

For calendar year 2020, or tax year beginning 01-01-2020, and ending 12-31-2020

|                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                     |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|
| Name of foundation<br>THE ZEIST FOUNDATION INC                                                                                                                                                                                                                                                                  |  | A Employer identification number<br>58-1890927                                                                                      |  |
| Number and street (or P.O. box number if mail is not delivered to street address)<br>3715 NORTHSIDE PKWY NW NO 3-195                                                                                                                                                                                            |  | Room/suite                                                                                                                          |  |
| City or town, state or province, country, and ZIP or foreign postal code<br>ATLANTA, GA 30327                                                                                                                                                                                                                   |  | B Telephone number (see instructions)<br>(404) 949-3160                                                                             |  |
| G Check all that apply:<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Name change |  | D 1. Foreign organizations, check here.....<br>2. Foreign organizations meeting the 85% test, check here and attach computation ... |  |
| H Check type of organization:<br><input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust<br><input type="checkbox"/> Other taxable private foundation                                                         |  | E If private foundation status was terminated under section 507(b)(1)(A), check here .....                                          |  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 269,620,315                                                                                                                                                                                                             |  | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here .....                                       |  |
| J Accounting method:<br><input checked="" type="checkbox"/> Cash<br><input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis.)                                                                                                           |  |                                                                                                                                     |  |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) |                                                                                                                 | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                             | 1 Contributions, gifts, grants, etc., received (attach schedule)                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . . |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 3 Interest on savings and temporary cash investments . . . . .                                                  | 197,995                            | 197,995                   |                         |                                                             |
|                                                                                                                                                                     | 4 Dividends and interest from securities . . . . .                                                              | 1,549,579                          | 1,549,579                 |                         |                                                             |
|                                                                                                                                                                     | 5a Gross rents . . . . .                                                                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Net rental income or (loss) _____                                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 6a Net gain or (loss) from sale of assets not on line 10 _____                                                  | 4,298,277                          |                           |                         |                                                             |
|                                                                                                                                                                     | b Gross sales price for all assets on line 6a _____                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 7 Capital gain net income (from Part IV, line 2) . . . . .                                                      |                                    | 4,298,277                 |                         |                                                             |
|                                                                                                                                                                     | 8 Net short-term capital gain . . . . .                                                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 9 Income modifications . . . . .                                                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 10a Gross sales less returns and allowances _____                                                               |                                    |                           |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                               | b Less: Cost of goods sold . . . . .                                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | c Gross profit or (loss) (attach schedule) . . . . .                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 11 Other income (attach schedule) . . . . .                                                                     | 584,633                            | 584,633                   |                         |                                                             |
|                                                                                                                                                                     | 12 Total. Add lines 1 through 11 . . . . .                                                                      | 6,630,484                          | 6,630,484                 |                         |                                                             |
|                                                                                                                                                                     | 13 Compensation of officers, directors, trustees, etc. . . . .                                                  | 613,427                            | 26,250                    |                         | 587,177                                                     |
|                                                                                                                                                                     | 14 Other employee salaries and wages . . . . .                                                                  | 204,146                            | 0                         |                         | 204,146                                                     |
|                                                                                                                                                                     | 15 Pension plans, employee benefits . . . . .                                                                   | 120,347                            | 0                         |                         | 120,347                                                     |
|                                                                                                                                                                     | 16a Legal fees (attach schedule) . . . . .                                                                      | 15,355                             | 0                         |                         | 15,355                                                      |
|                                                                                                                                                                     | b Accounting fees (attach schedule) . . . . .                                                                   | 12,500                             | 0                         |                         | 12,500                                                      |
|                                                                                                                                                                     | c Other professional fees (attach schedule) . . . . .                                                           | 1,944,996                          | 1,207,573                 |                         | 737,423                                                     |
|                                                                                                                                                                     | 17 Interest . . . . .                                                                                           | 31,648                             | 31,648                    |                         | 0                                                           |
|                                                                                                                                                                     | 18 Taxes (attach schedule) (see instructions) . . . . .                                                         | 234,394                            | 121,522                   |                         | 58,872                                                      |
|                                                                                                                                                                     | 19 Depreciation (attach schedule) and depletion . . . . .                                                       | 3,323                              | 3,323                     |                         |                                                             |
|                                                                                                                                                                     | 20 Occupancy . . . . .                                                                                          | 58,154                             | 0                         |                         | 58,154                                                      |
|                                                                                                                                                                     | 21 Travel, conferences, and meetings . . . . .                                                                  | 2,079                              | 0                         |                         | 2,079                                                       |
|                                                                                                                                                                     | 22 Printing and publications . . . . .                                                                          |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 23 Other expenses (attach schedule) . . . . .                                                                   | 1,517,285                          | 1,472,571                 |                         | 44,714                                                      |
|                                                                                                                                                                     | 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .                               | 4,757,654                          | 2,862,887                 |                         | 1,840,767                                                   |
|                                                                                                                                                                     | 25 Contributions, gifts, grants paid . . . . .                                                                  | 11,243,686                         |                           |                         | 11,243,686                                                  |
|                                                                                                                                                                     | 26 Total expenses and disbursements. Add lines 24 and 25 . . . . .                                              | 16,001,340                         | 2,862,887                 |                         | 13,084,453                                                  |
|                                                                                                                                                                     | 27 Subtract line 26 from line 12:                                                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | a Excess of revenue over expenses and disbursements . . . . .                                                   | -9,370,856                         |                           |                         |                                                             |
|                                                                                                                                                                     | b Net investment income (if negative, enter -0-) . . . . .                                                      |                                    | 3,767,597                 |                         |                                                             |
| c Adjusted net income (if negative, enter -0-) . . . . .                                                                                                            |                                                                                                                 |                                    |                           |                         |                                                             |

| 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 . . . . .                                                                                                     | 4,723,523                                                                                                            | 3,566,192      | 3,566,192             |
|                                                                                                              | <b>2</b> Savings and temporary cash investments . . . . .                                                                                        |                                                                                                                      |                |                       |
|                                                                                                              | <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) ▶ <u>3,829,526</u><br>Less: allowance for doubtful accounts ▶ <u>0</u>               | 3,829,526                                                                                                            | 3,829,526      | 3,829,526             |
|                                                                                                              | <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)                                                                   |                                                                                                                      |                |                       |
|                                                                                                              | <b>b</b> Investments—corporate stock (attach schedule) . . . . .                                                                                 |                                                                                                                      |                |                       |
|                                                                                                              | <b>c</b> Investments—corporate bonds (attach schedule) . . . . .                                                                                 |                                                                                                                      |                |                       |
|                                                                                                              | <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) . . . . .                                                                                          | 242,748,533                                                                                                          | 261,032,539    | 261,032,539           |
|                                                                                                              | <b>14</b> Land, buildings, and equipment: basis ▶ <u>417,868</u><br>Less: accumulated depreciation (attach schedule) ▶ <u>125,810</u>            | 295,378                                                                                                              | 292,058        | 292,058               |
| <b>15</b> Other assets (describe ▶ _____)                                                                    | 900,000                                                                                                                                          | 900,000                                                                                                              | 900,000        |                       |
| <b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) | 252,496,960                                                                                                                                      | 269,620,315                                                                                                          | 269,620,315    |                       |
| 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 ▶ _____)                                                                                                   | 66,043                                                                                                               | 2,169          |                       |
|                                                                                                              | <b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .                                                                           | 66,043                                                                                                               | 2,169          |                       |
| Net Assets or Fund Balances                                                                                  | <b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/><br><b>and complete lines 24, 25, 29 and 30.</b>               |                                                                                                                      |                |                       |
|                                                                                                              | <b>24</b> Net assets without donor restrictions . . . . .                                                                                        |                                                                                                                      |                |                       |
|                                                                                                              | <b>25</b> Net assets with donor restrictions . . . . .                                                                                           |                                                                                                                      |                |                       |
|                                                                                                              | <b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/><br><b>and complete lines 26 through 30.</b> |                                                                                                                      |                |                       |
|                                                                                                              | <b>26</b> Capital stock, trust principal, or current funds . . . . .                                                                             | 222,736,480                                                                                                          | 222,736,480    |                       |
|                                                                                                              | <b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund                                                                         | 0                                                                                                                    | 0              |                       |
|                                                                                                              | <b>28</b> Retained earnings, accumulated income, endowment, or other funds                                                                       | 29,694,437                                                                                                           | 46,881,666     |                       |
| <b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .                              | 252,430,917                                                                                                                                      | 269,618,146                                                                                                          |                |                       |
| <b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .                         | 252,496,960                                                                                                                                      | 269,620,315                                                                                                          |                |                       |

**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> | 252,430,917 |
| <b>2</b> Enter amount from Part I, line 27a . . . . .                                                                                                                       | <b>2</b> | -9,370,856  |
| <b>3</b> Other increases not included in line 2 (itemize) ▶ _____                                                                                                           | <b>3</b> | 26,558,085  |
| <b>4</b> Add lines 1, 2, and 3 . . . . .                                                                                                                                    | <b>4</b> | 269,618,146 |
| <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> | 269,618,146 |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                         |                                                    |  | (l)<br>Gains (Col. (h) gain minus col. (k), but not less than -0-) or<br>Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------|--|------------------------------------------------------------------------------------------------|
| (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 |  |                                                                                                |
| a See Additional Data Table                                                                 |                                         |                                                    |  |                                                                                                |
| b                                                                                           |                                         |                                                    |  |                                                                                                |
| c                                                                                           |                                         |                                                    |  |                                                                                                |
| d                                                                                           |                                         |                                                    |  |                                                                                                |
| e                                                                                           |                                         |                                                    |  |                                                                                                |

|                                                                                                                                                                                                        |                                                                                   |          |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------|-----------|
| <b>2</b> Capital gain net income or (net capital loss)                                                                                                                                                 | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 | <b>2</b> | 4,298,277 |
| <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- in Part I, line 8 | {                                                                                 | <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**

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

**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>  | 52,370  |
| <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>  | 52,370  |
| <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>  | 52,370  |
| <b>6</b>  | Credits/Payments:                                                                                                                                                                                                                   |           |         |
| <b>a</b>  | 2020 estimated tax payments and 2019 overpayment credited to 2020                                                                                                                                                                   | <b>6a</b> | 221,931 |
| <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>  | 221,931 |
| <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> | 169,561 |
| <b>11</b> | Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> 169,561 <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>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> | <b>1a</b> |            | <b>No</b> |
| <b>c</b>  | Did the foundation file <b>Form 1120-POL</b> for this year?.                                                                                                                                                                                                                                                                                    | <b>1b</b> |            | <b>No</b> |
| <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>1c</b> |            | <b>No</b> |
| <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>  |            | <b>No</b> |
| <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>  |            | <b>No</b> |
| <b>4a</b> | Did the foundation have unrelated business gross income of \$1,000 or more during the year?.                                                                                                                                                                                                                                                    | <b>4a</b> | <b>Yes</b> |           |
| <b>b</b>  | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?.                                                                                                                                                                                                                                                                        | <b>4b</b> | <b>Yes</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>  |            | <b>No</b> |
| <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>  | <b>Yes</b> |           |
| <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>  | <b>Yes</b> |           |
| <b>8a</b> | Enter the states to which the foundation reports or with which it is registered (see instructions)<br>► GA                                                                                                                                                                                                                                      |           |            |           |
| <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> | <b>Yes</b> |           |
| <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>  |            | <b>No</b> |
| <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> |            | <b>No</b> |

**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>Yes</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>Yes</b> |  |
| <b>13</b> | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>ZEISTFOUNDATION.ORG</b>                                   | <b>13</b> | <b>Yes</b> |  |
| <b>14</b> | The books are in care of <b>THE ZEIST COMPANY LLC</b> Telephone no. <b>(404) 949-3160</b>                                                                                                        |           |            |  |

Located at **3715 NORTHSIDE PKWY NW STE 3-195 ATLANTA GA**ZIP+4 **30327**

|           |                                                                                                                                                                                                                                                                                                                                                  |            |           |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| <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? . . . . .<br>See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country <b>▶</b> | <b>Yes</b> | <b>No</b> |
|           |                                                                                                                                                                                                                                                                                                                                                  |            |           |

**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 . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>                                                                                                                                 | <b>1b</b> |            | <b>No</b> |
| <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<br>If "Yes," list the years <b>▶</b> 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. <b>▶</b> 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>Yes</b>                                                          | <b>No</b> |
| <b>5a</b> | During the year did the foundation pay or incur any amount to:                                                                                                                                                                         |                                                                     |           |
| (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> |
| <b>c</b>  | Organizations relying on a current notice regarding disaster assistance check here. . . . . <input type="checkbox"/>                                                                                                                   |                                                                     |           |
|           | 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? . . . . .                                                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No            |           |
|           | <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>                                                                                                                                                    |                                                                     |           |
| <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>b</b>  | Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .                                                                                                                   |                                                                     | <b>6b</b> |
|           | <i>If "Yes" to 6b, file Form 8870.</i>                                                                                                                                                                                                 |                                                                     | <b>No</b> |
| <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>b</b>  | If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .                                                                                                                    |                                                                     | <b>7b</b> |
| <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>                       |                                                                  |                                                  |                                                                              |                                              |
| <b>(a)</b> Name and address                                                                                                         | <b>(b)</b> Title, and average hours per week devoted to position | <b>(c)</b> Compensation (If not paid, enter -0-) | <b>(d)</b> Contributions to employee benefit plans and deferred compensation | <b>(e)</b> 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> |                                                                  |                                                  |                                                                              |                                              |
| <b>(a)</b> Name and address of each employee paid more than \$50,000                                                                | <b>(b)</b> Title, and average hours per week devoted to position | <b>(c)</b> Compensation                          | <b>(d)</b> Contributions to employee benefit plans and deferred compensation | <b>(e)</b> Expense account, other allowances |
| PATRICIA JOHNSON                                                                                                                    | GRANTS MANAGER                                                   | 137,542                                          | 10,422                                                                       | 0                                            |
| 3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327                                                                               | 40.00                                                            |                                                  |                                                                              |                                              |
| GARRY LONG                                                                                                                          | PROPERTY MANAGER                                                 | 98,483                                           | 7,830                                                                        | 0                                            |
| 3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327                                                                               | 40.00                                                            |                                                  |                                                                              |                                              |
|                                                                                                                                     |                                                                  |                                                  |                                                                              |                                              |
|                                                                                                                                     |                                                                  |                                                  |                                                                              |                                              |
|                                                                                                                                     |                                                                  |                                                  |                                                                              |                                              |
|                                                                                                                                     |                                                                  |                                                  |                                                                              |                                              |
| <b>Total</b> number of other employees paid over \$50,000. . . . .                                                                  |                                                                  |                                                  |                                                                              | <b>0</b>                                     |

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

| (a) Name and address of each person paid more than \$50,000       | (b) Type of service                             | (c) Compensation |
|-------------------------------------------------------------------|-------------------------------------------------|------------------|
| THE ZEIST COMPANY LLC<br>3715 NORTHSIDE PKWY<br>ATLANTA, GA 30327 | ACCOUNTING,TAX,MANAGEMENT & INVESTMENT SERVICES | 1,099,996        |
| MONITCELLO ASSOCIATES INC<br>1800 LARIMER ST<br>DENVER, CO 80202  | INVESTMENT SERVICES                             | 300,000          |
|                                                                   |                                                 |                  |
|                                                                   |                                                 |                  |
|                                                                   |                                                 |                  |
|                                                                   |                                                 |                  |
|                                                                   |                                                 |                  |

**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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Expenses  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| <b>1</b> MAYSON AVENUE COOPERATIVE, LLC IS A SINGLE MEMBER LIMITED LIABILITY COMPANY, DISREGARDED FOR TAX PURPOSES, WHOLLY-OWNED BY THE ZEIST FOUNDATION, INC. MAYSON AVENUE COOPERATIVE IS THE VEHICLE WHICH CARRIES OUT THE BULK OF THE FOUNDATION'S PLACE BASED PHILANTHROPIC ACTIVITIES. THE COMPANY IS AUTHORIZED TO ENGAGE IN ACTIVITIES IN FURTHERANCE OF EXCLUSIVELY CHARITABLE, SCIENTIFIC, RELIGIOUS, LITERARY AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE IRC. THE DIRECT CHARITABLE ACTIVITIES ENGAGED IN WERE BUILDING COMMUNITY SUPPORT AND SOLICITING NEIGHBORHOOD INPUT FOR A HOUSING REDEVELOPMENT PROJECT IN THE EDGEWOOD COMMUNITY OF ATLANTA, GEORGIA, AND PROVIDING EDUCATIONAL OPPORTUNITIES TO RESIDENTS OF THE PROJECT AND SURROUNDING NEIGHBORHOOD, INCLUDING THE MAINTENANCE OF THE EDGEWOOD COMMUNITY LEARNING GARDEN, IN COOPERATION WITH THE WYLDE CENTER, A LOCAL EDUCATIONAL CHARITY. | 1,248,205 |
| <b>2</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
| <b>3</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
| <b>4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |

**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 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> | 237,741,663 |
| <b>b</b> | Average of monthly cash balances. . . . .                                                                          | <b>1b</b> | 3,820,392   |
| <b>c</b> | Fair market value of all other assets (see instructions). . . . .                                                  | <b>1c</b> | 4,454,976   |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c). . . . .                                                                     | <b>1d</b> | 246,017,031 |
| <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>  | 246,017,031 |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . . | <b>4</b>  | 3,690,255   |
| <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>  | 242,326,776 |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5. . . . .                                                      | <b>6</b>  | 12,116,339  |

**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>  | 12,116,339 |
| <b>2a</b> | Tax on investment income for 2020 from Part VI, line 5. . . . .                                                    | <b>2a</b> | 52,370     |
| <b>b</b>  | Income tax for 2020. (This does not include the tax from Part VI.). . . . .                                        | <b>2b</b> | 3,307      |
| <b>c</b>  | Add lines 2a and 2b. . . . .                                                                                       | <b>2c</b> | 55,677     |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1. . . . .                                     | <b>3</b>  | 12,060,662 |
| <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>  | 12,060,662 |
| <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>  | 12,060,662 |

**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> | 13,084,453 |
| <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>  | 13,084,453 |
| <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>  | 13,084,453 |

**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                                                                                                                                |               |                            |             | 12,060,662  |
| <b>2</b> Undistributed income, if any, as of the end of 2020:                                                                                                                              |               |                            |             |             |
| <b>a</b> Enter amount for 2019 only. . . . .                                                                                                                                               |               |                            | 10,963,357  |             |
| <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. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>b</b> From 2016. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>c</b> From 2017. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>d</b> From 2018. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>e</b> From 2019. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>f</b> Total of lines 3a through e. . . . .                                                                                                                                              | 0             |                            |             |             |
| <b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ 13,084,453                                                                                                          |               |                            |             |             |
| <b>a</b> Applied to 2019, but not more than line 2a                                                                                                                                        |               |                            | 10,963,357  |             |
| <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. . . . .                                                                                                                                     |               |                            |             | 2,121,096   |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                                        | 0             |                            |             |             |
| <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</b> Enter the net total of each column as indicated below:                                                                                                                            | 0             |                            |             |             |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5                                                                                                                                 |               |                            |             |             |
| <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. . . . .                                                              |               |                            |             | 9,939,566   |
| <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). . . . .       | 0             |                            |             |             |
| <b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions). . . . .                                                                              | 0             |                            |             |             |
| <b>9</b> Excess distributions carryover to 2021.<br>Subtract lines 7 and 8 from line 6a. . . . .                                                                                           | 0             |                            |             |             |
| <b>10</b> Analysis of line 9:                                                                                                                                                              |               |                            |             |             |
| <b>a</b> Excess from 2016. . . . .                                                                                                                                                         |               |                            |             |             |
| <b>b</b> Excess from 2017. . . . .                                                                                                                                                         |               |                            |             |             |
| <b>c</b> Excess from 2018. . . . .                                                                                                                                                         |               |                            |             |             |
| <b>d</b> Excess from 2019. . . . .                                                                                                                                                         |               |                            |             |             |
| <b>e</b> Excess from 2020. . . . .                                                                                                                                                         |               |                            |             |             |

## Part XIV

- 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.)

## Inform

- 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).)

- 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.

**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>                         | 11,243,686 |
| <b>b</b> <i>Approved for future payment</i>                       |                                                                                                                    |                                      |                                     |            |
|                                                                   |                                                                                                                    |                                      |                                     |            |
| <b>Total</b> . . . . .                                            |                                                                                                                    |                                      | ▶ <b>3b</b>                         | 0          |

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 . . . . .       | 531390               |               | 14                    | 197,995       |                            |
| <b>4</b> Dividends and interest from securities. . . . .                    | 531390               |               | 14                    | 1,549,579     |                            |
| <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. . . . .                                   | 531390               | 311,508       | 14                    | 273,125       |                            |
| <b>8</b> Gain or (loss) from sales of assets other than inventory . . . . . | 531390               |               | 18                    | 4,298,277     |                            |
| <b>9</b> Net income or (loss) from special events:                          |                      |               |                       |               |                            |
| <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). . . . .                  |                      | 311,508       |                       | 6,318,976     | 0                          |
| <b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .     |                      |               | <b>13</b>             |               | 6,630,484                  |

(See worksheet in line 13 instructions to verify calculations.)

[illegible]

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

|                                                                                                                                                                                                                                                                                                                                                                                                                     |  |              |            |           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------|------------|-----------|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                                                    |  |              | <b>Yes</b> | <b>No</b> |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:                                                                                                                                                                                                                                                                                                                         |  |              |            |           |
| <b>(1)</b> Cash. . . . .                                                                                                                                                                                                                                                                                                                                                                                            |  | <b>1a(1)</b> |            | <b>No</b> |
| <b>(2)</b> Other assets. . . . .                                                                                                                                                                                                                                                                                                                                                                                    |  | <b>1a(2)</b> |            | <b>No</b> |
| <b>b</b> Other transactions:                                                                                                                                                                                                                                                                                                                                                                                        |  |              |            |           |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .                                                                                                                                                                                                                                                                                                                                          |  | <b>1b(1)</b> |            | <b>No</b> |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .                                                                                                                                                                                                                                                                                                                                    |  | <b>1b(2)</b> |            | <b>No</b> |
| <b>(3)</b> Rental of facilities, equipment, or other assets. . . . .                                                                                                                                                                                                                                                                                                                                                |  | <b>1b(3)</b> |            | <b>No</b> |
| <b>(4)</b> Reimbursement arrangements. . . . .                                                                                                                                                                                                                                                                                                                                                                      |  | <b>1b(4)</b> |            | <b>No</b> |
| <b>(5)</b> Loans or loan guarantees. . . . .                                                                                                                                                                                                                                                                                                                                                                        |  | <b>1b(5)</b> |            | <b>No</b> |
| <b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .                                                                                                                                                                                                                                                                                                                              |  | <b>1b(6)</b> |            | <b>No</b> |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .                                                                                                                                                                                                                                                                                                                  |  | <b>1c</b>    |            | <b>No</b> |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received. |  |              |            |           |

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

| b If "Yes," complete the following schedule. |                          |                                 |
|----------------------------------------------|--------------------------|---------------------------------|
| (a) Name of organization                     | (b) Type of organization | (c) Description of relationship |
|                                              |                          |                                 |
|                                              |                          |                                 |
|                                              |                          |                                 |
|                                              |                          |                                 |

|                  |                                                                                                                                                                                                                                                                                                                        |               |                |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------|
| <b>Sign Here</b> | 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. |               |                |
|                  | *****                                                                                                                                                                                                                                                                                                                  | 2021-11-11    | *****          |
|                  | _____<br>Signature of officer or trustee                                                                                                                                                                                                                                                                               | _____<br>Date | _____<br>Title |

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

|                                       |                                                                       |                      |      |                                                 |                          |
|---------------------------------------|-----------------------------------------------------------------------|----------------------|------|-------------------------------------------------|--------------------------|
| <b>Paid<br/>Preparer<br/>Use Only</b> | Print/Type preparer's name                                            | Preparer's Signature | Date | Check if self-employed <input type="checkbox"/> | PTIN<br><br>P00162555    |
|                                       | HEATHER PATTON CPA                                                    |                      |      |                                                 |                          |
|                                       | Firm's name ▶ THE ZEIST COMPANY LLC                                   |                      |      |                                                 | Firm's EIN ▶ 58-2405209  |
|                                       | Firm's address ▶ 3715 NORTHSIDE PKWYNW STE 3-195<br>ATLANTA, GA 30327 |                      |      |                                                 | Phone no. (404) 949-3160 |

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,<br>(a) 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.) |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|-------------------------------------|
| CARNELIAN ENERGY CAPITAL II LP                                                                                                        | P                                               | 2020-01-01                              | 2020-12-31                          |
| CARNELIAN ENERGY CAPITAL II LP                                                                                                        | P                                               | 2019-12-30                              | 2020-12-31                          |
| CEDAR ROCK                                                                                                                            | P                                               | 2020-01-01                              | 2020-12-31                          |
| COMMONFUND CAP VEN PTR XII                                                                                                            | P                                               | 2020-01-01                              | 2020-12-31                          |
| COMMONFUND CAP VEN PTR XII                                                                                                            | P                                               | 2020-01-01                              | 2020-12-31                          |
| COMMONFUND CAP VEN PTR XII                                                                                                            | P                                               | 2019-12-30                              | 2020-12-31                          |
| COMMONFUND CAP VEN PTR XII                                                                                                            | P                                               | 2019-12-30                              | 2020-12-31                          |
| DAVIDSON KEMPNER LT DIST OPP FD IV                                                                                                    | P                                               | 2019-12-30                              | 2020-12-31                          |
| DAVIDSON KEMPNER INSTITUTIONAL PARTNERS                                                                                               | P                                               | 2020-01-01                              | 2020-12-31                          |
| DAVIDSON KEMPNER INSTITUTIONAL PARTNERS                                                                                               | P                                               | 2019-12-30                              | 2020-12-31                          |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 1,249                 |                                            |                                                 | 1,249                                        |
| 10,979                |                                            |                                                 | 10,979                                       |
| 460,152               |                                            |                                                 | 460,152                                      |
| 1,326                 |                                            |                                                 | 1,326                                        |
| 3,125                 |                                            |                                                 | 3,125                                        |
| 12,590                |                                            |                                                 | 12,590                                       |
| 16,478                |                                            |                                                 | 16,478                                       |
|                       |                                            | 73                                              | -73                                          |
| 19,330                |                                            |                                                 | 19,330                                       |
| 3,009                 |                                            |                                                 | 3,009                                        |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                          |
|                                                                                             |                                      |                                                 | 1,249                                                                                    |
|                                                                                             |                                      |                                                 | 10,979                                                                                   |
|                                                                                             |                                      |                                                 | 460,152                                                                                  |
|                                                                                             |                                      |                                                 | 1,326                                                                                    |
|                                                                                             |                                      |                                                 | 3,125                                                                                    |
|                                                                                             |                                      |                                                 | 12,590                                                                                   |
|                                                                                             |                                      |                                                 | 16,478                                                                                   |
|                                                                                             |                                      |                                                 | -73                                                                                      |
|                                                                                             |                                      |                                                 | 19,330                                                                                   |
|                                                                                             |                                      |                                                 | 3,009                                                                                    |

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,<br>(a) 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.) |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|-------------------------------------|
| ECHO STREET                                                                                                                           | P                                               | 2020-01-01                              | 2020-12-31                          |
| ECHO STREET                                                                                                                           | P                                               | 2019-12-30                              | 2020-12-31                          |
| FARALLON EQUITY PARTNERS                                                                                                              | P                                               | 2020-01-01                              | 2020-12-31                          |
| FARALLON EQUITY PARTNERS                                                                                                              | P                                               | 2019-12-30                              | 2020-12-31                          |
| GQG PARTNERS EMERGING MARKETS EQ FD                                                                                                   | P                                               | 2020-01-01                              | 2020-12-31                          |
| GQG PARTNERS EMERGING MARKETS EQ FD                                                                                                   | P                                               | 2019-12-30                              | 2020-12-31                          |
| HIMALAYA CAPITAL INVESTORS                                                                                                            | P                                               | 2020-01-01                              | 2020-12-31                          |
| HIMALAYA CAPITAL INVESTORS                                                                                                            | P                                               | 2019-12-30                              | 2020-12-31                          |
| OWL VENTURES III                                                                                                                      | P                                               | 2020-01-01                              | 2020-12-31                          |
| RENAISSANCE INST DIV ALPHA FD                                                                                                         | P                                               | 2020-01-01                              | 2020-12-31                          |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 113,108               |                                            |                                                 | 113,108                                      |
| 141,158               |                                            |                                                 | 141,158                                      |
| 619,562               |                                            |                                                 | 619,562                                      |
| 1,666,648             |                                            |                                                 | 1,666,648                                    |
|                       |                                            | 22,880                                          | -22,880                                      |
| 114,745               |                                            |                                                 | 114,745                                      |
|                       |                                            | 4,505                                           | -4,505                                       |
| 22,036                |                                            |                                                 | 22,036                                       |
| 165,084               |                                            |                                                 | 165,084                                      |
|                       |                                            | 1,900,570                                       | -1,900,570                                   |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | Adjusted basis<br>(j) as of 12/31/69 | Excess of col. (i)<br>(k) over col. (j), if any |                                                                                          |
|                                                                                             |                                      |                                                 | 113,108                                                                                  |
|                                                                                             |                                      |                                                 | 141,158                                                                                  |
|                                                                                             |                                      |                                                 | 619,562                                                                                  |
|                                                                                             |                                      |                                                 | 1,666,648                                                                                |
|                                                                                             |                                      |                                                 | -22,880                                                                                  |
|                                                                                             |                                      |                                                 | 114,745                                                                                  |
|                                                                                             |                                      |                                                 | -4,505                                                                                   |
|                                                                                             |                                      |                                                 | 22,036                                                                                   |
|                                                                                             |                                      |                                                 | 165,084                                                                                  |
|                                                                                             |                                      |                                                 | -1,900,570                                                                               |

**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,<br>(a) 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.) |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|-------------------------------------|
| RENAISSANCE INST DIV ALPHA FD                                                                                                         | P                                               | 2019-12-30                              | 2020-12-31                          |
| SOUNDPOINT DISTRESSED LOAN OPP I                                                                                                      | P                                               | 2020-01-01                              | 2020-12-31                          |
| TRUE WIND CAPITAL LP                                                                                                                  | P                                               | 2020-01-01                              | 2020-12-31                          |
| TRUE WIND CAPITAL LP                                                                                                                  | P                                               | 2019-12-30                              | 2020-12-31                          |
| TWC FEEDER AIV LP                                                                                                                     | P                                               | 2019-12-30                              | 2020-12-31                          |
| WELLINGTON INTL GROWTH                                                                                                                | P                                               | 2020-01-01                              | 2020-12-31                          |
| WELLINGTON INTL GROWTH                                                                                                                | P                                               | 2019-12-30                              | 2020-12-31                          |
| WTF - MICRO CAP                                                                                                                       | P                                               | 2020-01-01                              | 2020-12-31                          |
| WTF - MICRO CAP                                                                                                                       | P                                               | 2019-12-30                              | 2020-12-31                          |
| WTF - RESEARCH EQUITY                                                                                                                 | P                                               | 2020-01-01                              | 2020-12-31                          |

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 721,624               |                                            |                                                 | 721,624                                      |
| 10,359                |                                            |                                                 | 10,359                                       |
| 330,749               |                                            |                                                 | 330,749                                      |
|                       |                                            | 33,296                                          | -33,296                                      |
|                       |                                            | 380,640                                         | -380,640                                     |
| 35,125                |                                            |                                                 | 35,125                                       |
| 142,142               |                                            |                                                 | 142,142                                      |
| 306,107               |                                            |                                                 | 306,107                                      |
| 459,052               |                                            |                                                 | 459,052                                      |
|                       |                                            | 233,017                                         | -233,017                                     |

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                                |
|                                                                                             |                                      |                                                 | 721,624                                                                                        |
|                                                                                             |                                      |                                                 | 10,359                                                                                         |
|                                                                                             |                                      |                                                 | 330,749                                                                                        |
|                                                                                             |                                      |                                                 | -33,296                                                                                        |
|                                                                                             |                                      |                                                 | -380,640                                                                                       |
|                                                                                             |                                      |                                                 | 35,125                                                                                         |
|                                                                                             |                                      |                                                 | 142,142                                                                                        |
|                                                                                             |                                      |                                                 | 306,107                                                                                        |
|                                                                                             |                                      |                                                 | 459,052                                                                                        |
|                                                                                             |                                      |                                                 | -233,017                                                                                       |



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,<br>(a) 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.) |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|-------------------------------------|
| WTF - RESEARCH EQUITY                                                                                                                 | P                                               | 2019-12-30                              | 2020-12-31                          |
| WTF - SELECT LEADERS                                                                                                                  | P                                               | 2020-01-01                              | 2020-12-31                          |
| WTF - SELECT LEADERS                                                                                                                  | P                                               | 2019-12-30                              | 2020-12-31                          |
| VIDSYS HOLDINGS LLC                                                                                                                   | P                                               | 2007-12-31                              | 2020-12-02                          |
| PALO ALTO                                                                                                                             | P                                               | 2016-10-01                              | 2020-04-21                          |
| WTF - RESEARCH EQUITY                                                                                                                 | P                                               | 2016-09-28                              | 2020-06-01                          |
| MFO VANGUARD FEDERAL MONEY MARKET FUND                                                                                                | P                                               | 2020-01-01                              | 2020-12-30                          |
| BERKSHIRE HATHAWAY INC                                                                                                                | P                                               | 2005-12-25                              | 2020-06-23                          |
| MFO VANGUARD SHORT TERM INVEST GRADE INSTL                                                                                            | P                                               | 2016-10-03                              | 2020-06-24                          |
| BERKSHIRE HATHAWAY INC                                                                                                                | P                                               | 2005-12-25                              | 2020-08-03                          |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 384,510               |                                            |                                                 | 384,510                                      |
|                       |                                            | 1,922                                           | -1,922                                       |
| 44,172                |                                            |                                                 | 44,172                                       |
|                       |                                            | 1,292,306                                       | -1,292,306                                   |
|                       |                                            | 391,364                                         | -391,364                                     |
| 335,626               |                                            |                                                 | 335,626                                      |
| 43,602,904            |                                            | 43,602,904                                      | 0                                            |
| 2,175,952             |                                            | 585,600                                         | 1,590,352                                    |
| 3,000,000             |                                            | 2,955,585                                       | 44,415                                       |
| 899,965               |                                            | 219,600                                         | 680,365                                      |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                          |
|                                                                                             |                                      |                                                 | 384,510                                                                                  |
|                                                                                             |                                      |                                                 | -1,922                                                                                   |
|                                                                                             |                                      |                                                 | 44,172                                                                                   |
|                                                                                             |                                      |                                                 | -1,292,306                                                                               |
|                                                                                             |                                      |                                                 | -391,364                                                                                 |
|                                                                                             |                                      |                                                 | 335,626                                                                                  |
|                                                                                             |                                      |                                                 | 0                                                                                        |
|                                                                                             |                                      |                                                 | 1,590,352                                                                                |
|                                                                                             |                                      |                                                 | 44,415                                                                                   |
|                                                                                             |                                      |                                                 | 680,365                                                                                  |

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,<br>(a) 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.) |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|-------------------------------------|
| BERKSHIRE HATHAWAY INC                                                                                                                | P                                               | 2005-12-25                              | 2020-11-10                          |
| MFO VANGUARD CHESTER FD TARGET RETIRE 2040                                                                                            | P                                               | 2020-01-01                              | 2020-02-28                          |
| MFO VANGUARD CHESTER FD TARGET RETIRE 2040                                                                                            | P                                               | 2020-01-01                              | 2020-02-28                          |
| MFO VANGUARD CHESTER FD TARGET RETIRE 2020                                                                                            | P                                               | 2017-04-17                              | 2020-02-28                          |
| MFO VANGUARD LIFE STRATEGY INC FD                                                                                                     | P                                               | 2020-01-01                              | 2020-02-28                          |
| MFO VANGUARD LIFE STRATEGY INC FD                                                                                                     | P                                               | 2019-01-01                              | 2020-02-28                          |
| EDGEWOOD GROWTH FUND                                                                                                                  | P                                               | 2019-01-01                              | 2020-12-31                          |
| PFIC NET CAPITAL GAINS                                                                                                                | P                                               | 2019-12-30                              | 2020-12-31                          |
| COMMONFUND CAP VEN PTR XII - QSBS                                                                                                     | P                                               | 2019-12-30                              | 2020-12-31                          |
| HIRTLE CALLAGHAN PRIVATE EQUITY OFFSHORE FD VII                                                                                       | P                                               | 2008-07-09                              | 2020-09-30                          |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 1,699,942             |                                            | 366,000                                         | 1,333,942                                    |
| 7,736                 |                                            | 7,801                                           | -65                                          |
| 46,759                |                                            | 43,616                                          | 3,143                                        |
| 781                   |                                            | 731                                             | 50                                           |
| 104                   |                                            | 102                                             | 2                                            |
| 3,557                 |                                            | 3,345                                           | 212                                          |
| 831,359               |                                            |                                                 | 831,359                                      |
| 1,375,157             |                                            |                                                 | 1,375,157                                    |
| 92                    |                                            |                                                 | 92                                           |
| 2,601,688             |                                            | 4,668,290                                       | -2,066,602                                   |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                          |
|                                                                                             |                                      |                                                 | 1,333,942                                                                                |
|                                                                                             |                                      |                                                 | -65                                                                                      |
|                                                                                             |                                      |                                                 | 3,143                                                                                    |
|                                                                                             |                                      |                                                 | 50                                                                                       |
|                                                                                             |                                      |                                                 | 2                                                                                        |
|                                                                                             |                                      |                                                 | 212                                                                                      |
|                                                                                             |                                      |                                                 | 831,359                                                                                  |
|                                                                                             |                                      |                                                 | 1,375,157                                                                                |
|                                                                                             |                                      |                                                 | 92                                                                                       |
|                                                                                             |                                      |                                                 | -2,066,602                                                                               |

**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,<br><b>(a)</b> 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | <b>(b)</b><br>How acquired<br>P—Purchase<br>D—Donation | <b>(c)</b><br>Date acquired<br>(mo., day, yr.) | <b>(d)</b><br>Date sold<br>(mo., day, yr.) |
|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------|--------------------------------------------|
| HIRTLE CALLAGHAN PRIVATE EQUITY OFFSHORE FD VIII                                                                                             | P                                                      | 2011-01-21                                     | 2020-09-30                                 |
| HIRTLE CALLAGHAN PRIVATE EQUITY OFFSHORE FD IX                                                                                               | P                                                      | 2012-12-04                                     | 2020-09-30                                 |
| HIRTLE CALLAGHAN PRIVATE EQUITY OFFSHORE FD X                                                                                                | P                                                      | 2014-10-30                                     | 2020-09-30                                 |
| HIRTLE CALLAGHAN PRIVATE EQUITY OFFSHORE FD V                                                                                                | P                                                      | 2005-11-18                                     | 2020-01-01                                 |

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

| <b>(e)</b> Gross sales price | <b>(f)</b> Depreciation allowed<br>(or allowable) | <b>(g)</b> Cost or other basis<br>plus expense of sale | <b>(h)</b> Gain or (loss)<br>(e) plus (f) minus (g) |
|------------------------------|---------------------------------------------------|--------------------------------------------------------|-----------------------------------------------------|
| 596,419                      |                                                   | 862,396                                                | -265,977                                            |
| 4,592,276                    |                                                   | 5,567,378                                              | -975,102                                            |
| 9,511,154                    |                                                   | 8,786,665                                              | 724,489                                             |
|                              |                                                   | 857,027                                                | -857,027                                            |

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                             |                                                        | <b>(l)</b> Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col.(h)) |
|---------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>(i)</b> F.M.V. as of 12/31/69                                                            | <b>(j)</b> Adjusted basis<br>as of 12/31/69 | <b>(k)</b> Excess of col. (i)<br>over col. (j), if any |                                                                                                       |
|                                                                                             |                                             |                                                        | -265,977                                                                                              |
|                                                                                             |                                             |                                                        | -975,102                                                                                              |
|                                                                                             |                                             |                                                        | 724,489                                                                                               |
|                                                                                             |                                             |                                                        | -857,027                                                                                              |

**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 |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| NANCY J BRUMLEY-ROBITAILLE<br>3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327 | CO-<br>PRESIDENT/DIRECTOR<br>13.00                        | 75,000                                    | 18,385                                                                | 0                                     |
| R BRAD FOSTER<br>3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327              |                                                           |                                           |                                                                       |                                       |
| MARIE B FOSTER<br>3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327             | VICE<br>PRESIDENT/DIRECTOR<br>16.00                       | 75,000                                    | 18,385                                                                | 0                                     |
| BARBARA K DEBUTTS<br>3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327          |                                                           |                                           |                                                                       |                                       |
| ATIBA MBIWAN<br>3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327               | EXECUTIVE DIRECTOR<br>(FORMER)<br>40.00                   | 172,812                                   | 543                                                                   | 0                                     |
| DANIELLE GRAY<br>3715 NORTHSIDE PKWY NW STE 3-195<br>ATLANTA, GA 30327              |                                                           |                                           |                                                                       |                                       |
|                                                                                     |                                                           |                                           |                                                                       |                                       |

| 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> Paid during the year                                                                            |                                                                                                           |                                |                                  |            |
| 3DE NATIONAL LLC<br>3565 PIEDMONT RD NE BLDG 1 STE 460<br>ATLANTA, GA 30305                              | NONE                                                                                                      |                                | EDUCATION                        | 100,000    |
| 7 STAGES INC1105 EUCLID AVE NE<br>ATLANTA, GA 30307                                                      | NONE                                                                                                      |                                | ARTS & CULTURE                   | 35,000     |
| ACHIEVE ATLANTA<br>191 PEACHTREE ST NE SUITE 1000<br>ATLANTA, GA 30303                                   | NONE                                                                                                      |                                | EDUCATION                        | 75,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| AGAPE COMMUNITY CENTER<br>2353 BOLTON RD NW STE 100<br>ATLANTA, GA 30318                                 | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| ALLIANCE THEATER<br>1280 PEACHTREE STREET NE<br>ATLANTA, GA 30309                                        | NONE                                                                                                      |                                | ARTS & CULTURE                   | 100,000    |
| ATHENS AREA COMMUNITY FOUNDATION<br>150 W HANCOCK AVE<br>ATHENS, GA 30601                                | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 10,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

**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>                                      |                                                                                                                    |                                      |                                     |            |
| ATLANTA BALLET INC THE<br>1400 W PEACHTREE STREET NW<br>ATLANTA, GA 30309 | NONE                                                                                                               |                                      | ARTS & CULTURE                      | 50,000     |
| ATLANTA BOTANICAL GARDEN<br>1345 PIEDMONT AVENUE NE<br>ATLANTA, GA 30309  | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 50,000     |
| ATLANTA CHILDREN'S SHELTER<br>PO BOX 54322<br>ATLANTA, GA 30308           | NONE                                                                                                               |                                      | EDUCATION                           | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                               |                                                                                                                    |                                      |                                     | 11,243,686 |

**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>                                            |                                                                                                                    |                                      |                                     |            |
| ATLANTA COMMUNITY FOOD BANK<br>732 JOSEPH E LOWERY BLVD NW<br>ATLANTA, GA 30318 | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 250,000    |
| ATLANTA HISTORY CENTER<br>130 W PACES FERRY RD NW<br>ATLANTA, GA 30305          | NONE                                                                                                               |                                      | ARTS & CULTURE                      | 50,000     |
| ATLANTA MISSION2353 BOLTON RD<br>ATLANTA, GA 30318                              | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 300,000    |
| <b>Total . . . . . ▶ 3a</b>                                                     |                                                                                                                    |                                      |                                     | 11,243,686 |



| 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>                                                                     |                                                                                                           |                                |                                  |            |
| ATLANTA NEIGHBORHOOD CHARTER SCHOOL<br>688 GRANT STREET<br>ATLANTA, GA 30315                             | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| ATLANTA OPERA THE<br>1575 NORTHSIDE DR NW BLDG 300<br>ATLANTA, GA 30318                                  | NONE                                                                                                      |                                | ARTS & CULTURE                   | 50,000     |
| ATLANTA POLICE FOUNDATION<br>191 PEACHTREE ST NE SUITE 191<br>ATLANTA, GA 30303                          | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 160,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| ATLANTA RONALD MCDONALD HOUSE<br>795 GATEWOOD ROAD NE<br>ATLANTA, GA 30329                               | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| ATLANTA SPEECH SCHOOL<br>3160 NORTHSIDE PARKWAY NW<br>ATLANTA, GA 30327                                  | NONE                                                                                                      |                                | EDUCATION                        | 300,000    |
| ATLANTA SYMPHONY ORCHESTRA<br>1280 PEACHTREE STREET NE STE 4074<br>ATLANTA, GA 30309                     | NONE                                                                                                      |                                | ARTS & CULTURE                   | 100,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

**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>                                                      |                                                                                                                    |                                      |                                     |            |
| BIG BROTHERS BIG SISTERS OF METRO<br>ATLANTA<br>1382 PEACHTREE ST NE<br>ATLANTA, GA 30309 | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 40,000     |
| BLOOM OUR YOUTH<br>150 MARQUIS DRIVE<br>FAYETTEVILLE, GA 30214                            | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 100,000    |
| BLUE HERON NATURE PRESERVE<br>4055 ROSWELL RD<br>ATLANTA, GA 30342                        | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 15,000     |
| <b>Total . . . . .</b> ► <b>3a</b>                                                        |                                                                                                                    |                                      |                                     | 11,243,686 |

| 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> Paid during the year                                                                            |                                                                                                           |                                |                                  |            |
| BOYS & GIRLS CLUB OF METRO ATLANTA<br>1275 PEACHTREE ST NE STE 50<br>ATLANTA, GA 30309                   | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 75,000     |
| BREAKTHROUGH ATLANTA<br>4075 PACES FERRY ROAD NW<br>ATLANTA, GA 30327                                    | NONE                                                                                                      |                                | EDUCATION                        | 75,000     |
| BUCKHEAD CHRISTIAN MINISTRY<br>2847 PIEDMONT ROAD<br>ATLANTA, GA 30305                                   | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 175,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| CAMP TWIN LAKES<br>600 MEANS STREET SUITE 110<br>ATLANTA, GA 30318                                       | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 150,000    |
| CARE USA151 ELLIS STREET NE<br>ATLANTA, GA 30303                                                         | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 50,000     |
| CENTER FOR PUPPETRY ARTS<br>1404 SPRING ST NW<br>ATLANTA, GA 30309                                       | NONE                                                                                                      |                                | ARTS & CULTURE                   | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| CHATTAHOOCHEE NATURE CENTER<br>PO BOX 769769<br>ROSWELL, GA 30076                                        | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 50,000     |
| CHILDREN'S HEALTHCARE OF ATLANTA<br>1577 NORTHEAST EXPRESSWAY SUITE A<br>ATLANTA, GA 30329               | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 1,000,000  |
| CHILDREN'S MUSEUM OF ATLANTA<br>274 OLYMPIC PARK DRIVE NW<br>ATLANTA, GA 30313                           | NONE                                                                                                      |                                | ARTS & CULTURE                   | 25,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| CHRIS 180<br>1017 FAYETTEVILLE RD SUITE B<br>ATLANTA, GA 30316                                           | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| COBB COMMUNITY FOUNDATION<br>1100 CIRCLE 75 PKWY 1000<br>ATLANTA, GA 30339                               | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| COMMUNITIES IN SCHOOLS ATLANTA<br>260 PEACHTREE STREET STE 750<br>ATLANTA, GA 30303                      | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| COMMUNITIES IN SCHOOLS GEORGIA<br>260 PEACHTREE STREET SUITE 700<br>ATLANTA, GA 30303                    | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| COMMUNITIES OF COASTAL GEORGIA<br>FOUNDATION<br>1626 FREDERICA RD 201<br>ST SIMONS ISLAND, GA 31522      | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 50,000     |
| COMMUNITY FOUNDATION CENTRAL<br>SAVANNAH RIVER AREA<br>720 ST SEBASTIAN WAY 160<br>AUGUSTA, GA 30901     | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |



| 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>                                                                     |                                                                                                           |                                |                                  |            |
| COMMUNITY FOUNDATION<br>CHATTAHOOCHEE VALLEY<br>1340 13TH ST<br>COLUMBUS, GA 31901                       | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 10,000     |
| COMMUNITY FOUNDATION FOR<br>GREATER ATLANTA<br>191 PEACHTREE ST NE STE 1000<br>ATLANTA, GA 30303         | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 1,260,000  |
| COMMUNITY FOUNDATION OF CENTRAL<br>GEORGIA<br>577 MULBERRY STREET SUITE 1600<br>MACON, GA 31201          | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| COMMUNITY FOUNDATION OF NE GEORGIA<br>6500 SUGARLOAF PKWY<br>DULUTH, GA 30097                            | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| COMMUNITY FOUNDATION OF NW GEORGIA<br>714 S THORNTON AVE V<br>DALTON, GA 30720                           | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| COMMUNITY FOUNDATION OF SOUTH GEORGIA<br>114 W JACKSON ST<br>THOMASVILLE, GA 31792                       | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| COMMUNITY FOUNDATION OF WEST GEORGIA<br>807 S PARK ST<br>CARROLLTON, GA 30117                            | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| CORNERS OUTREACH<br>2 SUN CT NW SUITE 220<br>PEACHTREE CORNERS, GA 30092                                 | NONE                                                                                                      |                                | EDUCATION                        | 30,000     |
| COVENANT HOUSE GEORGIA<br>1559 JOHNSON ROAD NW<br>ATLANTA, GA 30318                                      | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 125,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| DUKE UNIVERSITY<br>1452 FITZPATRICK CENTER<br>DURHAM, NC 27708                                           | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| DYSLEXIA RESOURCE TRUST<br>282 MT PARAN RD NW<br>ATLANTA, GA 30327                                       | NONE                                                                                                      |                                | EDUCATION                        | 125,000    |
| EMORY UNIVERSITY<br>1440 CLIFTON ROAD SUITE 170<br>ATLANTA, GA 30322                                     | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 600,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| FERNBANK MUSEUM OF NATURAL HISTORY THE<br>767 CLIFTON ROAD NE<br>ATLANTA, GA 30307                       | NONE                                                                                                      |                                | EDUCATION                        | 100,000    |
| FOOD WELL ALLIANCE<br>970 JEFFERSON ST NW<br>ATLANTA, GA 30318                                           | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| GEEARS<br>3400 PEACHTREE RD NE STE 1720<br>ATLANTA, GA 30326                                             | NONE                                                                                                      |                                | EDUCATION                        | 115,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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> Paid during the year                                                                            |                                                                                                           |                                |                                  |            |
| GEORGIA APPLESEED<br>1100 PEACHTREE STREET STE 2800<br>ATLANTA, GA 30309                                 | NONE                                                                                                      |                                | EDUCATION                        | 25,000     |
| GEORGIA AQUARIUM<br>225 BAKER STREET<br>ATLANTA, GA 30313                                                | NONE                                                                                                      |                                | EDUCATION                        | 75,000     |
| GEORGIA CENTER FOR NON PROFITS<br>100 PEACHTREE STREET SUITE 1500<br>ATLANTA, GA 30303                   | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 15,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| GEORGIA CENTER ON ECONOMIC EDUCATION<br>75 PIEDMONT AVE STE 700<br>ATLANTA, GA 30303                     | NONE                                                                                                      |                                | EDUCATION                        | 35,000     |
| GEORGIA FOODBANK ASSOCIATION<br>732 JOSEPH E LOWERY BLVD NW<br>ATLANTA, GA 30318                         | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 175,000    |
| GEORGIA LEADERSHIP INSTITUTE<br>3237 SATELITTE BLVD STE 400<br>DULUTH, GA 30097                          | NONE                                                                                                      |                                | EDUCATION                        | 100,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| GEORGIA ORGANICS INC<br>200 A OTTLEY DRIVE<br>ATLANTA, GA 30324                                          | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| GEORGIA PARTNERSHIP FOR EXCELLENCE IN EDUCATION<br>233 PEACHTREE ST SUITE 2000<br>ATLANTA, GA 30303      | NONE                                                                                                      |                                | EDUCATION                        | 35,000     |
| GIVING KITCHEN INITIATIVE<br>970 JEFFERSON ST NW STE 8<br>ATLANTA, GA 30318                              | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |



| 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>                                                                     |                                                                                                           |                                |                                  |            |
| GRADY HEALTH FOUNDATION<br>191 PEACHTREE STREET NE STE 820<br>ATLANTA, GA 30303                          | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 125,000    |
| GROVE PARK FOUNDATION<br>1566 DONALD LEE HOLLOWELL PKWY<br>ATLANTA, GA 30318                             | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 175,000    |
| HEALTH EDUCATION ASSESSMENT & LEADERSHIP INC<br>PO BOX 7522<br>ATLANTA, GA 30357                         | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 75,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| HIGH MUSEUM OF ART<br>1280 PEACHTREE ST NE<br>ATLANTA, GA 30309                                          | NONE                                                                                                      |                                | ARTS & CULTURE                   | 100,000    |
| HILL CENTER THE3200 PICKETT ROAD<br>DURHAM, NC 27705                                                     | NONE                                                                                                      |                                | EDUCATION                        | 75,000     |
| HISTORIC OAKLAND FOUNDATION<br>248 OAKLAND AVENUE SE<br>ATLANTA, GA 30312                                | NONE                                                                                                      |                                | ARTS & CULTURE                   | 25,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| HORIZONS ATLANTA<br>3330 CUMBERLAND BLVD STE 500<br>ATLANTA, GA 30339                                    | NONE                                                                                                      |                                | EDUCATION                        | 75,000     |
| INSPIREDU<br>1550 SOUTHLAND CIR NW 200<br>ATLANTA, GA 30318                                              | NONE                                                                                                      |                                | EDUCATION                        | 60,000     |
| JUNIOR ACHIEVEMENT OF GEORGIA<br>INC<br>460 ABERNATHY ROAD<br>ATLANTA, GA 30328                          | NONE                                                                                                      |                                | EDUCATION                        | 100,000    |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| KIPP METRO ATLANTA COLLABORATIVE<br>350 TEMPLE STREET NW<br>ATLANTA, GA 30314                            | NONE                                                                                                      |                                | EDUCATION                        | 75,000     |
| LA AMISTAD3434 ROSWELL RD NW<br>ATLANTA, GA 30305                                                        | NONE                                                                                                      |                                | EDUCATION                        | 45,000     |
| LATIN AMERICAN ASSOCIATION<br>2750 BUFORD HIGHWAY<br>ATLANTA, GA 30324                                   | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

**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>                               |                                                                                                                    |                                      |                                     |            |
| MERCY CARE FOUNDATION<br>5134 PEACHTREE RD<br>CHAMBLEE, GA 30341   | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 100,000    |
| MOVING IN THE SPIRITPO BOX 170230<br>ATLANTA, GA 30317             | NONE                                                                                                               |                                      | ARTS & CULTURE                      | 35,000     |
| MUSEUM OF DESIGN ATLANTA<br>1315 PEACHTREE ST<br>ATLANTA, GA 30309 | NONE                                                                                                               |                                      | ARTS & CULTURE                      | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                        |                                                                                                                    |                                      |                                     | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| MUST MINISTRIES<br>1407 COBB PKWY NORTH<br>MARIETTA, GA 30002                                            | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 75,000     |
| NATIONAL CENTER FOR CIVIL RIGHTS & HUMAN RIGHTS<br>250 WILLIAMS STREET NW<br>ATLANTA, GA 30313           | NONE                                                                                                      |                                | EDUCATION                        | 25,000     |
| NATIONAL CENTRE FOR FAMILY PHILANTHROPY<br>1667 K STREET STE 550<br>WASHINGTON, DC 20006                 | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 7,500      |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| NICHOLAS HOUSEPO BOX 15577<br>ATLANTA, GA 30333                                                          | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| NORTH GEORGIA COMMUNITY FOUNDATION<br>615 OAK ST F1300<br>GAINESVILLE, GA 30501                          | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 50,000     |
| ODYSSEY INC<br>1424 W PACES FERRY ROAD NW<br>ATLANTA, GA 30327                                           | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

**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>                                  |                                                                                                                    |                                      |                                     |            |
| OUR HOUSE INCPO BOX 1304<br>ATLANTA, GA 30329                         | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 150,000    |
| PAW KIDS<br>1643 DONALD LEE HOLLOWELL PKWY<br>NW<br>ATLANTA, GA 30318 | NONE                                                                                                               |                                      | EDUCATION                           | 25,000     |
| PIEDMONT PARK CONSERVANCY INC<br>PO BOX 7795<br>ATLANTA, GA 30357     | NONE                                                                                                               |                                      | HEALTH & HUMAN SERVICES             | 35,000     |
| <b>Total . . . . . ▶ 3a</b>                                           |                                                                                                                    |                                      |                                     | 11,243,686 |



| 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> Paid during the year                                                                            |                                                                                                           |                                |                                  |            |
| PRO BONO PARTNERSHIP OF ATLANTA<br>999 PEACHTREE STREET STE 2300<br>ATLANTA, GA 30309                    | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 20,000     |
| QUALITY CARE FOR CHILDREN<br>2751 BUFORD HIGHWAY NE SUITE 500<br>ATLANTA, GA 30324                       | NONE                                                                                                      |                                | EDUCATION                        | 125,000    |
| RAINBOW VILLAGE<br>3427 DULUTH HWY 120<br>DULUTH, GA 30096                                               | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 20,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| REACH OUT AND READ<br>145 OLD SANDHURST LANDING<br>ATLANTA, GA 30022                                     | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| SHELTERING ARMS<br>385 CENTENNIAL OLYMPIC PARK DRIVE<br>ATLANTA, GA 30313                                | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 200,000    |
| SOUTHEASTERN COUNCIL OF FOUNDATIONS<br>50 HURT PLAZA<br>ATLANTA, GA 30303                                | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 25,290     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| 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>                                                                     |                                                                                                           |                                |                                  |            |
| TEACH ON PROJECT FKA ATL FAM FOR<br>1266 W PACES FERRY RD NW STE 151<br>ATLANTA, GA 30327                | NONE                                                                                                      |                                | EDUCATION                        | 25,000     |
| THE EMPTY STOCKING FUND<br>1975 CENTURY BLVD NE 16<br>ATLANTA, GA 30345                                  | NONE                                                                                                      |                                | EDUCATION                        | 50,000     |
| TRUE COLORS THEATRE COMPANY<br>887 W MEANS STREET SUITE J-102<br>ATLANTA, GA 30318                       | NONE                                                                                                      |                                | ARTS & CULTURE                   | 35,000     |
| <b>Total . . . . .</b> ► <b>3a</b>                                                                       |                                                                                                           |                                |                                  | 11,243,686 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |                                                                                                           |                                |                                  |            |
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| 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>                                                                     |                                                                                                           |                                |                                  |            |
| URBAN RECIPE<br>970 JEFFERSON ST NW STE 7<br>ATLANTA, GA 30318                                           | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 100,000    |
| VOICES FOR GEORGIA'S CHILDREN<br>100 EDGEWOOD AVE NE SUITE 1580<br>ATLANTA, GA 30303                     | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 100,000    |
| VOX TEEN COMMUNICATIONS INC<br>229 PEACHREE STREET STE 725<br>ATLANTA, GA 30303                          | NONE                                                                                                      |                                | EDUCATION                        | 30,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |                                                                                                           |                                |                                  |            |
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| 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>                                                                     |                                                                                                           |                                |                                  |            |
| WHITEFOORD INC<br>1353 GEORGE BRUMLEY WAY SE<br>ATLANTA, GA 30317                                        | NONE                                                                                                      |                                | EDUCATION                        | 975,000    |
| WHOLESOME WAVES GEORGIA<br>PO BOX 170118<br>ATLANTA, GA 30317                                            | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 50,000     |
| WOODRUFF ARTS CENTER<br>1280 PEACHTREE STREET<br>ATLANTA, GA 30309                                       | NONE                                                                                                      |                                | ARTS & CULTURE                   | 50,750     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |                                                                                                           |                                |                                  |            |
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| 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>                                                                     |                                                                                                           |                                |                                  |            |
| WYLDE CENTER THE435 OAKVIEW RD<br>ATLANTA, GA 30030                                                      | NONE                                                                                                      |                                | COMMUNITY DEVELOPMENT            | 125,146    |
| YMCA OF METRO ATLANTA<br>100 EDGEWOOD AVENUE SUITE 1100<br>ATLANTA, GA 30303                             | NONE                                                                                                      |                                | HEALTH & HUMAN SERVICES          | 250,000    |
| ZOO ATLANTA<br>800 CHEROKEE AVENUE SE<br>ATLANTA, GA 30315                                               | NONE                                                                                                      |                                | ARTS & CULTURE                   | 50,000     |
| <b>Total . . . . . ▶ 3a</b>                                                                              |                                                                                                           |                                |                                  | 11,243,686 |

**TY 2020 Accounting Fees Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927

| <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> |
|-----------------------------------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| PROFESSIONAL FEES - TAX &<br>ACCOUNTING | 12,500        | 0                                |                                | 12,500                                               |

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2020 Depreciation Schedule

Name: THE ZEIST FOUNDATION INC

EIN: 58-1890927

Depreciation Schedule

| Description of Property                              | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|------------------------------------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| FURNITURE                                            | 2007-05-14    | 8,452               | 8,452                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| OFFICE FURNITURE                                     | 2007-05-14    | 5,103               | 5,103                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| OFFICE SPACE BUILDOUT                                | 2007-06-28    | 38,155              | 32,523                    | 150DB              | 15.00000000000000        | 2,253                               | 0                     |                     |                                 |
| LATERAL FILE CABINETS & BOOKCASES                    | 2007-04-11    | 4,350               | 4,350                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| CONFERENCE TABLE, 2 CHAIRS & SOFA                    | 2007-04-11    | 10,727              | 10,727                    | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| EGTAGER FOR CONFERENCE ROOM                          | 2007-04-23    | 2,723               | 2,723                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| CONFERENCE ROOM CHAIRS                               | 2007-05-22    | 3,277               | 3,277                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| LATERAL FILE CABINETS & BOOKCASES                    | 2007-05-31    | 4,350               | 4,350                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| OFFICE CHAIRS                                        | 2007-06-05    | 1,677               | 1,677                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| TABLE REFINISHING                                    | 2007-06-26    | 1,827               | 1,827                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| RECEPTIONIST CHAIR                                   | 2007-07-23    | 599                 | 599                       | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 2007-03-29    | 4,631               | 3,947                     | 150DB              | 15.00000000000000        | 274                                 | 0                     |                     |                                 |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 2007-04-23    | 3,371               | 2,872                     | 150DB              | 15.00000000000000        | 200                                 | 0                     |                     |                                 |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 2007-06-30    | 2,570               | 2,191                     | 150DB              | 15.00000000000000        | 152                                 | 0                     |                     |                                 |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 2007-07-18    | 1,443               | 1,229                     | 150DB              | 15.00000000000000        | 86                                  | 0                     |                     |                                 |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 2007-10-01    | 1,204               | 1,026                     | 150DB              | 15.00000000000000        | 71                                  | 0                     |                     |                                 |
| APPLE IPAD                                           | 2012-01-31    | 1,012               | 1,012                     | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |
| RECOVER WING CHAIR AND OVAL BACK CHAIRS              | 2013-03-29    | 575                 | 287                       | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |
| OFFICE FURNITURE - CREDENZA, CURIO CABINET, BOOKCASE | 2012-07-05    | 5,505               | 5,505                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| PARTNER'S DESK                                       | 2012-08-22    | 4,254               | 4,254                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |



### Depreciation Schedule

| Description of Property                       | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-----------------------------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| FABRIC & LABOR DECORATING                     | 2012-11-28    | 4,059               | 4,059                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| OVAL BACK ARM CHAIRS (2)                      | 2012-09-12    | 1,850               | 1,850                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| CREDENZA                                      | 2012-12-28    | 3,248               | 3,248                     | 200DB              | 7.00000000000000         | 0                                   | 0                     |                     |                                 |
| RECOVER SHIELD BACK CHAIR AND 4 ACCENT CHAIRS | 2013-03-29    | 607                 | 303                       | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |
| DELL LATITUDE LAPTOP E7240                    | 2014-06-04    | 2,112               | 1,056                     | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |
| LAPTOP COMPUTER                               | 2015-07-24    | 1,925               | 907                       | 200DB              | 5.00000000000000         | 55                                  | 0                     |                     |                                 |
| LAND                                          |               | 287,200             |                           |                    | 0 %                      | 0                                   | 0                     |                     |                                 |
| LAPTOP WITH DVD, DOCKING & EXTERNAL DISPLAY   | 2016-06-27    | 2,401               | 992                       | 200DB              | 5.00000000000000         | 139                                 | 0                     |                     |                                 |
| CESSI ERGO RISE TABLE AND CHAIR               | 2016-05-12    | 2,096               | 721                       | 200DB              | 7.00000000000000         | 93                                  | 0                     |                     |                                 |
| DELL LATITUDE 7000 #1                         | 2017-12-28    | 2,238               |                           | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |
| DELL LATITUDE 7000 #2                         | 2017-12-28    | 2,238               |                           | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |
| DELL LATITUDE 7000 #3                         | 2017-12-28    | 2,087               |                           | 200DB              | 5.00000000000000         | 0                                   | 0                     |                     |                                 |

**TY 2020 General Explanation Attachment****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927**General Explanation Attachment**

| Identifier | Return Reference                            | Explanation              |                                                                                                                                                                                                     |
|------------|---------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | SUMMARY OF NOTES<br>AND LOANS<br>RECEIVABLE | 990-PF PART II<br>LINE 7 | NOTE RECEIVABLE - UPAID SY STEMS CONVERTIBLE PROMISSORY NOTES<br>\$1,020,910RECEIVABLE UPAID BRIDGE NOTES CONVERTIBLE STOCK CERTIFICATES<br>\$2,808,616TOTAL NOTES AND LOANS RECEIVABLE \$3,829,526 |

**General Explanation Attachment**

| Identifier | Return Reference                           | Explanation               |                                                                                     |
|------------|--------------------------------------------|---------------------------|-------------------------------------------------------------------------------------|
| 2          | SUMMARY OF OTHER PROGRAM<br>RELATED ASSETS | 990-PF PART II<br>LINE 15 | NOTE RECEIVABLE - EDGEWOOD TOWNHOMES, LP \$<br>900,000TOTAL OTHER ASSETS \$ 900,000 |

General Explanation Attachment

| Identifier | Return Reference           | Explanation |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------|----------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3          | PROGRAM RELATED INVESTMENT | 990-PF      | <p>STATEMENT REGARDING OUTSTANDING PRIOR PROGRAM RELATED INVESTMENT: NAME AND ADDRESS OF RECIPIENTS OF THE PROGRAM-RELATED INVESTMENT: EDGEWOOD TOWNHOMES, L.P. AND EDGEWOOD TOWNHOMES II, L.P. 1718 PEACHTREE STREET, NWSUITE 684 ATLANTA, GA 30309 II. DATE AND AMOUNT OF PRIOR PROGRAM-RELATED INVESTMENT: PHASE I (EDGEWOOD TOWNHOMES, L.P.: SEPTEMBER 28, 2010): LEASE: LONG-TERM, BELOW-MARKET LEASE FOR \$900,000 LOAN: BELOW-MARKET INTEREST LOAN OF \$900,000 PHASE II (EDGEWOOD TOWNHOMES II, L.P.: SEPTEMBER 26, 2011): LEASE: LONG-TERM, BELOW-MARKET LEASE FOR \$360,000 III. PURPOSE OF THE PROGRAM-RELATED INVESTMENT: THE PURPOSE OF THE ABOVE LEASES AND LOANS IS TO ALLEVIATE THE SHORTAGE OF DECENT, SAFE, SANITARY AND AFFORDABLE HOUSING IN THE CITY OF ATLANTA. ENCOURAGING THE PROVISION OF HOUSING FOR LOW-INCOME PERSONS ACCOMPLISHES CHARITABLE PURPOSES BY RELIEVING THE POOR AND DISTRESSED, LESSENING THE BURDENS OF GOVERNMENT, COMBATTING COMMUNITY DETERIORATION, AND LESSENING NEIGHBORHOOD TENSIONS, AMONG OTHER BENEFITS. IV. THE RECIPIENTS HAVE EXPENDED ALL LOAN PROCEEDS AND UTILIZED THE REAL PROPERTY IN FURTHERANCE OF THE AFFORDABLE HOUSING PROJECT. V. THE RECIPIENTS HAVE NOT DIVERTED ANY PORTION OF THE INVESTMENT FROM THE PURPOSE OF THE INVESTMENT, TO OUR KNOWLEDGE. VI. REPORTS RECEIVED FROM THE RECIPIENTS: ON A REGULAR BASIS, (NO LESS THAN ONE REPORT PER MONTH), THE FOUNDATION RECEIVES WRITTEN FINANCIAL REPORTS AND EITHER WRITTEN OR VERBAL OPERATIONAL REPORTS FROM THE RECIPIENTS. FOR EXAMPLE, THE FOUNDATION RECEIVED REPORTS ON APRIL 16, JULY 13, OCTOBER 12 AND DECEMBER 1 IN 2020. VII. THE DATE AND RESULTS OF ANY VERIFICATION OF THE RECIPIENTS' REPORTS UNDERTAKEN PURSUANT TO AND TO THE EXTENT REQUIRED BY THE REGULATIONS, BY THE FOUNDATION OR BY OTHERS AT THE DIRECTION OF THE FOUNDATION: ON A REGULAR BASIS, THE FOUNDATION REVIEWS THE REPORTS OF THE RECIPIENTS AND PARTICIPATES IN A CONFERENCE WITH THE RECIPIENTS. IN ADDITION, THE FOUNDATION MAKES PERIODIC ON-SITE VISITS BY ITS OFFICERS, AND IT HAS AGENTS WORKING IN THE NEIGHBORHOOD WHO PERIODICALLY VERIFY INFORMATION PROVIDED BY THE RECIPIENTS. THE FOUNDATION PARTICIPATED IN MEETINGS WITH THE RECIPIENTS ON JANUARY 23, APRIL 15, SEPTEMBER 23 AND DECEMBER 16 IN 2020, AS WELL AS HAVING ITS AGENTS ON-SITE REGULARLY. IN ADDITION, ON AN ANNUAL BASIS THE FOUNDATION RECEIVES A CERTIFICATION FROM THE RECIPIENTS THAT THE PROPERTY IS BEING USED IN ACCORDANCE WITH THE USE RESTRICTIONS LOCATED IN ARTICLE III OF THE LEASES AND THAT THE LOAN PROCEEDS ARE BEING USED IN ACCORDANCE WITH THE REQUIREMENT FOUND IN ARTICLE VI OF THE LOAN AGREEMENT. REGARDING THE PROGRAM-RELATED INVESTMENTS, THE FOUNDATION MAINTAINS COPIES OF ALL RELEVANT AGREEMENTS, REPORTS FROM THE RECIPIENTS, AND EACH REPORT OF THE FOUNDATION OR ITS AUDITORS OF ANY INVESTIGATIONS MADE ON ITS BEHALF.</p> |

**General Explanation Attachment**

| Identifier | Return Reference | Explanation            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------------|------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4          | INVESTMENTS      | 990-PF PART II LINE 13 | THE ZEIST FOUNDATION, INC. FEIN 58-1890927 BALANCE SHEET - INVESTMENTS ATTACHMENT TO 990-PF 31-DEC-20 NORTHERN TRUST ACCT 70910: CASH EQUIV 6,051,806 ALTERNATIVE 189,438,494 EQUITIES 61,911,777 FIXED INCOME 3,601,994TOTAL ACCT 70910 FMV \$261,004,072 NORTHERN TRUST ACCT GLOBAL: ALTERNATIVE 26,299 TOTAL ACCT GLOBAL FMV \$26,299 NORTHERN TRUST ACCT 70372 - CLOSED - NORTHERN TRUST ACCT 70376 - CLOSED - NORTHERN TRUST ACCT 70373: DEFERRALS 2,169 TOTAL ACCT 70373 FMV \$2,169 GRAND TOTAL INVESTMENTS \$261,032,540 DETAILED STATEMENTS OF ASSETS AVAILABLE UPON REQUEST |

**TY 2020 Investments - Other Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927**Investments Other Schedule 2**

| <b>Category/ Item</b>                          | <b>Listed at Cost or FMV</b> | <b>Book Value</b> | <b>End of Year Fair Market Value</b> |
|------------------------------------------------|------------------------------|-------------------|--------------------------------------|
| NORTHERN TRUST - DEFERRALS (SEE ATTACHMENT)    | FMV                          | 2,169             | 2,169                                |
| NORTHERN TRUST - ALTERNATIVES (SEE ATTACHMENT) | FMV                          | 189,438,494       | 189,438,494                          |
| NORTHERN TRUST - CASH EQUIVALENTS              | FMV                          | 6,051,806         | 6,051,806                            |
| NORTHERN TRUST - EQUITIES (SEE ATTACHMENT)     | FMV                          | 61,911,777        | 61,911,777                           |
| NORTHERN TRUST - FIXED INCOME (SEE ATTACHMENT) | FMV                          | 3,601,994         | 3,601,994                            |
| NORTHERN TRUST - GLOBAL (SEE ATTACHMENT)       | FMV                          | 26,299            | 26,299                               |

# TY 2020 Land, Etc. Schedule

**Name:** THE ZEIST FOUNDATION INC

**EIN:** 58-1890927

| Category / Item                                      | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|------------------------------------------------------|--------------------|--------------------------|------------|-------------------------------|
| FURNITURE                                            | 8,452              | 8,452                    | 0          |                               |
| OFFICE FURNITURE                                     | 5,103              | 5,103                    | 0          |                               |
| OFFICE SPACE BUILDOUT                                | 38,155             | 34,776                   | 3,379      |                               |
| LATERAL FILE CABINETS & BOOKCASES                    | 4,350              | 4,350                    | 0          |                               |
| CONFERENCE TABLE, 2 CHAIRS & SOFA                    | 10,727             | 10,727                   | 0          |                               |
| EGTAGER FOR CONFERENCE ROOM                          | 2,723              | 2,723                    | 0          |                               |
| CONFERENCE ROOM CHAIRS                               | 3,277              | 3,277                    | 0          |                               |
| LATERAL FILE CABINETS & BOOKCASES                    | 4,350              | 4,350                    | 0          |                               |
| OFFICE CHAIRS                                        | 1,677              | 1,677                    | 0          |                               |
| TABLE REFINISHING                                    | 1,827              | 1,827                    | 0          |                               |
| RECEPTIONIST CHAIR                                   | 599                | 599                      | 0          |                               |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 4,631              | 4,221                    | 410        |                               |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 3,371              | 3,072                    | 299        |                               |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 2,570              | 2,343                    | 227        |                               |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 1,443              | 1,315                    | 128        |                               |
| COOPERATIVE BUILDERS - CONSTRUCTION OVERSIGHT        | 1,204              | 1,097                    | 107        |                               |
| APPLE IPAD                                           | 1,012              | 1,012                    | 0          |                               |
| RECOVER WING CHAIR AND OVAL BACK CHAIRS              | 575                | 575                      | 0          |                               |
| OFFICE FURNITURE - CREDENZA, CURIO CABINET, BOOKCASE | 5,505              | 5,505                    | 0          |                               |
| PARTNER'S DESK                                       | 4,254              | 4,254                    | 0          |                               |
| FABRIC & LABOR DECORATING                            | 4,059              | 4,059                    | 0          |                               |
| OVAL BACK ARM CHAIRS (2)                             | 1,850              | 1,850                    | 0          |                               |
| CREDENZA                                             | 3,248              | 3,248                    | 0          |                               |
| RECOVER SHIELD BACK CHAIR AND 4 ACCENT CHAIRS        | 607                | 607                      | 0          |                               |
| DELL LATITUDE LAPTOP E7240                           | 2,112              | 2,112                    | 0          |                               |
| LAPTOP COMPUTER                                      | 1,925              | 1,925                    | 0          |                               |
| LAND                                                 | 287,200            | 0                        | 287,200    |                               |
| LAPTOP WITH DVD, DOCKING & EXTERNAL DISPLAY          | 2,401              | 2,332                    | 69         |                               |
| CESSI ERGO RISE TABLE AND CHAIR                      | 2,096              | 1,862                    | 234        |                               |
| DELL LATITUDE 7000 #1                                | 2,238              | 2,238                    | 0          |                               |

| Category / Item       | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|-----------------------|--------------------|--------------------------|------------|-------------------------------|
| DELL LATITUDE 7000 #2 | 2,238              | 2,238                    | 0          |                               |
| DELL LATITUDE 7000 #3 | 2,087              | 2,087                    | 0          |                               |



**TY 2020 Legal Fees Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927

| <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> |
|-----------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| LEGAL FEES      | 15,355        | 0                                |                                | 15,355                                               |

# TY 2020 Other Assets Schedule

**Name:** THE ZEIST FOUNDATION INC

**EIN:** 58-1890927

## Other Assets Schedule

| Description                                | Beginning of Year - Book Value | End of Year - Book Value | End of Year - Fair Market Value |
|--------------------------------------------|--------------------------------|--------------------------|---------------------------------|
| MAYSON AVE EDGEWOOD (PRI) LOANS RECEIVABLE | 900,000                        | 900,000                  | 900,000                         |

**TY 2020 Other Expenses Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927**Other Expenses Schedule**

| Description                            | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------------------------------------|--------------------------------|-----------------------|---------------------|---------------------------------------|
| DUES AND SUBSCRIPTIONS                 | 295                            | 0                     |                     | 295                                   |
| EDUCATION                              | 11,749                         | 0                     |                     | 11,749                                |
| INSURANCE - GENERAL LIABILITY          | 25,003                         | 11,685                |                     | 13,318                                |
| MEALS & ENTERTAINMENT                  | 822                            | 670                   |                     | 152                                   |
| OFFICE EXPENSE                         | 5,921                          | 0                     |                     | 5,921                                 |
| POSTAGE & DELIVERY                     | 443                            | 0                     |                     | 443                                   |
| TELEPHONE & INTERNET                   | 10,523                         | 0                     |                     | 10,523                                |
| EMPLOYEE EXPENSE REIMBURSEMENTS        | 849                            | 0                     |                     | 849                                   |
| INVESTMENT EXPENSES (PASSTHROUGH K1'S) | 1,329,910                      | 1,329,910             |                     | 0                                     |
| GIFTS - NONEMPLOYEE                    | 189                            | 0                     |                     | 189                                   |

## Other Expenses Schedule

| Description                                   | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------------------------------------|--------------------------------|-----------------------|---------------------|---------------------------------------|
| INVESTMENT INTEREST EXPENSE (PASSTHROUGH K1S) | 130,306                        | 130,306               |                     | 0                                     |
| REPAIRS & MAINTENANCE                         | 1,275                          | 0                     |                     | 1,275                                 |

## TY 2020 Other Income Schedule

**Name:** THE ZEIST FOUNDATION INC

**EIN:** 58-1890927

### Other Income Schedule

| Description                                | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |
|--------------------------------------------|-----------------------------------|--------------------------|---------------------|
| INVESTMENT INCOME - MAYSON AVENUE          | 30,171                            | 30,171                   | 30,171              |
| WTF-CTF RESEARCH EQUITY                    | -6,841                            | -6,841                   | -6,841              |
| WTF-CTF SELECT LEADERS                     | -284                              | -284                     | -284                |
| WTF-CTF MICRO CAP                          | -264                              | -264                     | -264                |
| CEDAR ROCK CAPITAL                         | 452                               | 452                      | 452                 |
| CARNELIAN ENERGY CAPITAL II LP             | 260,569                           | 260,569                  | 260,569             |
| DAVIDSON KEMPNER INSTITUTIONAL PARTNERS LP | 65,988                            | 65,988                   | 65,988              |
| FARALLON EQUITY PARTNERS                   | 67,776                            | 67,776                   | 67,776              |
| GQG PARTNERS EM EQUITY FUND                | -3,993                            | -3,993                   | -3,993              |
| RENAISSANCE INSTITUTIONAL DIV ALPHA FUND   | 83,523                            | 83,523                   | 83,523              |
| CAROUSEL CAPITAL PARTNERS V LP             | -6,127                            | -6,127                   | -6,127              |
| NORTHERN TRUST SECTION 1411                | 4,234                             | 4,234                    | 4,234               |
| CARNELIAN ENERGY CAPITAL III LP            | -12,868                           | -12,868                  | -12,868             |
| COMMONFUND                                 | 613                               | 613                      | 613                 |
| HIMALAYA CAPITAL INVESTORS                 | -3,492                            | -3,492                   | -3,492              |
| DEERFIELD HEALTHCARE INNOVATIONS FUND II   | -20,700                           | -20,700                  | -20,700             |
| ECHO STREET                                | 135,335                           | 135,335                  | 135,335             |
| SOUNDPOINT DISTRESSED LOAN OPP I           | 4,827                             | 4,827                    | 4,827               |
| TRUE WIND CAPITAL II LP                    | -13,209                           | -13,209                  | -13,209             |
| WELLINGTON INTERNATIONAL GROWTH            | -1,077                            | -1,077                   | -1,077              |

|                                                      |  |                 |                     |
|------------------------------------------------------|--|-----------------|---------------------|
| efile GRAPHIC print - DO NOT PROCESS                 |  | As Filed Data - | DLN: 93491315033231 |
| TY 2020 Other Increases Schedule                     |  |                 |                     |
| Name: THE ZEIST FOUNDATION INC                       |  |                 |                     |
| EIN: 58-1890927                                      |  |                 |                     |
| Other Increases Schedule                             |  |                 |                     |
| Description                                          |  |                 | Amount              |
| ADJUSTMENT TO UNREALIZED GAINS/LOSSES ON INVESTMENTS |  |                 | 26,558,085          |

**TY 2020 Other Liabilities Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927

| Description      | Beginning of Year<br>- Book Value | End of Year -<br>Book Value |
|------------------|-----------------------------------|-----------------------------|
| DEFERRAL PAYABLE | 66,043                            | 2,169                       |

**TY 2020 Other Professional Fees Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927

| <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 FEES                          | 1,206,669     | 1,206,669                        |                                | 0                                                    |
| PROFESSIONAL FEES - FOUNDATION<br>SOURCE | 10,000        | 0                                |                                | 10,000                                               |
| PROFESSIONAL FEES - CONSULTING           | 24,739        | 904                              |                                | 23,835                                               |
| PROFESSIONAL FEES - OTHER                | 43,588        | 0                                |                                | 43,588                                               |
| MANAGEMENT FEES                          | 660,000       | 0                                |                                | 660,000                                              |



**TY 2020 Taxes Schedule****Name:** THE ZEIST FOUNDATION INC**EIN:** 58-1890927**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> |
|------------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| TAXES & LICENSES | 130           | 0                                |                                | 130                                                  |
| TAXES - PAYROLL  | 58,742        | 0                                |                                | 58,742                                               |
| TAXES - FOREIGN  | 116,082       | 116,082                          |                                | 0                                                    |
| TAXES - EXCISE   | 54,000        | 0                                |                                | 0                                                    |
| TAXES - PROPERTY | 5,440         | 5,440                            |                                | 0                                                    |