2020-08-20                              | 2020-08-21                          |
| <b>d</b> WALT DISNEY CO (DIS) 76.000 SHARES                                                                                        | D                                               | 2020-08-25                              | 2020-08-26                          |
| <b>e</b>                                                                                                                           |                                                 |                                         |                                     |

| (e)<br>Gross sales price | (f)<br>Depreciation allowed<br>(or allowable) | (g)<br>Cost or other basis<br>plus expense of sale | (h)<br>Gain or (loss)<br>(e) plus (f) minus (g) |
|--------------------------|-----------------------------------------------|----------------------------------------------------|-------------------------------------------------|
| <b>a</b> 739,746         |                                               | 728,706                                            | 11,040                                          |
| <b>b</b> 5,112           |                                               | 3,121                                              | 1,991                                           |
| <b>c</b> 18,840          |                                               | 5,323                                              | 13,517                                          |
| <b>d</b> 9,901           |                                               | 4,276                                              | 5,625                                           |
| <b>e</b>                 |                                               |                                                    |                                                 |

| (i)<br>F.M.V. as of 12/31/69 | (j)<br>Adjusted basis<br>as of 12/31/69 | (k)<br>Excess of col. (i)<br>over col. (j), if any | (l)<br>Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col.(h)) |
|------------------------------|-----------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------|
| <b>a</b>                     |                                         |                                                    | 11,040                                                                                            |
| <b>b</b>                     |                                         |                                                    | 1,991                                                                                             |
| <b>c</b>                     |                                         |                                                    | 13,517                                                                                            |
| <b>d</b>                     |                                         |                                                    | 5,625                                                                                             |
| <b>e</b>                     |                                         |                                                    |                                                                                                   |

|                                                                                                                                                                                                                                                |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>2</b> Capital gain net income or (net capital loss) <span style="float: right;">{ If gain, also enter in Part I, line 7<br/>If (loss), enter -0- in Part I, line 7 }</span>                                                                 | <b>2</b> 32,173 |
| <b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0-<br>in Part I, line 8 <span style="float: right;">}</span> | <b>3</b>        |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income****SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

|                      |                 |                 |                 |
|----------------------|-----------------|-----------------|-----------------|
| 1 Reserved           |                 |                 |                 |
| (a)<br>Reserved      | (b)<br>Reserved | (c)<br>Reserved | (d)<br>Reserved |
|                      |                 |                 |                 |
|                      |                 |                 |                 |
|                      |                 |                 |                 |
|                      |                 |                 |                 |
|                      |                 |                 |                 |
| 2 Reserved . . . . . |                 | 2               |                 |
| 3 Reserved. . . . .  |                 | 3               |                 |
| 4 Reserved . . . . . |                 | 4               |                 |
| 5 Reserved . . . . . |                 | 5               |                 |
| 6 Reserved . . . . . |                 | 6               |                 |
| 7 Reserved . . . . . |                 | 7               |                 |
| 8 Reserved , . . . . |                 | 8               |                 |

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

|           |                                                                                                                                                                                                                                     |           |       |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| <b>1a</b> | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions) |           |       |
| <b>b</b>  | Reserved.                                                                                                                                                                                                                           | <b>1</b>  | 713   |
| <b>c</b>  | All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)                                                                                                          |           |       |
| <b>2</b>  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                           | <b>2</b>  | 0     |
| <b>3</b>  | Add lines 1 and 2.                                                                                                                                                                                                                  | <b>3</b>  | 713   |
| <b>4</b>  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                         | <b>4</b>  | 0     |
| <b>5</b>  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.                                                                                                                                     | <b>5</b>  | 713   |
| <b>6</b>  | Credits/Payments:                                                                                                                                                                                                                   |           |       |
| <b>a</b>  | 2020 estimated tax payments and 2019 overpayment credited to 2020                                                                                                                                                                   | <b>6a</b> | 3,780 |
| <b>b</b>  | Exempt foreign organizations—tax withheld at source                                                                                                                                                                                 | <b>6b</b> | 0     |
| <b>c</b>  | Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                 | <b>6c</b> | 0     |
| <b>d</b>  | Backup withholding erroneously withheld                                                                                                                                                                                             | <b>6d</b> | 0     |
| <b>7</b>  | Total credits and payments. Add lines 6a through 6d.                                                                                                                                                                                | <b>7</b>  | 3,780 |
| <b>8</b>  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.                                                                                                           | <b>8</b>  | 0     |
| <b>9</b>  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .                                                                                                                                       | <b>9</b>  |       |
| <b>10</b> | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .                                                                                                                           | <b>10</b> | 3,067 |
| <b>11</b> | Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> 3,067 <b>Refunded</b>                                                                                                                                      | <b>11</b> | 0     |

**Part VII-A Statements Regarding Activities**

|           |                                                                                                                                                                                                                                                                                                                                                 |            |           |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| <b>1a</b> | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                            | <b>Yes</b> | <b>No</b> |
| <b>1a</b> |                                                                                                                                                                                                                                                                                                                                                 |            | No        |
| <b>b</b>  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).<br><i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> |            | No        |
| <b>1b</b> |                                                                                                                                                                                                                                                                                                                                                 |            | No        |
| <b>c</b>  | Did the foundation file <b>Form 1120-POL</b> for this year?                                                                                                                                                                                                                                                                                     |            | No        |
| <b>1c</b> |                                                                                                                                                                                                                                                                                                                                                 |            | No        |
| <b>d</b>  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$ 0                                                                                                                                                                          |            |           |
| <b>e</b>  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0                                                                                                                                                                                                    |            |           |
| <b>2</b>  | Has the foundation engaged in any activities that have not previously been reported to the IRS?<br><i>If "Yes," attach a detailed description of the activities.</i>                                                                                                                                                                            | <b>2</b>   | No        |
| <b>3</b>  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>                                                                                                               | <b>3</b>   | No        |
| <b>4a</b> | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                     | <b>4a</b>  | No        |
| <b>4b</b> | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?                                                                                                                                                                                                                                                                         | <b>4b</b>  |           |
| <b>5</b>  | Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br><i>If "Yes," attach the statement required by General Instruction T.</i>                                                                                                                                                                      | <b>5</b>   | No        |
| <b>6</b>  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?              | <b>6</b>   | Yes       |
| <b>7</b>  | Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>                                                                                                                                                                                                       | <b>7</b>   | Yes       |
| <b>8a</b> | Enter the states to which the foundation reports or with which it is registered (see instructions)<br>► CA, CT, FL, GA, IL, MD, MA, NH, NJ, NY, NC, PA, SC, TN, VA, WA                                                                                                                                                                          |            |           |
| <b>b</b>  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>                                                                                                                             | <b>8b</b>  | Yes       |
| <b>9</b>  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV.<br><i>If "Yes," complete Part XIV</i>                                                                               | <b>9</b>   | No        |
| <b>10</b> | Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>                                                                                                                                                                                                      | <b>10</b>  | No        |

**Part VII-A Statements Regarding Activities** (continued)

|           |                                                                                                                                                                                                   |           |            |           |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|-----------|
| <b>11</b> | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .   | <b>11</b> |            | <b>No</b> |
| <b>12</b> | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . . | <b>12</b> |            | <b>No</b> |
| <b>13</b> | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.BRWJRFFOUNDATION.ORG</u>                             | <b>13</b> | <b>Yes</b> |           |
| <b>14</b> | The books are in care of ► <u>CAROLINE C WILLIAMSON PRESIDENT</u> Telephone no. ► <u>(646) 443-7864</u>                                                                                           |           |            |           |

Located at ► C/O CHILTON PRIVATE CLIENTS 300 PARK AVE NY NY ZIP+4 ► 100227407

|           |                                                                                                                                                                                                     |                          |            |           |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------|-----------|
| <b>15</b> | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . .                                                                                 | <input type="checkbox"/> |            |           |
|           | and enter the amount of tax-exempt interest received or accrued during the year . . . . .                                                                                                           | ► <b>15</b>              |            |           |
| <b>16</b> | At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . | <b>16</b>                | <b>Yes</b> | <b>No</b> |
|           | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►                                                                  |                          |            |           |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

|           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |            |           |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|-----------|
| <b>1a</b> | During the year did the foundation (either directly or indirectly):                                                                                                                                                                                                                                                                                                                                                                                                                                       |           | <b>Yes</b> | <b>No</b> |
|           | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                |           |            |           |
|           | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                              |           |            |           |
|           | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                            |           |            |           |
|           | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                  |           |            |           |
|           | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                               |           |            |           |
|           | (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                     |           |            |           |
| <b>b</b>  | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . .                                                                                                                                                                                                                                                                       | <b>1b</b> |            | <b>No</b> |
|           | Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                    |           |            |           |
| <b>c</b>  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? . . . . .                                                                                                                                                                                                                                                                                                         | <b>1c</b> |            | <b>No</b> |
| <b>2</b>  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):                                                                                                                                                                                                                                                                                                                            |           |            |           |
| <b>a</b>  | At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                           |           |            |           |
|           | If "Yes," list the years ► 20____, 20____, 20____, 20____                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |            |           |
| <b>b</b>  | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .                                                                                                                                                                           | <b>2b</b> |            |           |
| <b>c</b>  | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____                                                                                                                                                                                                                                                                                                                                                  |           |            |           |
| <b>3a</b> | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                  |           |            |           |
| <b>b</b>  | If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) . . . . . | <b>3b</b> |            |           |
| <b>4a</b> | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                           | <b>4a</b> |            | <b>No</b> |
| <b>b</b>  | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?                                                                                                                                                                                                                                                                         | <b>4b</b> |            | <b>No</b> |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

|           |                                                                                                                                                                                                                                            |                                                                     |            |           |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|------------|-----------|
| <b>5a</b> | During the year did the foundation pay or incur any amount to:                                                                                                                                                                             |                                                                     | <b>Yes</b> | <b>No</b> |
| (1)       | Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?                                                                                                                                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| (2)       | Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?                                                                                            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| (3)       | Provide a grant to an individual for travel, study, or other similar purposes?                                                                                                                                                             | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| (4)       | Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.                                                                                                       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| (5)       | Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?                                                                          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |
| <b>b</b>  | If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.              |                                                                     | <b>5b</b>  |           |
|           | Organizations relying on a current notice regarding disaster assistance check here.                                                                                                                                                        | <input type="checkbox"/>                                            |            |           |
| <b>c</b>  | If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?<br>If "Yes," attach the statement required by Regulations section 53.4945–5(d). | <input type="checkbox"/> Yes <input type="checkbox"/> No            |            |           |
| <b>6a</b> | Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>6b</b>  | <b>No</b> |
| <b>b</b>  | Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?<br>If "Yes" to 6b, file Form 8870.                                                                                              |                                                                     |            |           |
| <b>7a</b> | At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?                                                                                                                                       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>7b</b>  |           |
| <b>b</b>  | If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?                                                                                                                                  |                                                                     |            |           |
| <b>8</b>  | Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?                                                                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |            |           |

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

| <b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>                       |                                                           |                                           |                                                                       |                                       |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| (a) Name and address                                                                                                                | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| See Additional Data Table                                                                                                           |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
| <b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b> |                                                           |                                           |                                                                       |                                       |
| (a) Name and address of each employee paid more than \$50,000                                                                       | (b) Title, and average hours per week devoted to position | (c) Compensation                          | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE                                                                                                                                |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
|                                                                                                                                     |                                                           |                                           |                                                                       |                                       |
| <b>Total number of other employees paid over \$50,000.</b>                                                                          |                                                           |                                           |                                                                       | <b>0</b>                              |

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

| <b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b> |                            |                         |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------------------|
| <b>(a)</b> Name and address of each person paid more than \$50,000                                                      | <b>(b)</b> Type of service | <b>(c)</b> Compensation |
| NONE                                                                                                                    |                            |                         |
|                                                                                                                         |                            |                         |
|                                                                                                                         |                            |                         |
|                                                                                                                         |                            |                         |
|                                                                                                                         |                            |                         |
|                                                                                                                         |                            |                         |
|                                                                                                                         |                            |                         |
|                                                                                                                         |                            |                         |
| <b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ▶                              |                            | <b>0</b>                |

| <b>Part IX-A Summary of Direct Charitable Activities</b>                                                                                                                                                                                               |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| <b>1</b>                                                                                                                                                                                                                                               |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| <b>2</b>                                                                                                                                                                                                                                               |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| <b>3</b>                                                                                                                                                                                                                                               |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| <b>4</b>                                                                                                                                                                                                                                               |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |

| <b>Part IX-B Summary of Program-Related Investments</b> (see instructions)                                        |          |
|-------------------------------------------------------------------------------------------------------------------|----------|
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount   |
| <b>1</b>                                                                                                          |          |
|                                                                                                                   |          |
|                                                                                                                   |          |
| <b>2</b>                                                                                                          |          |
|                                                                                                                   |          |
|                                                                                                                   |          |
| All other program-related investments. See instructions.                                                          |          |
| <b>3</b>                                                                                                          |          |
|                                                                                                                   |          |
|                                                                                                                   |          |
| <b>Total.</b> Add lines 1 through 3 . . . . . ▶                                                                   | <b>0</b> |

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |                                                                                                                    |           |           |
|----------|--------------------------------------------------------------------------------------------------------------------|-----------|-----------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:        |           |           |
| <b>a</b> | Average monthly fair market value of securities. . . . .                                                           | <b>1a</b> | 1,138,622 |
| <b>b</b> | Average of monthly cash balances. . . . .                                                                          | <b>1b</b> | 113,737   |
| <b>c</b> | Fair market value of all other assets (see instructions). . . . .                                                  | <b>1c</b> | 0         |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c). . . . .                                                                     | <b>1d</b> | 1,252,359 |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . . | <b>1e</b> | 0         |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets. . . . .                                                      | <b>2</b>  | 0         |
| <b>3</b> | Subtract line 2 from line 1d. . . . .                                                                              | <b>3</b>  | 1,252,359 |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . . | <b>4</b>  | 18,785    |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4        | <b>5</b>  | 1,233,574 |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5. . . . .                                                      | <b>6</b>  | 61,679    |

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|           |                                                                                                                    |           |        |
|-----------|--------------------------------------------------------------------------------------------------------------------|-----------|--------|
| <b>1</b>  | Minimum investment return from Part X, line 6. . . . .                                                             | <b>1</b>  | 61,679 |
| <b>2a</b> | Tax on investment income for 2020 from Part VI, line 5. . . . .                                                    | <b>2a</b> | 713    |
| <b>b</b>  | Income tax for 2020. (This does not include the tax from Part VI.). . . . .                                        | <b>2b</b> |        |
| <b>c</b>  | Add lines 2a and 2b. . . . .                                                                                       | <b>2c</b> | 713    |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1. . . . .                                     | <b>3</b>  | 60,966 |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions. . . . .                                                 | <b>4</b>  | 0      |
| <b>5</b>  | Add lines 3 and 4. . . . .                                                                                         | <b>5</b>  | 60,966 |
| <b>6</b>  | Deduction from distributable amount (see instructions). . . . .                                                    | <b>6</b>  | 0      |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . . | <b>7</b>  | 60,966 |

**Part XII Qualifying Distributions** (see instructions)

|          |                                                                                                                                                              |           |         |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                   |           |         |
| <b>a</b> | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .                                                                         | <b>1a</b> | 342,508 |
| <b>b</b> | Program-related investments—total from Part IX-B. . . . .                                                                                                    | <b>1b</b> | 0       |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .                                           | <b>2</b>  |         |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:                                                                                         |           |         |
| <b>a</b> | Suitability test (prior IRS approval required). . . . .                                                                                                      | <b>3a</b> |         |
| <b>b</b> | Cash distribution test (attach the required schedule). . . . .                                                                                               | <b>3b</b> |         |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                            | <b>4</b>  | 342,508 |
| <b>5</b> | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . . | <b>5</b>  | 0       |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .                                                                               | <b>6</b>  | 342,508 |

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                                            | (a)<br>Corpus | (b)<br>Years prior to 2019 | (c)<br>2019 | (d)<br>2020 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2020 from Part XI, line 7                                                                                                                                |               |                            |             | 60,966      |
| <b>2</b> Undistributed income, if any, as of the end of 2020:                                                                                                                              |               |                            |             |             |
| <b>a</b> Enter amount for 2019 only. . . . .                                                                                                                                               |               |                            | 0           |             |
| <b>b</b> Total for prior years: 20____, 20____, 20____                                                                                                                                     |               | 0                          |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2020:                                                                                                                                  |               |                            |             |             |
| <b>a</b> From 2015. . . . .                                                                                                                                                                | 199,737       |                            |             |             |
| <b>b</b> From 2016. . . . .                                                                                                                                                                | 347,771       |                            |             |             |
| <b>c</b> From 2017. . . . .                                                                                                                                                                | 233,974       |                            |             |             |
| <b>d</b> From 2018. . . . .                                                                                                                                                                | 215,127       |                            |             |             |
| <b>e</b> From 2019. . . . .                                                                                                                                                                | 260,610       |                            |             |             |
| <b>f</b> <b>Total</b> of lines 3a through e. . . . .                                                                                                                                       | 1,257,219     |                            |             |             |
| <b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ 342,508                                                                                                             |               |                            |             |             |
| <b>a</b> Applied to 2019, but not more than line 2a                                                                                                                                        |               |                            | 0           |             |
| <b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .                                                                                      |               | 0                          |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .                                                                                              | 0             |                            |             |             |
| <b>d</b> Applied to 2020 distributable amount. . . . .                                                                                                                                     |               |                            |             | 60,966      |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                                        | 281,542       |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2020.<br>(If an amount appears in column (d), the same amount must be shown in column (a).)                                             | 0             |                            |             | 0           |
| <b>6 Enter the net total of each column as indicated below:</b>                                                                                                                            |               |                            |             |             |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5                                                                                                                                 | 1,538,761     |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .                                                                                                         |               | 0                          |             |             |
| <b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . |               | 0                          |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .                                                                                                           |               | 0                          |             |             |
| <b>e</b> Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .                                                                            |               |                            | 0           |             |
| <b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .                                                              |               |                            |             | 0           |
| <b>7</b> 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). . . . .       | 45,700        |                            |             |             |
| <b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions). . . . .                                                                              | 154,037       |                            |             |             |
| <b>9 Excess distributions carryover to 2021.</b><br>Subtract lines 7 and 8 from line 6a. . . . .                                                                                           | 1,339,024     |                            |             |             |
| <b>10</b> Analysis of line 9:                                                                                                                                                              |               |                            |             |             |
| <b>a</b> Excess from 2016. . . . .                                                                                                                                                         | 347,771       |                            |             |             |
| <b>b</b> Excess from 2017. . . . .                                                                                                                                                         | 233,974       |                            |             |             |
| <b>c</b> Excess from 2018. . . . .                                                                                                                                                         | 215,127       |                            |             |             |
| <b>d</b> Excess from 2019. . . . .                                                                                                                                                         | 260,610       |                            |             |             |
| <b>e</b> Excess from 2020. . . . .                                                                                                                                                         | 281,542       |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

|                                                                                                                                                                    | Tax year | Prior 3 years |          |          | (e) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------|----------|----------|-----------|
|                                                                                                                                                                    | (a) 2020 | (b) 2019      | (c) 2018 | (d) 2017 |           |
| <b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .                      |          |               |          |          |           |
| <b>b</b> 85% of line 2a . . . . .                                                                                                                                  |          |               |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .                                                                             |          |               |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .                                                           |          |               |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .                                   |          |               |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:                                                                                                |          |               |          |          |           |
| <b>a</b> "Assets" alternative test—enter:                                                                                                                          |          |               |          |          |           |
| <b>(1)</b> Value of all assets . . . . .                                                                                                                           |          |               |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                               |          |               |          |          |           |
| <b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .                                |          |               |          |          |           |
| <b>c</b> "Support" alternative test—enter:                                                                                                                         |          |               |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . |          |               |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .                                       |          |               |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization                                                                                                   |          |               |          |          |           |
| <b>(4)</b> Gross investment income                                                                                                                                 |          |               |          |          |           |

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
See Additional Data Table

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

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

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient                                                                | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount  |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|---------|
| Name and address (home or business)                                      |                                                                                                                    |                                      |                                     |         |
| <b>a</b> <i>Paid during the year</i><br>See Additional Data Table        |                                                                                                                    |                                      |                                     |         |
| <b>Total</b> . . . . .                                                   |                                                                                                                    |                                      | ▶ <b>3a</b>                         | 290,285 |
| <b>b</b> <i>Approved for future payment</i><br>See Additional Data Table |                                                                                                                    |                                      |                                     |         |
|                                                                          |                                                                                                                    |                                      |                                     |         |
| <b>Total</b> . . . . .                                                   |                                                                                                                    |                                      | ▶ <b>3b</b>                         | 40,000  |

Enter gross amounts unless otherwise indicated.

|                                                                                                                                     | (a)<br>Business code | (b)<br>Amount | (c)<br>Exclusion code | (d)<br>Amount | (e)<br>(See instructions.) |
|-------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------|-----------------------|---------------|----------------------------|
| <b>1</b> Program service revenue:                                                                                                   |                      |               |                       |               |                            |
| <b>a</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>b</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>c</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>d</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>e</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>f</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>g</b> Fees and contracts from government agencies                                                                                |                      |               |                       |               |                            |
| <b>2</b> Membership dues and assessments. . . . .                                                                                   |                      |               |                       |               |                            |
| <b>3</b> Interest on savings and temporary cash investments . . . . .                                                               |                      |               | 14                    | 25            |                            |
| <b>4</b> Dividends and interest from securities. . . . .                                                                            |                      |               | 14                    | 19,448        |                            |
| <b>5</b> Net rental income or (loss) from real estate:                                                                              |                      |               |                       |               |                            |
| <b>a</b> Debt-financed property. . . . .                                                                                            |                      |               |                       |               |                            |
| <b>b</b> Not debt-financed property. . . . .                                                                                        |                      |               |                       |               |                            |
| <b>6</b> Net rental income or (loss) from personal property                                                                         |                      |               |                       |               |                            |
| <b>7</b> Other investment income. . . . .                                                                                           |                      |               |                       |               |                            |
| <b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .                                                         |                      |               | 18                    | 10,958        |                            |
| <b>9</b> Net income or (loss) from special events:                                                                                  |                      |               | 01                    | -4,492        |                            |
| <b>10</b> Gross profit or (loss) from sales of inventory                                                                            |                      |               |                       |               |                            |
| <b>11</b> Other revenue: <b>a</b> _____                                                                                             |                      |               |                       |               |                            |
| <b>b</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>c</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>d</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>e</b> _____                                                                                                                      |                      |               |                       |               |                            |
| <b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .                                                                          |                      | 0             |                       | 25,939        | 0                          |
| <b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .<br>(See worksheet in line 13 instructions to verify calculations.) |                      |               | <b>13</b>             |               | <b>25,939</b>              |

[illegible]

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

|  |  |     |    |
|--|--|-----|----|
|  |  | Yes | No |
|--|--|-----|----|

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

|              |           |
|--------------|-----------|
| <b>1a(1)</b> | <b>No</b> |
|--------------|-----------|

|              |  |           |
|--------------|--|-----------|
| <b>1a(2)</b> |  | <b>No</b> |
|--------------|--|-----------|

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| <b>1b(1)</b> | <b>No</b> |
|--------------|-----------|

|              |  |           |
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| <b>1b(2)</b> |  | <b>No</b> |
|--------------|--|-----------|

|              |  |           |
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| <b>1b(3)</b> |  | <b>No</b> |
|--------------|--|-----------|

|              |  |           |
|--------------|--|-----------|
| <b>1b(4)</b> |  | <b>No</b> |
|--------------|--|-----------|

|              |  |           |
|--------------|--|-----------|
| <b>1b(5)</b> |  | <b>No</b> |
|--------------|--|-----------|

|              |  |           |
|--------------|--|-----------|
| <b>1b(6)</b> |  | <b>No</b> |
|--------------|--|-----------|

|           |  |           |
|-----------|--|-----------|
| <b>1c</b> |  | <b>No</b> |
|-----------|--|-----------|

value  
ue[illegible]

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign  
Here**

\* \* \* \* \*

2021-04-13

\*\*\*\*\*

Signature of officer or trustee

Date \_\_\_\_\_

Title

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

ANAN SAMARA

Preparer's Signature

Date \_\_\_\_\_

2021-04-13

Check if self-employed ► ☐

PTIN

P02103452

Firm's name ► PKF O'CONNOR DAVIES LLP

Firm's EIN ► 27-1728945

Firm's address ► 500 MAMARONECK AVE SUITE 301

HARRISON, NY 105281648

Phone no. (212) 286-2600

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

| (a) Name and address                                                | Title, and average hours per week (b) devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | Expense account, (e) other allowances |
|---------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| CAROLINE C WILLIAMSON                                               | DIRECTOR, PRESIDENT, TREASURER<br>17.50                   | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| RICHARD L CHILTON JR                                                | DIRECTOR, SENIOR VICE PRESIDENT<br>0.10                   | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| JONATHAN M WAINWRIGHT                                               | SECRETARY<br>0.10                                         | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| ANN COLLEY                                                          | DIRECTOR<br>0.10                                          | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| JAMES CHAPPELLE HILL III                                            | DIRECTOR<br>0.10                                          | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| CHARLES AYCOCK MCLENDON JR                                          | DIRECTOR<br>0.10                                          | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| ALEXANDER TUCKER ROBERTSON                                          | DIRECTOR<br>0.10                                          | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| CAROLINE COSTNER WILLIAMSON                                         | DIRECTOR<br>0.10                                          | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |
| BENJAMIN ROBERT WILLIAMSON III                                      | DIRECTOR<br>0.10                                          | 0                                         | 0                                                                     | 0                                     |
| C/O CHILTON INVESTMENT CO 300 PARK AVENUE<br>NEW YORK, NY 100227407 |                                                           |                                           |                                                                       |                                       |

**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

|                            |
|----------------------------|
| CAROLINE C WILLIAMSON      |
| JONATHAN M WAINWRIGHT      |
| ANN COLLEY                 |
| CHARLES AYCOCK MCLENDON JR |
| ALEXANDER TUCKER ROBERTSON |

| 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 any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount  |
| Name and address (home or business)                                                                      |                                                                                                           |                                |                                  |         |
| <b>a</b> <i>Paid during the year</i>                                                                     |                                                                                                           |                                |                                  |         |
| BOYS CLUB OF WAKE COUNTY<br>701 N RALEIGH BOULEVARD<br>RALEIGH, NC 276101692                             | N/A                                                                                                       | PC                             | GENERAL OPERATING SUPPORT        | 15,000  |
| CHILDRENS VILLAGEONE ECHO HILLS<br>DOBBS FERRY, NY 105223600                                             | N/A                                                                                                       | PC                             | GENERAL OPERATING SUPPORT        | 40,000  |
| CULTURE FOR ONE<br>110 E 42ND STREET SUITE 1818<br>NEW YORK, NY 100175645                                | N/A                                                                                                       | PC                             | GENERAL OPERATING SUPPORT        | 30,000  |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 290,285 |



| 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 any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount  |
| Name and address (home or business)                                                                      |                                                                                                           |                                |                                  |         |
| <b>a</b> <i>Paid during the year</i>                                                                     |                                                                                                           |                                |                                  |         |
| EXPONENT PHILANTHROPY<br>1720 N STREET NW<br>WASHINGTON, DC 200362907                                    | N/A                                                                                                       | PC                             | GENERAL OPERATING SUPPORT        | 35      |
| HARLEM GROWN<br>127 W 127TH STREET SUITE 201<br>NEW YORK, NY 100273723                                   | N/A                                                                                                       | PC                             | GENERAL OPERATING SUPPORT        | 15,000  |
| HUDSON RIVER COMMUNITY SAILING<br>PO BOX 20677<br>NEW YORK, NY 100110012                                 | N/A                                                                                                       | PC                             | GENERAL OPERATING SUPPORT        | 20,000  |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 290,285 |

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

| Recipient                                                                        | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                   | Amount  |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|---------|
| Name and address (home or business)                                              |                                                                                                                    |                                      |                                                       |         |
| <b>a</b> <i>Paid during the year</i>                                             |                                                                                                                    |                                      |                                                       |         |
| NEW LIFE OF NYPO BOX 316<br>BRONX, NY 104650316                                  | N/A                                                                                                                | PC                                   | GENERAL OPERATING SUPPORT                             | 30,000  |
| NEW YORK BOTANICAL GARDEN<br>2900 SOUTHERN BOULEVARD<br>BRONX, NY 104585126      | N/A                                                                                                                | PC                                   | GENERAL OPERATING SUPPORT<br>FOR CHILDREN'S EDUCATION | 25,000  |
| NYU SCHOOL OF SOCIAL WORK<br>1 WASHINGTON SQUARE NORTH<br>NEW YORK, NY 100036654 | N/A                                                                                                                | PC                                   | ADAPTIVE LEADERSHIP COURSE<br>- SPRING 2020 SEMESTER  | 25,000  |
| <b>Total . . . . . ▶ 3a</b>                                                      |                                                                                                                    |                                      |                                                       | 290,285 |

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

| Recipient                                                                        | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                | Amount  |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------|---------|
| Name and address (home or business)                                              |                                                                                                                    |                                      |                                                    |         |
| <b>a</b> <i>Paid during the year</i>                                             |                                                                                                                    |                                      |                                                    |         |
| NYU SCHOOL OF SOCIAL WORK<br>1 WASHINGTON SQUARE NORTH<br>NEW YORK, NY 100036654 | N/A                                                                                                                | PC                                   | ADAPTIVE LEADERSHIP COURSE<br>- FALL 2020 SEMESTER | 25,000  |
| PAVE SCHOOLS238 CONOVER STREET<br>BROOKLYN, NY 112311020                         | N/A                                                                                                                | PC                                   | GENERAL OPERATING SUPPORT                          | 40,000  |
| PHILANTHROPY NEW YORK<br>320 EAST 43RD STREET<br>NEW YORK, NY 100174801          | N/A                                                                                                                | PC                                   | GENERAL OPERATING SUPPORT                          | 250     |
| <b>Total . . . . . ▶ 3a</b>                                                      |                                                                                                                    |                                      |                                                    | 290,285 |

| 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 any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                     | Amount  |
| Name and address (home or business)                                                                                  |                                                                                                           |                                |                                                      |         |
| <b>a</b> <i>Paid during the year</i>                                                                                 |                                                                                                           |                                |                                                      |         |
| UNC CHAPEL HILL FOUNDATION<br>PO BOX 309<br>CHAPEL HILL, NC 275140309                                                | N/A                                                                                                       | PC                             | B. ROBERT WILIAMSON JR.<br>DISTINGUISHED SCHOLARSHIP | 25,000  |
| <b>Total</b> . . . . .  <b>3a</b> |                                                                                                           |                                |                                                      | 290,285 |

**TY 2020 Accounting Fees Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818

| <b>Category</b>                                          | <b>Amount</b> | <b>Net Investment<br/>Income</b> | <b>Adjusted Net<br/>Income</b> | <b>Disbursements<br/>for Charitable<br/>Purposes</b> |
|----------------------------------------------------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| FINANCIAL STATEMENT REVIEW AND<br>TAX RETURN PREPARATION | 10,406        | 0                                |                                | 10,406                                               |

**TY 2020 General Explanation Attachment****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818**General Explanation Attachment**

| Identifier | Return Reference | Explanation                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|------------|------------------|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          |                  | FORM 990-PF;<br>PAGE 9; PART<br>XIII; LINE 7 | ELECTION TO TREAT UNUSED PRIOR YEARS CORPUS DISTRIBUTIONS AS CURRENT YEAR CORPUS DISTRIBUTIONS.THE FOUNDATION RECEIVED CONTRIBUTIONS FROM NONOPERATING PRIVATE FOUNDATIONS WHICH IT EXPENSED OR REDISTRIBUTED. THE FOUNDATION IS ELECTING TO TREAT THE \$45,700 NOT AS A QUALIFYING DISTRIBUTION BUT AS A DISTRIBUTION OUT OF CORPUS.PURSUANT TO IRS REG. 53.4942(A)-3(C)(2)(IV), THE FOUNDATION HEREBY ELECTS TO TREAT, AS A CURRENT CORPUS DISTRIBUTION, THE FOLLOWING UNUSED PRIOR TAX YEARS' DISTRIBUTIONS THAT WERE TREATED AS CORPUS DISTRIBUTIONS UNDER IRS REG. 53.4942(A)-3(D)(1)(III) IN SUCH PRIOR TAX YEARS: TAX YEAR - 2015, AMOUNT - \$45,700 |

**TY 2020 Investments Corporate Bonds Schedule**

**Name:** B ROBERT WILLIAMSON JR FOUNDATION  
**EIN:** 45-5374818

**Investments Corporate Bonds Schedule**

| Name of Bond                                                                 | End of Year Book Value | End of Year Fair Market Value |
|------------------------------------------------------------------------------|------------------------|-------------------------------|
| AFRICAN DEV BK GLOBAL MEDIUM TERM 2.375% 09/23/21 (00828EBD0) 2,000 QTY      | 2,032                  | 2,032                         |
| ALLSTATE CORP FXD RT SR 3.150% 06/15/23 (020002AZ4) 5,000 QTY                | 5,335                  | 5,335                         |
| AMAZON COM INC FXD RT SR NT 2.400% 02/22/23 (023135AW6) 5,000 QTY            | 5,218                  | 5,218                         |
| AMERICAN TOWER CORP NEW SR NT 3.500% 01/31/23 (03027XAB6) 5,000 QTY          | 5,301                  | 5,301                         |
| APPLE INC FXD RT SR NT 2.150% 02/09/22 (037833AY6) 5,000 QTY                 | 5,104                  | 5,104                         |
| BANK AMER CORP SR FIXED RT NT SER L 5.700% 01/24/22 (06051GEM7) 5,000 QTY    | 5,284                  | 5,284                         |
| BRISTOL MYERS SQUIBB CO SR NT 3.250% 08/15/22 (110122CW6) 5,000 QTY          | 5,238                  | 5,238                         |
| CATERPILLAR FINL SVCS CORP MEDIUM TERM 2.650% 05/17/21 (14913Q2W8) 5,000 QTY | 5,044                  | 5,044                         |
| CELGENE CORP FXD RT SR NT 2.875% 02/19/21 (151020BC7) 10,000 QTY             | 10,032                 | 10,032                        |
| CHARTER COMMUNICATIONS OPER 4.464% 07/23/22 (161175BB9) 5,000 QTY            | 5,271                  | 5,271                         |
| CISCO SYS INC FXD RT SR NT 1.850% 09/20/21 (17275RBJ0) 5,000 QTY             | 5,050                  | 5,050                         |
| CVS HEALTH CORP SR NT 2.750% 12/01/22 (126650BZ2) 5,000 QTY                  | 5,198                  | 5,198                         |
| DEERE JOHN CAP CORP MEDIUM TERM 0.550% 07/05/22 (24422EVG1) 5,000 QTY        | 5,024                  | 5,024                         |
| DUKE ENERGY CORP NEW FXD RT SR NT 1.800% 09/01/21 (26441CAR6) 5,000 QTY      | 5,043                  | 5,043                         |
| EASTMAN CHEM CO NT 3.600% 08/15/22 (277432AN0) 6,000 QTY                     | 6,268                  | 6,268                         |
| EXXON MOBIL CORP NT 1.902% 08/16/22 (30231GBB7) 5,000 QTY                    | 5,144                  | 5,144                         |
| FIFTH THIRD BANCORP FXD RT SR NT 2.600% 06/15/22 (316773CU2) 5,000 QTY       | 5,153                  | 5,153                         |
| FOX CORP SR NT 3.666% 01/25/22 (35137LAF2) 5,000 QTY                         | 5,175                  | 5,175                         |
| GENERAL DYNAMICS CORP GTD FXD RT NT 3.000% 05/11/21 (369550BE7) 5,000 QTY    | 5,048                  | 5,048                         |
| HASBRO INC NOTE 3.150% 05/15/21(418056AT4) 5,000 QTY                         | 5,023                  | 5,023                         |

**Investments Corporate Bonds Schedule**

| Name of Bond                                                                 | End of Year Book Value | End of Year Fair Market Value |
|------------------------------------------------------------------------------|------------------------|-------------------------------|
| HONEYWELL INTL INC SR NT 0.483% 08/19/22 (438516CC8) 5,000 QTY               | 5,008                  | 5,008                         |
| INTEL CORP SR NT 2.700% 12/15/22 (458140AM2) 5,000 QTY                       | 5,237                  | 5,237                         |
| INTERNATIONAL BK FOR RECON & DEV SR NT 2.125% 07/01/22 (459058GU1) 5,000 QTY | 5,145                  | 5,145                         |
| KINROSS GOLD CORP SR NT 5.125% 09/01/21 (496902AJ6) 5,000 QTY                | 5,090                  | 5,090                         |
| KROGER CO FXD RT 3.850% 08/01/23 (501044CS8) 5,000 QTY                       | 5,389                  | 5,389                         |
| LABORATORY CORP AMER HLDGS FXD RT NT 3.200% 02/01/22 (50540RAP7) 5,000 QTY   | 5,149                  | 5,149                         |
| MARRIOTT INTL INC NEW FXD RT NT SER-O 2.875% 03/01/21 (571903AN3) 5,000 QTY  | 5,008                  | 5,008                         |
| MICRON TECHNOLOGY INC SR NT 2.497% 04/24/23 (595112BR3) 5,000 QTY            | 5,210                  | 5,210                         |
| NATIONAL RURAL UTILS COOP FIN CORP NTS 2.900% 03/15/21 (63743HER9) 5,000 QTY | 5,025                  | 5,025                         |
| NUTRIEN LTD SR NT 1.900% 05/13/23 (67077MAV0) 5,000 QTY                      | 5,165                  | 5,165                         |
| OMEGA HEALTHCARE INVS INC GTD FXD RT 4.375% 08/01/23 (681936BJ8) 5,000 QTY   | 5,407                  | 5,407                         |
| PACCAR FINL CORP MEDIUM TERM SR FXD NT 3.150% 08/09/21 (69371RP42) 5,000 QTY | 5,086                  | 5,086                         |
| PAYPAL HLDGS INC NT 2.200% 09/26/22 (70450YAB9) 5,000 QTY                    | 5,166                  | 5,166                         |
| PFIZER INC FXD RT NT 3.000% 09/15/21 (717081EM1) 5,000 QTY                   | 5,099                  | 5,099                         |
| PNC FDG CORP GTD SR NT 3.300% 03/08/22 (693476BN2) 5,000 QTY                 | 5,164                  | 5,164                         |
| QUALCOMM INC FXD RT NT 3.000% 05/20/22 (747525AE3) 5,000 QTY                 | 5,189                  | 5,189                         |
| REGENCY ENERGY FIN CORP GTD SR NT 5.875% 03/01/22 (75886AAL2) 5,000 QTY      | 5,228                  | 5,228                         |
| SOUTHERN PWR CO FXD RT SR NT 2016E 2.500% 12/15/21 (843646AT7) 5,000 QTY     | 5,093                  | 5,093                         |
| THERMO FISHER SCIENTIFIC INC FXD NT 3.000% 04/15/23 (883556BN1) 5,000 QTY    | 5,277                  | 5,277                         |
| UNITED PARCEL SVC INC FXD RT SR NT 2.050% 04/01/21 (911312BP0) 5,000 QTY     | 5,020                  | 5,020                         |



**Investments Corporate Bonds Schedule**

| <b>Name of Bond</b>                                                       | <b>End of Year Book Value</b> | <b>End of Year Fair Market Value</b> |
|---------------------------------------------------------------------------|-------------------------------|--------------------------------------|
| UNITEDHEALTH GROUP INC SR NT 2.875% 03/15/22 (91324PBV3)<br>5,000 QTY     | 5,122                         | 5,122                                |
| ZIMMER BIOMET HLDGS INC FIXED RT 3.375% 11/30/21<br>(98956PAC6) 5,000 QTY | 5,098                         | 5,098                                |

**TY 2020 Investments Corporate Stock Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818**Investments Corporation Stock Schedule**

| <b>Name of Stock</b>                                | <b>End of Year Book Value</b> | <b>End of Year Fair Market Value</b> |
|-----------------------------------------------------|-------------------------------|--------------------------------------|
| ADAPTIVE BIOTECHNOLOGIES CORP (ADPT) 229.000 SHARES | 13,541                        | 13,541                               |
| AMERICAN PUB ED INC (APEI) 1,000.000 SHARES         | 30,480                        | 30,480                               |
| BALL CORP (BLL) 1,893.000 SHARES                    | 176,390                       | 176,390                              |
| CINTAS CORP (CTAS) 202.000 SHARES                   | 71,399                        | 71,399                               |
| FIVE BELOW INC (FIVE) 443.000 SHARES                | 77,516                        | 77,516                               |
| HOME DEPOT INC (HD) 361.000 SHARES                  | 95,889                        | 95,889                               |
| KANSAS CITY SOUTHN (KSU) 599.000 SHARES             | 122,274                       | 122,274                              |
| METTLER-TOLEDO INTL INC (MTD) 45.000 SHARES         | 51,286                        | 51,286                               |
| MICROSOFT CORP (MSFT) 498.000 SHARES                | 110,765                       | 110,765                              |
| REPUBLIC SVCS INC (RSG) 555.000 SHARES              | 53,447                        | 53,447                               |
| SHERWIN WILLIAMS CO (SHW) 126.000 SHARES            | 92,598                        | 92,598                               |
| SONOCO PRODS CO (SON) 85.000 SHARES                 | 5,036                         | 5,036                                |
| UNION PAC CORP (UNP) 564.000 SHARES                 | 117,436                       | 117,436                              |
| VROOM INC (VRM) 488.000 SHARES                      | 19,993                        | 19,993                               |

**TY 2020 Investments Government Obligations Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818**US Government Securities - End  
of Year Book Value:**

20,407

**US Government Securities - End  
of Year Fair Market Value:**

20,407

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

**TY 2020 Other Expenses Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818**Other Expenses Schedule**

| Description                | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|----------------------------|--------------------------------------|--------------------------|------------------------|---------------------------------------------|
| DUES AND SUBSCRIPTIONS     | 1,686                                | 0                        |                        | 1,686                                       |
| FILING FEES                | 2,121                                | 0                        |                        | 2,121                                       |
| INFORMATION TECHNOLOGIES   | 8,353                                | 0                        |                        | 8,353                                       |
| OFFICE AND OTHER EXPENSES  | 706                                  | 0                        |                        | 706                                         |
| OTHER PROGRAM EXPENSES     | 775                                  | 0                        |                        | 775                                         |
| SPECIAL FUNDRAISING EVENTS | 27,709                               | 0                        |                        | 27,709                                      |

## TY 2020 Other Income Schedule

**Name:** B ROBERT WILLIAMSON JR FOUNDATION

**EIN:** 45-5374818

### Other Income Schedule

| Description                                  | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |
|----------------------------------------------|-----------------------------------|--------------------------|---------------------|
| GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS | 23,217                            |                          | 23,217              |

**TY 2020 Other Increases Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818**Other Increases Schedule**

| Description                    | Amount  |
|--------------------------------|---------|
| UNREALIZED GAIN ON INVESTMENTS | 185,131 |

**TY 2020 Other Professional Fees Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818

| <b>Category</b>                       | <b>Amount</b> | <b>Net Investment<br/>Income</b> | <b>Adjusted Net<br/>Income</b> | <b>Disbursements<br/>for Charitable<br/>Purposes</b> |
|---------------------------------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| INVESTMENT MANAGEMENT AND<br>ADVISORY | 342           | 342                              |                                | 0                                                    |

**TY 2020 Taxes Schedule****Name:** B ROBERT WILLIAMSON JR FOUNDATION**EIN:** 45-5374818**Taxes Schedule**

| <b>Category</b>         | <b>Amount</b> | <b>Net Investment<br/>Income</b> | <b>Adjusted Net<br/>Income</b> | <b>Disbursements<br/>for Charitable<br/>Purposes</b> |
|-------------------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| FEDERAL EXCISE TAX PAID | 2,500         | 0                                |                                | 0                                                    |
| FOREIGN TAXES WITHHELD  | 41            | 41                               |                                | 0                                                    |



|                                                                                                                  |  |                                                                                                                                                                                     |  |                                              |                   |
|------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|-------------------|
| efile GRAPHIC print - DO NOT PROCESS                                                                             |  | As Filed Data -                                                                                                                                                                     |  | DLN: 93491116006061                          |                   |
| <b>Schedule B</b><br>(Form 990, 990-EZ, or 990-PF)<br><br>Department of the Treasury<br>Internal Revenue Service |  | <b>Schedule of Contributors</b><br><br>▶ Attach to Form 990, 990-EZ, or 990-PF.<br>▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information. |  |                                              | OMB No. 1545-0047 |
|                                                                                                                  |  |                                                                                                                                                                                     |  |                                              | <b>2020</b>       |
| Name of the organization<br>B ROBERT WILLIAMSON JR FOUNDATION                                                    |  |                                                                                                                                                                                     |  | Employer identification number<br>45-5374818 |                   |

Organization type (check one):

|                    |                                                                                                           |
|--------------------|-----------------------------------------------------------------------------------------------------------|
| <b>Filers of:</b>  | <b>Section:</b>                                                                                           |
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)( ) (enter number) organization                                            |
|                    | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation |
|                    | <input type="checkbox"/> 527 political organization                                                       |
| Form 990-PF        | <input checked="" type="checkbox"/> 501(c)(3) exempt private foundation                                   |
|                    | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation            |
|                    | <input type="checkbox"/> 501(c)(3) taxable private foundation                                             |

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
B ROBERT WILLIAMSON JR FOUNDATION

**Employer identification number**

45-5374818

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4           | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                      |
|------------|---------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| —          | See Additional Data Table<br>_____<br>_____ | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |
| —          | _____<br>_____<br>_____                     | \$ _____                   | <b>Person</b> <input type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br><br>(Complete Part II for noncash contribution.) |

Name of organization  
B ROBERT WILLIAMSON JR FOUNDATION

**Employer identification number**

45-5374818

| <b>Part II Noncash Property</b> |                                                                                                                                    |                                                |                      |
|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------|
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given<br>(see instructions). Use duplicate copies of Part II if additional space is needed. | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| <u>5</u>                        | WALT DISNEY CO (DIS) 76.000 SHARES                                                                                                 | \$ 9,864                                       | 2020-08-20           |
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given                                                                                       | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| <u>6</u>                        | ALPHABET INC CL A (GOOGL) 12.000 SHARES                                                                                            | \$ 18,915                                      | 2020-08-25           |
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given                                                                                       | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                               |                                                                                                                                    | \$                                             |                      |
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given                                                                                       | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                               |                                                                                                                                    | \$                                             |                      |
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given                                                                                       | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                               |                                                                                                                                    | \$                                             |                      |
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given                                                                                       | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                               |                                                                                                                                    | \$                                             |                      |
| (a)<br>No. from<br>Part I       | (b)<br>Description of noncash property given                                                                                       | (c)<br>FMV (or estimate)<br>(See instructions) | (d)<br>Date received |
| -                               |                                                                                                                                    | \$                                             |                      |

45-5374818

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Additional Data

Software ID:  
Software Version:  
EIN: 45-5374818  
Name: B ROBERT WILLIAMSON JR FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution                                                                 |
|------------|-------------------------------------|----------------------------|---------------------------------------------------------------------------------------------|
| <u>1</u>   | BROOKE ANN MORROW                   | <u>\$ 10,000</u>           | Person <input checked="" type="checkbox"/>                                                  |
|            | 999 SOUTH SHADY GROVE ROAD SUITE 50 |                            | Payroll <input type="checkbox"/>                                                            |
|            | MEMPHIS, TN 38120                   |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.)            |
| <u>2</u>   | ALEX ROBERTSON                      | <u>\$ 10,100</u>           | Person <input checked="" type="checkbox"/>                                                  |
|            | 136 EAST 64TH STREET APT 10E        |                            | Payroll <input type="checkbox"/>                                                            |
|            | NEW YORK, NY 10065                  |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.)            |
| <u>3</u>   | ARTHUR T WILLIAMS III               | <u>\$ 10,000</u>           | Person <input checked="" type="checkbox"/>                                                  |
|            | 19 EAST 72ND STREET APT 5D          |                            | Payroll <input type="checkbox"/>                                                            |
|            | NEW YORK, NY 10021                  |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.)            |
| <u>4</u>   | BLANCHE R BACON                     | <u>\$ 12,000</u>           | Person <input checked="" type="checkbox"/>                                                  |
|            | 4030 CARDINAL AT NORTH HILLS ST APT |                            | Payroll <input type="checkbox"/>                                                            |
|            | RALEIGH, NC 27609                   |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.)            |
| <u>5</u>   | CAROLINE WILLIAMSON                 | <u>\$ 10,029</u>           | Person <input checked="" type="checkbox"/>                                                  |
|            | 1148 5TH AVENUE                     |                            | Payroll <input type="checkbox"/>                                                            |
|            | NEW YORK, NY 10128                  |                            | Noncash <input checked="" type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>6</u>   | CHARLES MCLENDON                    | <u>\$ 18,915</u>           | Person <input type="checkbox"/>                                                             |
|            | 49 LAURENS STREET                   |                            | Payroll <input type="checkbox"/>                                                            |
|            | CHARLESTON, SC 29401                |                            | Noncash <input checked="" type="checkbox"/><br>(Complete Part II for noncash contribution.) |

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution                                                             |
|------------|-----------------------------------|----------------------------|-----------------------------------------------------------------------------------------|
| <u>7</u>   | CHILTON INVESTMENT COMPANY LLC    | \$ 50,000                  | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 1290 E MAIN ST 1ST FLOOR          |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | STAMFORD, CT 06902                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>8</u>   | DAVID C SAUNDERS                  | \$ 10,000                  | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 160 PEAR TREE POINT ROAD          |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | DARIEN, CT 06820                  |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>9</u>   | FRANK K BYNUM JR                  | \$ 5,000                   | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | C/O GELLER COMPANY PO BOX 1510    |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10150                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>10</u>  | JACQUELINE HUFF                   | \$ 10,000                  | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 993 5TH AVENUE 6TH FLOOR          |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10028                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>11</u>  | JOANN B WALKER                    | \$ 10,180                  | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 880 FIFTH AVENUE PH-E             |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10021                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>12</u>  | JONATHAN M WAINWRIGHT             | \$ 5,000                   | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 1112 PARK AVE                     |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10128                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution                                                             |
|------------|-----------------------------------|----------------------------|-----------------------------------------------------------------------------------------|
| <u>13</u>  | THE ROBERTSON FOUNDATION          | \$ 10,000                  | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 150 CENTRAL PARK SOUTH            |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10019                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>14</u>  | JULIAN S ROBERTSON                | \$ 10,000                  | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 44 SIDNEY PLACE                   |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | BROOKLYN, NY 11201                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>15</u>  | LEE AINSLIE                       | \$ 5,000                   | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 1900 N PEARL STREET 20TH FLOOR    |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | DALLAS, TX 75201                  |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>16</u>  | MARTIN HORNER                     | \$ 5,000                   | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 139 E 94TH ST 6A                  |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10128                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>17</u>  | MINALIE CHEN                      | \$ 5,000                   | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 115 CENTRAL PARK WEST 5C          |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10023                |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| <u>18</u>  | REALAN FOUNDATION INC             | \$ 5,000                   | <b>Person</b> <input checked="" type="checkbox"/>                                       |
|            | 3350 RIVERWOOD PARKWAY SUITE 700  |                            | <b>Payroll</b> <input type="checkbox"/>                                                 |
|            | ATLANTA, GA 30339                 |                            | <b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4          | (c)<br>Total contributions | (d)<br>Type of contribution                                                      |
|------------|--------------------------------------------|----------------------------|----------------------------------------------------------------------------------|
| 19         | RICHARD PAYNE AND MARY STAFFORD            | \$ 7,000                   | Person <input checked="" type="checkbox"/>                                       |
|            | 2109 PRINCETON AVENUE                      |                            | Payroll <input type="checkbox"/>                                                 |
|            | CHARLOTTE, NC 28207                        |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| 20         | ROSS GOUGH                                 | \$ 5,000                   | Person <input checked="" type="checkbox"/>                                       |
|            | 415 GREENWICH STREET APT 7F                |                            | Payroll <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10013                         |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| 21         | THE CHASE AND STEPHANIE COLEMAN FOUNDATION | \$ 10,000                  | Person <input checked="" type="checkbox"/>                                       |
|            | 101 PARK AVENUE                            |                            | Payroll <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10178                         |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| 22         | THE MOORE CHARITABLE FOUNDATION            | \$ 9,600                   | Person <input checked="" type="checkbox"/>                                       |
|            | 11 TIMES SQUARE                            |                            | Payroll <input type="checkbox"/>                                                 |
|            | NEW YORK, NY 10036                         |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| 23         | WILLIAM H WALTON III                       | \$ 5,000                   | Person <input checked="" type="checkbox"/>                                       |
|            | ONE INDEPENDENT DRIVE SUITE 1600           |                            | Payroll <input type="checkbox"/>                                                 |
|            | JACKSONVILLE, FL 32202                     |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
| 24         | WYNDHAM ROBERTSON                          | \$ 15,000                  | Person <input checked="" type="checkbox"/>                                       |
|            | 205 CEDAR BERRY LANE                       |                            | Payroll <input type="checkbox"/>                                                 |
|            | CHAPEL HILL, NC 27517                      |                            | Noncash <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |



**Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.**

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                             |
|------------|-----------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <u>25</u>  | CPAYSON COLEMAN JR                | <u>\$ 5,000</u>            | <b>Person</b> <input checked="" type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
|            | 309 VIA LINDA                     |                            |                                                                                                                                                                                         |
|            | PALM BEACH, FL 33480              |                            |                                                                                                                                                                                         |
| <u>26</u>  | D ALAN QUARTERMAN                 | <u>\$ 5,000</u>            | <b>Person</b> <input checked="" type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
|            | 469 BLACKLAND ROAD NW             |                            |                                                                                                                                                                                         |
|            | ATLANTA, GA 30342                 |                            |                                                                                                                                                                                         |
| <u>27</u>  | ELLIOT GULKOWITZ                  | <u>\$ 5,000</u>            | <b>Person</b> <input checked="" type="checkbox"/><br><b>Payroll</b> <input type="checkbox"/><br><b>Noncash</b> <input type="checkbox"/><br>(Complete Part II for noncash contribution.) |
|            | 55 BROADWAY                       |                            |                                                                                                                                                                                         |
|            | NEW YORK, NY 10006                |                            |                                                                                                                                                                                         |