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## DLN: 93491210004042

2020

OMB No. 1545-0052

## Form 990-PF

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2020, or tax year beginning 01-01-20	)20 , aı	nd en	ding 12-31-	2020	_			
		ndation n Foundation			A Employer id	entification numbe	r			
га	ik-Griiiii	ii Foundation			52-2255664					
		l street (or P.O. box number if mail is not delivered to street address) Oats Circle	Room/suite		<b>B</b> Telephone number (see instructions)					
					(843) 237-5560					
		, state or province, country, and ZIP or foreign postal code nd, SC 29585		<b>C</b> If exemption	application is pending	g, check here				
<b>G</b> Cł	neck al	I that apply: Initial return Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	re			
		Final return Amended return	,		2. Foreign o	ganizations meeting	the 85%			
		Address change Name change	test, chec	k here and attach cor	mputation 🕨 🔲					
H C	neck ty	pe of organization: $\square$ Section 501(c)(3) exempt private	foundation			undation status was t n 507(b)(1)(A), chec				
	Section	4947(a)(1) nonexempt charitable trust  Other taxabl	e private foundation							
of	year (f	tet value of all assets at end rom Part II, col. (c),  ▶\$ 809,520  J Accounting method:  □ Other (specify)  (Part I, column (d) must	✓ Cash ☐ Accru	ıal		ation is in a 60-month n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)	24,000							
	2	Check ▶ ☑ if the foundation is <b>not</b> required to attach								
	3	Sch. B Interest on savings and temporary cash investments	185		185					
	4	Dividends and interest from securities	7,403		7,403					
KIE	5a	Gross rents								
	ь	Net rental income or (loss)								
	6a	Net gain or (loss) from sale of assets not on line 10								
Revenue	b	Gross sales price for all assets on line 6a								
æ	7	Capital gain net income (from Part IV, line 2)			311,382					
	8	Net short-term capital gain				3,825				
	10a	Gross sales less returns and allowances								
	ь	Less: Cost of goods sold	<u></u>							
	c	Gross profit or (loss) (attach schedule)	0							
	11	Other income (attach schedule)	0							
	12	Total. Add lines 1 through 11	31,588		318,970	3,825				
	13	Compensation of officers, directors, trustees, etc.								
	14	Other employee salaries and wages								
ses	15	Pension plans, employee benefits	0							
en	16a	,								
Ехр		Accounting fees (attach schedule)	750							
ve	1 °	· · · · · · · · · · · · · · · · · · ·	0							
rati	17 18	Taxes (attach schedule) (see instructions)	<b>9</b> 626							
nist	19	Depreciation (attach schedule) and depletion	0							
Ē	20	Occupancy								
Ad	21	Travel, conferences, and meetings								
and	22	Printing and publications								
Operating and Administrative Expenses	23	Other expenses (attach schedule)	0							
ati	24	Total operating and administrative expenses.								
be		Add lines 13 through 23	1,376		0		0			
0	25	Contributions, gifts, grants paid	91,338				0			
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	92,714		0		0			
	27	Subtract line 26 from line 12:								
	a	Excess of revenue over expenses and disbursements	-61,126							
	ь	Net investment income (if negative, enter -0-)			318,970					
	С	Adjusted net income (if negative, enter -0-)				3,825				
For	Paper	work Reduction Act Notice, see instructions.			Cat. No. 11289)	( For	m <b>990-PF</b> (2020)			

Pa	rt II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End o	f year
	<u> </u>		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest	-	3,687	1,318	
	2		orary cash investments	26,262	17,202	17,202
	3	Accounts receivable				
			doubtful accounts			
	4	Pledges receivable	<b>&gt;</b>			
		Less: allowance for	doubtful accounts P			
	5	Grants receivable				
	6	Receivables due fro	om officers, directors, trustees, and other			
		disqualified persons	s (attach schedule) (see instructions)		0	
	7	Other notes and loa	ans receivable (attach schedule) 🕨			
		Less: allowance for	doubtful accounts <b>&gt;</b>		0	
Ş	8	Inventories for sale	e or use			
Assets	9	Prepaid expenses a	and deferred charges			_
As	10a	Investments—U.S.	and state government obligations (attach schedule)			
	b	Investments—corp	orate stock (attach schedule)	363,848	<b>9</b> 645,632	791,000
	l c	Investments—corp	orate bonds (attach schedule)		_	
	11	Investments—land	, buildings, and equipment: basis >			
			depreciation (attach schedule)		0	
	12		gage loans			
	13		r (attach schedule)		0	
	14		d equipment: basis ►		-	
	* *		depreciation (attach schedule)		0	
	15		ribe	0	0	0
	16		e completed by all filers—see the	- V		
	16		see page 1, item I)	393,797	664,152	809,520
		<u> </u>		393,797	004,132	
	17	• •	and accrued expenses			
s	18					
itie	19					
Liabilities	20		, directors, trustees, and other disqualified persons		0	
Lia	21		er notes payable (attach schedule)		0	
	22		escribe <b>&gt;</b> )	0	0	
	23	Total liabilities(ad	dd lines 17 through 22)		0	
es		Foundations that	follow FASB ASC 958, check here			
			es 24, 25, 29 and 30.			
<u> </u>	24	Net assets without	donor restrictions	393,797	664,152	
ä	25	Net assets with dor	nor restrictions			
pu						
or Fund Balanc			do not follow FASB ASC 958, check here			
ō	26	-	es 26 through 30.			
Assets	26		principal, or current funds			
556	27		urplus, or land, bldg., and equipment fund			
	28	<b>3</b> ,	accumulated income, endowment, or other funds			
Net	29	Total net assets of	or fund balances (see instructions)	393,797	664,152	
_	100	Takal Babilisia	ad mak accets /fried balances / e. e. to storett	1 202 707	CC4 450	

393,797

664,152

393,797

-61,126

331,481

664,152

664,152 Form **990-PF** (2020)

1

2

3

4

5

6

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

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

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

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

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

Page 2

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30 Part III

> 2 3

> 4

5

Page **3** 

• /	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1aSee Additional Data Tab	le					
b						
С						
d						
e						
<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Tab	le					
b						
c						
d						
е						
Complete only for asset	s showing gain in column (h) and ov	•			<b>(I)</b>	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> : of col. (i) l. (j), if any	col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))	
a See Additional Data Tab	le					
b						
c						
d						
e						
2 Capital gain net income	e or (net capital loss)	If gain, also enter in P If (loss), enter -0- in F		2	311,382	
•	gain or (loss) as defined in sections					
in Part I, line 8	art I, line 8, column (c) (see instruct	, , ,,	}	3	3,825	
_	Under Section 4940(e) for R			ncome		
SECTION 4940(e) REPEA	ALED ON DECEMBER 20, 2019	9 - DO NOT COMPL	ETE			
1 Reserved						
<b>(a)</b> Reserved	(b) Reserved	(c) Reserved		<b>(d)</b> Reserved		
2 Reserved			2			
			· · · · <u>  -</u>	<del>-</del>		
				<del> </del>		
				_L		
<b>5</b> Reserved			5			
<b>6</b> Reserved			6	<u>_</u> L		
<b>7</b> Reserved			7			
<b>8</b> Reserved ,			8			

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Pa	rt VIII-B Statements Regar	ding	<b>Activities for Which</b>	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation	pay o	r incur any amount to:				Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes 🗸	No.		
	(2) Influence the outcome of any	specifi	c public election (see sect	140				
	on, directly or indirectly, any v	oter re	egistration drive?	No				
	(3) Provide a grant to an individua	al for t	ravel, study, or other sim	No				
	(4) Provide a grant to an organiza							
	in section 4945(d)(4)(A)? See			No				
	(5) Provide for any purpose other		• .					
	educational purposes, or for th	•	•		∟ Yes 💌	No		
b	If any answer is "Yes" to 5a(1)-(5)		= =					
	Regulations section 53.4945 or in a				_	5b	1	-
_	Organizations relying on a current							
С	If the answer is "Yes" to question!			•				
	tax because it maintained expendit If "Yes," attach the statement requ				· · L Yes L	No		
6-	•		<del>-</del>					
6a	Did the foundation, during the yea a personal benefit contract?	-		mairectly, to pay premit				
b	Did the foundation, during the year			lirectly on a personal be	refit contract?	No 6b		No
b	If "Yes" to 6b, file Form 8870.	i, pay	premiums, directly or mo	illectiy, oli a persoliai be	nent contract:	05		110
7a	At any time during the tax year, w	as the	foundation a party to a r	rohibited tax shelter tran	nsaction?			
	If "Yes", did the foundation receive				∟ Yes 🖭	No 7b		
8	Is the foundation subject to the se		•					
	excess parachute payment during							
					· · <u> </u>	No L		
Pa	and Contractors	OIIIC	ers, Directors, Trust	lees, roundation Ma	mayers, mymy Paid En	ipioyees	,	
1	List all officers, directors, trusto	oos fo	undation managers ar	nd their compensation	See instructions			
	List all officers, unectors, truste		<b>b)</b> Title, and average	(c) Compensation (If	(d) Contributions to			
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans and	(e) Expense account, other allowances		
		<u> </u>	devoted to position	-0-)	deferred compensation			
	O Falk	Presi 0.00	dent	0	0			0
	Sea Oats Circle eys Island, SC 29585							
Marci	a Falk	Secre	etary	0	0			0
	Sea Oats Circle	0.00						
	eys Island, SC 29585 Griffin Falk-Todd	CFO		0	0			
	Old Augusta Drive	0.00		0	U			0
	eys Island, SC 29585							
2	Compensation of five highest-p	aid en	nployees (other than t	hose included on line 1	.—see instructions). If no	ne, enter '	NONE	."
(-)	Names and address of sack analysis		(b) Title, and average		(d) Contributions to	(a) Evenan		
(a)	Name and address of each employed more than \$50,000	e paiu	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Exper		
			devoted to position		compensation			
NON	E							
				•				
Tota	I number of other employees paid o	ver \$5	0,000			Form <b>99</b>		0

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see ins	tructions). If none, enter "NONE".
(a) Name and address of each person paid more than \$50,000	b) Type of service (c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	· · · · · · · • 0
Part IX-A Summary of Direct Charitable Activities	·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of Expenses
1 N/A	0
2	
3	
4	
Don't TV D. Commons of Discours Bolated Transchments (see inchreshing	
Part IX-B Summary of Program-Related Investments (see instructions  Describe the two largest program-related investments made by the foundation during the tax year on	
1 N/A	Amount 0
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
Iotal. Add lines 1 through 3	
	Form <b>990-FF</b> (2020)

2a |

2b

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

4,434

33.572

33.572

33.572

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Tax on investment income for 2020 from Part VI, line 5. . . . . .

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

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

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

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

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

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

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

Income tax for 2020. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

2a

3

4 5

6

1

2

3

4

5

b

Part XII

2020

Page 9

33,572

33,572

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_	 			_			_		_	_	- /
		ē	T	t	X	1	I	Ī	ı		Uı

orm 990-PF (2	020)	
Part XIII	Undistributed Income	(see instructions)

a Enter amount for 2019 only. . . . . .

1 Distributable amount for 2020 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2020:

- **b** Total for prior years: 20\_\_\_\_\_\_, 20\_\_\_\_\_\_ Excess distributions carryover, if any, to 2020: a From 2015. . . . . **b** From 2016. . . . .
- c From 2017. . . . d From 2018. . . . .
- e From 2019. . . . .
- 132,499 139.183 f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2020 from Part
  - 110,162 XII, line 4: ▶ \$

required—see instructions). . . . . . . . . . **d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . .

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2015 not

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . .

**b** Excess from 2017. .

c Excess from 2018. . . .

d Excess from 2019. . . e Excess from 2020. .

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

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

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

indicated below:

same amount must be shown in column (a).)

- a Applied to 2019, but not more than line 2a
- **b** Applied to undistributed income of prior years
  - (Election required—see instructions). . . . .
- c Treated as distributions out of corpus (Election

89.110 126,550

(a)

Corpus

(b)

Years prior to 2019

(c)

2019

597.504

597,504

89.110

508,394

126.550 132,499

139.183

110.162

F	art XIV	Private Operating Found	<b>ations</b> (see instru	ictions and Part V	II-A, question 9)		
1a		ion has received a ruling or det nd the ruling is effective for 20					
b	Check box to	indicate whether the organizati	on is a private opera	ating foundation des	cribed in section $\Box$	4942(j)(3) or	4942(j)(5)
2a		ser of the adjusted net	Tax year		Prior 3 years		(e) Total
		Part I or the minimum sturn from Part X for each	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017	(e) Iotai
b	85% of line 2	a					
C		tributions from Part XII, n year listed					
d	directly for ac	uded in line 2c not used tive conduct of exempt					
е	for active con	tributions made directly duct of exempt activities. 2d from line 2c					
3	Complete 3a, l alternative te	o, or c for the st relied upon:					
а	"Assets" alter	native test—enter:					
	` '	all assets					
		assets qualifying ction 4942(j)(3)(B)(i)					
b		alternative test— enter 2/3					
		investment return shown in					
_	· ·	for each year listed ernative test—enter:					
C		oport other than gross					
	investme	ent income (interest,					
		ls, rents, payments ities loans (section					
		(i)), or royalties)					
		from general public					
		more exempt ations as provided in					
		942(j)(3)(B)(iii)					
		amount of support					
		exempt organization vestment income					
_	<u> </u>	plementary Information	(Complete this	nart only if the f	l foundation had 9	\$5 000 or more i	n
Pa		ets at any time during the			oundation nad .	,5,000 01 1110101	••
1		Regarding Foundation Mana					
а	before the cla	gers of the foundation who hav ose of any tax year (but only if					1
h	None	gers of the foundation who owr	1004 or more of th	a stack of a corporat	tion (or an oqually l-	urgo portion of the	
U	ownership of	a partnership or other entity) of				inge portion of the	
2	None Information	Regarding Contribution, Gra	ant. Gift. Loan Sch	nolarshin, etc. Pro	narams:		
-					_		
	unsolicited re	if the foundation only mak equests for funds. If the founda- ons, complete items 2a, b, c, ar	tion makes gifts, gra	nts, etc. to individua			
a	The name, ac	Idress, and telephone number o	or e-mail address of	the person to whom	applications should	be addressed:	
	Carl or Marcia						
	202 Sea Oats						
	Pawleys Islan (843) 237-55						
		hich applications should be sub	mitted and informal	ion and materials th	ney should include:		
		should be submitted in writing			,		
С	Any submission						
_	None						
d		ns or limitations on awards, suc	ch as by geographica	al areas, charitable f	ields, kinds of institu	ıtions, or other	
	factors:	-,	. 5 5 ,	,	,	•	
	None						

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Part XV Supplementary Informa	Part XV Supplementary Information (continued)									
3 Grants and Contributions Paid	Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount						
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount						
<b>a</b> <i>Paid during the year</i> See Additional Data Table										
Total		<del></del>	▶ 3a	91,338						
<b>b</b> Approved for future payment		1								
		1								
		1								

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	/I-A Analysis of Income-Producing ss amounts unless otherwise indicated.		usiness income	Excluded by section	n 512, 513, or 514	(e)
-		(a)	(b)	(c)	(d)	Related or exempt function income (See instructions.)
_	m service revenue:	Business code	Amount	Exclusion code	Amount	(See madactions.)
с						
	and contracts from government agencies					
	pership dues and assessments					
	est on savings and temporary cash					
	ments			14	185 7,403	
	ends and interest from securities			14	7,403	
	t-financed property					
	debt-financed property					
	ental income or (loss) from personal property investment income.					
	or (loss) from sales of assets other than					
inven						
	come or (loss) from special events:					
10 Gross 11 Other	profit or (loss) from sales of inventory revenue: a					
	revenue. a					
с						
	tal. Add columns (b), (d), and (e).			<b>1</b>	7,588	
L <b>3 Tota</b> (See	. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu	lations.)			7,588 <b>3</b>	
l3 Tota	Add line 12, columns (b), (d), and (e)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu /I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
(See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
L3 Tota (See v Part X Line No ▼	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
L3 Tota (See v Part X Line No ▼	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
L3 Tota (See v Part X Line No ▼	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
L3 Tota (See v Part X Line No ▼	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588
See (See ) Part X Line No	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcular.  T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  ne Accomplish  income is report	nment of Exem	pt Purposes	3	7,588

om 550 11 (2020)										
		Information Regarding Transfers To and Transactions and Relationships With Noncharit	able							
Pa	rt XVII	Exempt Organizations	,abic							
<b>1</b> [		nization directly or indirectly engage in any of the following with any other organization described in section 501		V						

		organization directly or in or than section 501(c)(3)							on 501	Yes	No
а⊤	ransfers	s from the reporting foun	dation to a n	onchar	itable exe	empt organization	of:				
(	<b>1)</b> Cas	h							. 1a(1)		No
(	<b>2)</b> Oth	er assets							. 1a(2)		No
<b>b</b> C	ther tra	ansactions:									
-	-	es of assets to a nonchar	•	-					1b(1)		No
(	<b>2)</b> Pure	chases of assets from a r	oncharitable	exemp	ot organiz	ation			1b(2)		No
(	<b>3)</b> Ren	tal of facilities, equipmer	nt, or other as	ssets.					1b(3)		No
(	<b>4)</b> Reir	mbursement arrangemen	ts						. 1b(4)		No
(	<b>5)</b> Loa	ns or loan guarantees.							. 1b(5)		No
(	<b>6)</b> Perfo	ormance of services or m	embership or	fundra	aising soli	icitations			. 1b(6)		No
c S	haring (	of facilities, equipment, n	nailing lists, d	other a	ssets, or	paid employees.			. 1c		No
o ir	f the go	swer to any of the above ods, other assets, or ser ansaction or sharing arra	vices given b ngement, sho	y the roow in c	eporting f olumn <b>(d</b>	foundation. If the  i) the value of the	foundation receive goods, other asse	ed less than fair mar ets, or services recei	ket value ved.		
(a) L	ine No.	(b) Amount involved	(c) Name of	nonchar	ritable exer	mpt organization	(d) Description of	transfers, transactions	, and sharing arra	ngement	ts
	-					-					
	+										
2a Is	s the fo	undation directly or indire	ectly affiliated	d with,	or related	d to, one or more	tax-exempt organ	izations			
d	escribe	d in section 501(c) (other	r than section	501(c	:)(3)) or i	n section 527? .		🗆 Y	es 🗹 No		
		complete the following s		•	,,,,						
		(a) Name of organization			(b	) Type of organization	on	(c) Description	of relationship		
		. ,			•			•	•		
Sig	of wh	der penalties of perjury, my knowledge and belief ich preparer has any kno	, it is true, co						ased on all infor	mation	n of
Hei		*****	rusto o			2022-07-27 Date			May the IRS di return with the prepa below	rer show	vn
		Signature of officer or t	usiee			Date	Title		(see instr.)	Yes 🗆	No
		Print/Type preparer's	name	Prepa	rer's Sign	ature	Date	Check if self-	PTIN		
Pai		Joan M Hodges CP.	A				2022-07-29	employed ▶ □	P00422	:383	
	pare Onl		M Hodges Cl	PA PA					Firm's EIN ▶	_	
		Firm's address ▶ PC									
		Pa	Pawleys Island, SC 29585							) 237-8	3180
									Form 00	DE /	2020

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold (mo., day, yr.) (mo., day, yr.) P-Purchase D-Donation 2020-12-16 45 shs. Vanguard Info Tech Ρ 2020-06-12 695 shs. Vanguard Div Apprec Ρ 2016-01-20 2020-06-23 1,963 shs. Vanguard TTL Stk Mkt Р 2016-01-20 2020-07-13 868 shs. Vanguard Div Apprec Р 2010-10-04 2020-06-12 Ρ 866 shs. Vanguard Div Apprec 2010-10-04 2020-06-15 2010-10-04 2020-06-23 129 shs. Vanguard Div Apprec Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 15,643 0 11,818 3,825 82,522 49.951 32,571 318,156 167,753 150,403 99,705 0 42,088 57,617 99.895 41.991 57,904 15,317 0 6,255 9,062 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 3,825 0 0 0 0 0 32,571 0 0 0 150.403 0 0 0 57,617 0 0 0 57,904 0 0 0 9,062

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

recipient

91,338

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

	or substantial contributor			
a Paid during the year				
Alliance Bible Fellowship Church 1035 NC Highway 105 Bypass Boone, NC 28607		Nonprofit	Support	5,000
Birthright of Georgetown		Nonprofit	Support	1,043

Proglegroon Cardons	Managet	Command	
Birthright of Georgetown Post Office Box 3455 Pawleys Island, SC 29585	Nonprofit	Support	
Boone, NC 2860/			

any foundation manager

or substantial contributor

Name and address (home or business)

Post Office Box 3455 Pawleys Island, SC 29585			_,,
Brookgreen Gardens Post Office Box 3368	Nonprofit	Support	15,3

Post Office Box 3455 Pawleys Island, SC 29585			
Brookgreen Gardens Post Office Box 3368	Nonprofit	Support	15,35

Pawleys Island, SC 29585			
Brookgreen Gardens Post Office Box 3368 Pawleys Island, SC 29585	Nonprofit	Support	15,350

Post Office Box 3368		
Pawleys Island, SC 29585		

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

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

a Paid during the year			
Call2Disciple3560 Kings River Road Pawleys Island, SC 29585	Nonprofit	Support	5,000

annia Mayuvall Childrena Hama	N	C	
oastal Educational Foundation O Box 261954 onway, SC 29528	Nonprofit	Support	
awieys Island, SC 29565			

10,150

91,338

PO Box 261954 Conway, SC 29528			,
Connie Maxwell Childrens Home Post Office Box 1178 Greenwood, SC 29648	Nonprofit	Support	1,000

Conway, SC 29528			
Connie Maxwell Childrens Home Post Office Box 1178 Greenwood, SC 29648	Nonprofit	Support	1,000

Connie Maxwell Childrens Home	Nonprofit	Support	1,000
Post Office Box 1178			
Greenwood, SC 29648			

Post Office Box 1178		
Greenwood, SC 29648		

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

	or substantial contributor			
a Paid during the year				
ETV Endowment of South Carolina		Nonprofit	Support	6,000

Spartanburg, SC 29302			
A Fathers Place1412 Highmarket Streer	Nonprofit	Support	

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

مرحون والموجود والمناوم والمحار

A Fathers Place1412 Highmarket Streer Georgetown, SC 29440	Nonprofit	Support	

	Nonnefit	Cumport	
	Nonprofit	Support	

527

		• •	
	Nonprofit	Support	

deorgetown, 3C 23440			
Helping Hands1813 Highmarket Street	Nonprofit	Support	

Helping Hands1813 Highmarket Street Georgetown, SC 29440	Nonprofit	Support	1,000
Total	 	▶ 3a	91,338

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

recipient

▶ 3a

91,338

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
Litchfield Corridor Beautification 41 Maintenance Drive Pawleys Island, SC 29585	Nonprofit	Support	250
Lowcountry Food Bank	Nonprofit	Support	527

1	Batami Club of Coonsatour		Nammasia	Cummant	
ı	Lowcountry Food Bank 2864 Azalea Drive Charleston, SC 29405		Nonprofit	Support	!
		l			

2864 Azalea Drive Charleston, SC 29405			
Rotary Club of Georgetown Post Office Box 444	Nonprofit	Support	3

Charleston, SC 29405			
Rotary Club of Georgetown Post Office Box 444 Georgetown, SC 29442	Nonprofit	Support	350

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

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

or substantial contributor

Total . .

a Paid during the year			
Samaritans PursePosst Office Box 3000 Boone, NC 28607	Nonprofit	Support	5,000

1,000

91,338

nith Medical Clinic99 Baskerville Drive wleys Island, SC 29585	Nonprofir	Support	
udents in the World	Nonprofit	Support	

	Pawieys Island, SC 29585			
П	Students in the World	Nonprofit	Support	1,000
	Post Office Box 163			
ı	Pawlove Island SC 20585	I		

Students in the World	Nonprofit	Support	1,0
Post Office Box 163			
Pawleys Island, SC 29585			

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

Name and address (home or business)	or substantial contributor			
a Paid during the year				
Teach My PeoplePO Box 2848		Nonprofit	Support	31,941

3,000

91,338

The Abbey46 Gathering Lane	Nonprofit	Support	
Feach My PeoplePO Box 2848 Pawleys Island, SC 29585	Nonprofit	Support	

Total .

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

rumeys island, se Essos			
The Abbey46 Gathering Lane Pawleys Island, SC 29585	Nonprofit	Support	

Pawleys Island, SC 29585		•	,
Waccamaw Community Foundation	Nonprofit	Support	1,000

· · · · · · · · · · · · · · · · · · ·			
Waccamaw Community Foundation	Nonprofit	Support	
3655 US 17 Bypass			
Murrells Inlet SC 29576			1

Waccamaw Community Foundation	Nonprofit	Support	1,0
3655 US 17 Bypass			
Murrells Inlet, SC 29576			

Murrells Inlet, SC 29576		
3655 US 17 Bypass		

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

recipient

91,338

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

any foundation manager

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
Waccamaw Elementary PTA 1364 Waverly Road Pawleys Island, SC 29585		Nonprofit	Support	1,000
Waccamaw Intermediate School PTO		Nonprofit	Support	1,000

Waccamaw Intermediate School PTO 320 Wildcat Way Pawleys Island, SC 29585	Nonprofit	Support	
Waccamaw Middle School PTSA	Nonprofit	Support	

320 Wildcat Way Pawleys Island, SC 29585			
Waccamaw Middle School PTSA 247 Wildcat Way	Nonprofit	Support	

Pawleys Island, SC 29585			
Waccamaw Middle School PTSA 247 Wildcat Way	Nonprofit	Support	2
Pawleye Island SC 29585	1		

247 Wildcat Way	Pawieys Island, SC 29585			
		Nonprofit	Support	200

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data -		DI	N: 93491210004042		
TY 2020 Accounting Fees Schedule							
Name: Falk-Griffin Foundation EIN: 52-2255664							
Category	Amo	ount Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

750

Joan M Hodges, CPA Income Tax Preparation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491210004042
TY 2020 Investments Corpora	ite Stock Schedule	
Name:	Falk-Griffin Foundation	
ETN.	52-2255664	

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
Coastal Carolina Bank Shares	50,000	41,250		
Darrone, LPC	2,899	2,899		

746,851

592,733

Vanguard Info Tech Fund

efile GRAPHIC print - DO NOT PROCESS	DLN: 93491210004042				
TY 2020 Other Increases Schedule					
Name:	Falk-Griffin Found	dation			
FTAL	F2 22FF664				
EIN:	52-2255664				
Other Increases Schedule					
De	escription	Amount			
Gain on Sale of Investments		331,481			

efile GRAPHIC print - DO NOT	PROCESS As Filed	Data -		DLi	N: 93491210004042
TY 2020 Taxes Sched	ule				
	Name: Falk-Gi	riffin Fo	oundation		
	<b>EIN:</b> 52-225	5664			
Taxes Schedule			,		
Category	Amount	1	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Income Tax		626			