** PUBLIC DISCLOSURE COPY **

Form **990** (Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 **2019** Open to Public Inspection

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020

B Check if applicable: Address change / Name change / Initial return / Final return/terminated / Amended return / Application pending

C Name of organization: COASTAL COMMUNITY FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 1691 TURNBULL AVE

City or town, state or province, country, and ZIP or foreign postal code: N CHARLESTON, SC 29405-1944

D Employer identification number: 23-7390313

E Telephone number: 843-723-3635

G Gross receipts $ 189,370,107.

F Name and address of principal officer: JANE LITZ 1691 TURNBULL AVE, N CHARLESTON, SC 29405-1

H(a) Is this a group return for subordinates? Yes [X] No

H(b) Are all subordinates included? Yes No If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.COASTALCOMMUNITYFOUNDATION.ORG

K Form of organization: [X] Corporation Trust Association Other ▶

L Year of formation: 1974 M State of legal domicile: SC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: THE FOUNDATION'S PURPOSE IS TO HELP CREATE VIBRANT COMMUNITIES BY UNITING PEOPLE AND INVESTING

2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	17
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	42
6 Total number of volunteers (estimate if necessary)	6	187
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	987,974.
b Net unrelated business taxable income from Form 990-T, line 39	7b	721,556.

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	27,516,044.	36,955,989.
9 Program service revenue (Part VIII, line 2g)	2,370,560.	2,731,725.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,276,501.	9,438,307.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	70,835.	106,282.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,233,940.	49,232,303.
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	22,027,378.	23,347,158.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,938,978.	2,253,205.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 574,027.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,519,611.	4,189,010.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	27,485,967.	29,789,373.
19 Revenue less expenses. Subtract line 18 from line 12	15,747,973.	19,442,930.
Net Assets or Fund Balances	**Beginning of Current Year**	**End of Year**
20 Total assets (Part X, line 16)	203,913,645.	216,168,861.
21 Total liabilities (Part X, line 26)	6,058,268.	6,049,094.
22 Net assets or fund balances. Subtract line 21 from line 20	197,855,377.	210,119,767.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Jane E. Litz Signature of officer — Date 11/24/2020

▶ JANE LITZ, VP OF FINANCE AND CFO — Type or print name and title

Paid Preparer Use Only				
Print/Type preparer's name: JANICE A RATICA	Preparer's signature: Janice A Ratica	Date: 11/19/20	Check if self-employed	PTIN: P00358837
Firm's name ▶ ELLIOTT DAVIS, LLC/PLLC			Firm's EIN ▶ 57-0381582	
Firm's address ▶ 500 EAST MOREHEAD STREET, SUITE 700 CHARLOTTE, NC 28202			Phone no. (704) 333-8881	

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **8868**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. COASTAL COMMUNITY FOUNDATION	Taxpayer identification number (TIN) 23-7390313
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1691 TURNBULL AVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. N CHARLESTON, SC 29405-1944	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ JANE LITZ
1691 TURNBULL AVE - N CHARLESTON, SC 29405-1944
Telephone No. ▶ 843-723-3635 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box .... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 17, 2021 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year ______ or
▶ ☒ tax year beginning JUL 1, 2019 , and ending JUN 30, 2020 .

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part III | Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
THE FOUNDATION'S PURPOSE IS TO HELP CREATE VIBRANT COMMUNITIES BY UNITING PEOPLE AND INVESTING RESOURCES. THE FOUNDATION OFFICIALLY SERVES NINE COASTAL COUNTIES - BEAUFORT, BERKELEY, CHARLESTON, COLLETON, DORCHESTER, GEORGETOWN, HAMPTON, HORRY, AND JASPER. THE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 25,172,109. including grants of $ 23,347,158.) (Revenue $ 2,826,237.)
DEVELOPMENT & STEWARDSHIP - THE FOUNDATION SEEKS TO PROVIDE BEST-IN-CLASS STEWARDSHIP TO INDIVIDUALS, FAMILIES AND COMPANIES, TO CONNECT THEM TO WHAT THEY CARE DEEPLY ABOUT. IT USES ITS RELATIONSHIPS, LOCAL EXPERTISE AND KNOWLEDGE AS A PLACE-BASED FOUNDATION TO INFORM AND STRENGTHEN PHILANTHROPY AND ENCOURAGE STRENGTH AND VITALITY IN THE NONPROFIT SECTOR. THE STEWARDSHIP OF ITS FINANCIAL ASSETS IS CRUCIAL TO PHILANTHROPY, IN BOTH THE SHORT AND LONG-TERM. THE FOUNDATION IS A PERMANENT PHILANTHROPIC RESOURCE TO THE COMMUNITY; THUS, IT PRACTICES PRUDENT OVERSIGHT OF ITS INVESTMENTS TO PRESERVE AND GROW ITS RESOURCES TO MEET THE NEEDS OF TODAY AND THE FUTURE.

GRANTMAKING & COMMUNITY LEADERSHIP - THE FOUNDATION'S (SEE SCHEDULE O)

4b (Code:) (Expenses $ including grants of $) (Revenue $)
OTHER PROGRAMMATIC WORK - THE FOUNDATION'S WORK ALSO INCLUDES FOCUS IN COMMUNITY LEADERSHIP, STRATEGIC PROJECTS AND IMPACT INVESTING. COMMUNITY LEADERSHIP INCLUDES THE CIVIC ENGAGEMENT AGENDA, WHICH IS A FRAMEWORK CREATED IN FISCAL YEAR ENDED JUNE 30, 2018 DESIGNED TO HELP THE FOUNDATION MAKE CONCENTRATED, POSITIVE IMPACT IN ITS COMMUNITIES WHERE AN OPPORTUNITY HAS BEEN IDENTIFIED THROUGH COMMUNITY CONVERSATIONS. THE FOUNDATION'S INITIAL AREAS OF FOCUS INCLUDE EDUCATION, ACCESS TO ECONOMIC OPPORTUNITY AND AFFORDABLE SPACES AND INCLUSIVE SPACES. THE FOUNDATION'S STRATEGIC FRAMEWORK WAS CREATED IN 2018 AND WILL GUIDE ITS WORK FOR THE NEXT SEVERAL YEARS TO PRIORITIZE INITIATIVES THAT HELP IT ADVANCE WORK IN THESE AREAS.

4c (Code:) (Expenses $ including grants of $) (Revenue $)
STRATEGIC PROJECTS INCLUDE GRANTMAKING PROGRAMS THE FOUNDATION ADMINISTERS FOR OTHERS, THE PINCKNEY SCHOLARS PROGRAM AND MANAGEMENT OF FISCAL SPONSORSHIPS. IMPACT INVESTING WAS LAUNCHED IN THE FISCAL YEAR ENDED JUNE 30, 2018 WITH THE FIRST INVESTMENTS TO BE MADE IN FISCAL YEAR ENDING JUNE 30, 2019. THROUGH THIS INITIATIVE, THE FOUNDATION IS MAKING INVESTMENTS IN THE NINE-COUNTY AREA THAT PRIORITIZE THE CIVIC ENGAGEMENT THEMES. THESE INVESTMENTS SEEK TO ACHIEVE FINANCIAL RETURNS AS WELL AS SOCIAL RETURNS FOR THE COMMUNITIES.

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 25,172,109.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	X	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	39			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 42			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 17				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent 1b 17				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*		9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶SC

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

JANE LITZ - 843-723-3635

1691 TURNBULL AVE, N CHARLESTON, SC 29405-1944

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DARRIN GOSS CEO	50.00			X				240,640.	0.	28,198.
(2) TINA JOHNSON-BREBNER EVP	50.00					X		118,472.	0.	25,949.
(3) EDITH BLAKESLEE VP	50.00					X		111,817.	0.	19,240.
(4) MELISSA LEVESQUE VP	50.00					X		113,547.	0.	25,133.
(5) HERMAN GOINS CONTROLLER	50.00					X		100,907.	0.	13,648.
(6) CHRISTA DIVIS CFO DEPARTED 5/3/2019	50.00			X				48,351.	0.	7,166.
(7) JANE LITZ CFO STARTED 11/4/2019	50.00			X				33,529.	0.	0.
(8) RONDA DEAN DIRECTOR	1.00	X						0.	0.	0.
(9) TONY GHOSTON DIRECTOR	1.00	X						0.	0.	0.
(10) SHAWAN GILLIANS DIRECTOR	1.00	X						0.	0.	0.
(11) STEVEN E. GOLDBERG DIRECTOR	1.00	X						0.	0.	0.
(12) RUELL HICKS DIRECTOR	1.00	X						0.	0.	0.
(13) CATHERINE LACOUR DIRECTOR	1.00	X						0.	0.	0.
(14) BERNETT WILLIAM MAZYCK DIRECTOR	1.00	X						0.	0.	0.
(15) LARRY MERCADO DIRECTOR	1.00	X						0.	0.	0.
(16) JAMIE PHILLIPPE DIRECTOR	1.00	X						0.	0.	0.
(17) COLLEEN TROY DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) JULIE H. WALKER DIRECTOR	1.00	X						0.	0.	0.
(19) ANGELIA WASHINGTON DIRECTOR	1.00	X						0.	0.	0.
(20) ANITA ZUCKER DIRECTOR	1.00	X						0.	0.	0.
(21) PAUL KOHLHEIM CHAIR	4.00	X		X				0.	0.	0.
(22) HERBERT DRAYTON CHAIR-ELECT	4.00	X		X				0.	0.	0.
(23) C. MICHAEL BRANHAM IMMEDIATE PAST CHAIR	1.00	X		X				0.	0.	0.
(24) PAUL K. HOOKER (KIP) SECRETARY/TREASURER	1.00	X		X				0.	0.	0.
1b Subtotal								767,263.	0.	119,334.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								767,263.	0.	119,334.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 5

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
FUND EVALUATION GROUP 201 EAST FIFTH ST, CINCINNATI, OH 45202	INVESTMENT CONSULTANT	178,635.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 1

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts							
1 a	Federated campaigns	1a	22,703.				
b	Membership dues	1b					
c	Fundraising events	1c	217,834.				
d	Related organizations	1d	133,000.				
e	Government grants (contributions)	1e					
f	All other contributions, gifts, grants, and similar amounts not included above	1f	36,582,452.				
g	Noncash contributions included in lines 1a-1f	1g	$ 4,011,788.				
h	**Total.** Add lines 1a-1f			36,955,989.			
Program Service Revenue		Business Code					
2 a	MANAGEMENT FEE INCOME	561000		2,691,725.	2,691,725.		
b	EARNED SERVICES FEES	561000		40,000.	40,000.		
c							
d							
e							
f	All other program service revenue						
g	**Total.** Add lines 2a-2f			2,731,725.			
Other Revenue							
3	Investment income (including dividends, interest, and other similar amounts)			4,212,804.		987,974.	3,224,830.
4	Income from investment of tax-exempt bond proceeds						
5	Royalties						

			(i) Real	(ii) Personal
6 a	Gross rents	6a	31,525.	
b	Less: rental expenses	6b	0.	
c	Rental income or (loss)	6c	31,525.	

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
d	Net rental income or (loss)	31,525.	31,525.		

Line	Description		(i) Securities	(ii) Other
7 a	Gross amount from sales of assets other than inventory	7a	145,326,627.	
b	Less: cost or other basis and sales expenses	7b	140,075,194.	25,930.
c	Gain or (loss)	7c	5,251,433.	-25,930.

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
d	Net gain or (loss)			5,225,503.			5,225,503.
8 a	Gross income from fundraising events (not including $ 217,834. of contributions reported on line 1c). See Part IV, line 18	8a	48,450.				
b	Less: direct expenses	8b	36,680.				
c	Net income or (loss) from fundraising events			11,770.			11,770.
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a	OTHER INCOME	900099		62,987.	62,987.		
b							
c							
d	All other revenue						
e	**Total.** Add lines 11a-11d			62,987.			
12	**Total revenue.** See instructions			49,232,303.	2,826,237.	987,974.	8,462,103.

932009 01-20-20

Form 990 (2019)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	20,677,675.	20,677,675.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	579,399.	579,399.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,090,084.	2,090,084.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	770,590.	387,868.	256,763.	125,959.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,001,231.	503,959.	333,613.	163,659.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	71,811.	36,145.	23,928.	11,738.
9 Other employee benefits	286,843.	144,379.	69,535.	72,929.
10 Payroll taxes	122,730.	61,775.	40,894.	20,061.
11 Fees for services (nonemployees):				
a Management	2,326,159.		2,326,159.	
b Legal				
c Accounting				
d Lobbying	240.		240.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	127,972.		127,972.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	568,159.	212,773.	346,889.	8,497.
12 Advertising and promotion	119,537.	63,626.	37,510.	18,401.
13 Office expenses	180,668.	90,939.	60,198.	29,531.
14 Information technology	61,263.	30,836.	20,413.	10,014.
15 Royalties				
16 Occupancy	167,535.	84,327.	55,823.	27,385.
17 Travel	29,965.	15,083.	9,984.	4,898.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	74,926.	32,972.	1,532.	40,422.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	146,734.	73,857.	48,892.	23,985.
23 Insurance	119,638.		119,638.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TAXES	119,808.	0.	119,808.	0.
b DEVELOPMENT AND RELOCAT	67,406.	33,928.	22,460.	11,018.
c CONTRIBUTIONS/SPONSORSH	45,167.	35,454.	9,713.	0.
d OTHER ADMIN EXPENSE	33,833.	17,030.	11,273.	5,530.
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	29,789,373.	25,172,109.	4,043,237.	574,027.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	1,599,984.	1	1,136,322.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,006,000.	3	646,000.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	88,091.	9	87,312.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 3,818,976.			
	b	Less: accumulated depreciation — 10b: 238,562.	2,891,381.	10c	3,580,414.
	11	Investments - publicly traded securities	100,239,204.	11	108,107,417.
	12	Investments - other securities. See Part IV, line 11	96,688,985.	12	101,811,396.
	13	Investments - program-related. See Part IV, line 11	1,400,000.	13	800,000.
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	203,913,645.	16	216,168,861.
Liabilities	17	Accounts payable and accrued expenses	1,009,758.	17	503,878.
	18	Grants payable	1,579,928.	18	1,427,139.
	19	Deferred revenue	7,500.	19	7,500.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	475,773.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,461,082.	25	3,634,804.
	26	**Total liabilities.** Add lines 17 through 25	6,058,268.	26	6,049,094.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ [X] and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	195,789,227.	27	207,880,740.
	28	Net assets with donor restrictions	2,066,150.	28	2,239,027.
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	197,855,377.	32	210,119,767.
	33	Total liabilities and net assets/fund balances	203,913,645.	33	216,168,861.

Form **990** (2019)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI .... [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	49,232,303.
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,789,373.
3	Revenue less expenses. Subtract line 2 from line 1	3	19,442,930.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	197,855,377.
5	Net unrealized gains (losses) on investments	5	-7,209,944.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	31,404.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	210,119,767.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII .... [X]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: [ ] Separate basis [X] Consolidated basis [ ] Both consolidated and separate basis	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: ______
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: ______
10 [ ] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations .... [ ]

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	24939290.	19832276.	22370158.	27516044.	36955989.	131613757
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	24939290.	19832276.	22370158.	27516044.	36955989.	131613757
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						24783968.
6 **Public support.** Subtract line 5 from line 4.						106829789

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	24939290.	19832276.	22370158.	27516044.	36955989.	131613757
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2348489.	2418015.	3876739.	2629022.	4212804.	15485069.
9 Net income from unrelated business activities, whether or not the business is regularly carried on				98,615.	721,556.	820,171.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		175,487.	133,259.	52,090.	62,987.	423,823.
11 **Total support.** Add lines 7 through 10						148342820

12 Gross receipts from related activities, etc. (see instructions) ..... 12 | 7,443,244.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) ..... 14 | 72.02 %

15 Public support percentage from 2018 Schedule A, Part II, line 14 ..... 15 | 76.30 %

16a **33 1/3% support test - 2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2019** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2018** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Line	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b A family member of a person described in (a) above?	11b		
c A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* **Part VI.**	11c		

Section B. Type I Supporting Organizations

		Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

		Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a government entity (see instructions).*

		Yes	No
2 Activities Test. **Answer (a) and (b) below.**			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3 Parent of Supported Organizations. **Answer (a) and (b) below.**			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.**	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*	3b		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**). See instructions.	
7 **Total annual distributions.** Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI.** See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI.** See instructions.			
7 **Excess distributions carryover to 2020.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

** PUBLIC DISCLOSURE COPY **

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year .... ▶ $ ____________

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

Name of organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 1,740,812.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 853,717.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 20,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 1,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5		$ 971,300.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
6		$ 1,469,844.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)

Name of organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	STOCK	$ 971,300.	12/31/19
6	STOCK	$ 1,469,844.	12/31/19
		$	
		$	
		$	
		$	

Name of organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

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

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ $

3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.	0.
b Total lobbying expenditures to influence a legislative body (direct lobbying)	240.	0.
c Total lobbying expenditures (add lines 1a and 1b)	240.	0.
d Other exempt purpose expenditures	29,789,132.	0.
e Total exempt purpose expenditures (add lines 1c and 1d)	29,789,372.	0.
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	0.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	0.
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount				1,000,000.	1,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,500,000.
c Total lobbying expenditures				240.	240.
d Grassroots nontaxable amount				250,000.	250,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					375,000.
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-A

CCF STAFF MET WITH VARIOUS SOUTH CAROLINA STATE REPRESENTATIVES AND SENATORS TO DISCUSS THEIR CONTINUED SUPPORT FOR THE CREATION AND SUSTAINABILITY OF SCHOOLS OF INNOVATION IN THE STATE OF SOUTH CAROLINA.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	288	3
2	Aggregate value of contributions to (during year)	10,640,864.	138,310.
3	Aggregate value of grants from (during year)	14,687,892.	1,793,776.
4	Aggregate value at end of year	77,451,182.	27,256,800.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] Yes [ ] No

Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- [ ] Preservation of land for public use (for example, recreation or education)
- [ ] Preservation of a historically important land area
- [ ] Protection of natural habitat
- [ ] Preservation of a certified historic structure
- [ ] Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	130,611,923.	121,329,983.	110,967,241.	98,206,609.	104,751,979.
b Contributions	2,929,350.	9,726,871.	7,371,630.	3,299,659.	5,388,653.
c Net investment earnings, gains, and losses	1,739,863.	4,867,983.	8,511,624.	13,678,733.	-4,245,645.
d Grants or scholarships	5,130,962.	3,768,185.	4,212,671.	3,172,363.	3,920,638.
e Other expenditures for facilities and programs	66,242.	169,478.	256,814.	84,696.	2,854,790.
f Administrative expenses	1,407,588.	1,375,251.	1,051,027.	960,701.	912,950.
g End of year balance	128,676,344.	130,611,923.	121,329,983.	110,967,241.	98,206,609.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ 100.00 %

b Permanent endowment ▶ .00 %

c Term endowment ▶ .00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations	3a(i)		X
(ii) Related organizations	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		225,805.		225,805.
b Buildings		3,121,478.	83,888.	3,037,590.
c Leasehold improvements				
d Equipment		471,693.	154,674.	317,019.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				3,580,414.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) LIFE INSURANCE POLICIES	1,543,747.	END-OF-YEAR MARKET VALUE
(B) ALTERNATIVE INVESTMENTS	98,224,393.	END-OF-YEAR MARKET VALUE
(C) NOTE RECEIVABLE -		
(D) PLACE-BASED IMPACT		
(E) INVESTING	907,145.	END-OF-YEAR MARKET VALUE
(F) REAL ESTATE	372,334.	END-OF-YEAR MARKET VALUE
(G) BENEFICIAL INT REMAINDER		
(H) TRUST	763,777.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	101,811,396.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASES PAYABLE & TENANT SECURITY	
(3) DEPOSITS	14,119.
(4) FUNDS HELD AND MANAGED FOR	
(5) CHARITABLE TRUSTS	1,834,518.
(6) ACCRUED PAID TIME OFF	49,798.
(7) GIFT ANNUITY PAYABLE - LONG TERM	1,576,369.
(8) GIFT ANNUITY PAYABLE - SHORT TERM	160,000.
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	3,634,804.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... [X]

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	

Part XIII **Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE FOUNDATION AND ITS SUPPORTING FOUNDATIONS ARE EXEMPT FROM FEDERAL INCOME TAX UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE IRC. IN ACCORDANCE WITH IRC REGULATIONS, THE FOUNDATION IS TAXED ON UNRELATED BUSINESS INCOME, WHICH CONSISTS OF EARNINGS FROM ACTIVITIES NOT RELATED TO THE EXEMPT PURPOSE OF THE FOUNDATION. THE FOUNDATION ACCOUNTS FOR TAX UNCERTAINTIES BASED ON A MORE LIKELY THAN NOT RECOGNITION THRESHOLD WHEREBY TAX BENEFITS ARE ONLY RECOGNIZED WHEN THE FOUNDATION BELIEVES THAT THEY HAVE A GREATER THAN 50% LIKELIHOOD OF BEING SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. THE FOUNDATION HAS EVALUATED ALL OF ITS TAX POSITIONS AND DETERMINED THAT IT HAD NO UNCERTAIN INCOME TAX POSITONS THAT WOULD REQUIRE RECOGNITION AS OF JUNE 30, 2020 OR 2019.

Part XIII Supplemental Information *(continued)*

THE FOUNDATION'S POLICY IS TO REPORT ACCRUED INTEREST RELATED TO UNRECOGNIZED TAX BENEFITS, WHEN APPLICABLE, AS INTEREST EXPENSE AND TO REPORT PENALTIES AS OTHER EXPENSE. WITH FEW EXCEPTIONS, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR TAX YEARS BEFORE 2016.

PART V, LINE 4

THE FOUNDATION INVESTS THE ENDOWMENT FUNDS WITH THE GOAL OF PRESERVING THE REAL PURCHASING POWER OF THESE PERMANENT ASSETS. THE FOUNDATION USES THE DISTRIBUTION FROM THESE ASSETS TO FUND ONGOING GRANTMAKING PROGRAMS TO ADDRESS THE CHARITABLE NEEDS OF THE COMMUNITY.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION
Employer identification number: 23-7390313

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...... ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
3 a Subtotal	0	0			0.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			0.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	MULTIPLE GRANTS AWARDED	1980084.		0.		
		EAST ASIA AND THE PACIFIC	SPECIAL PROJECT SUPPORT	10,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL OPERATING SUPPORT	100,000.		0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 2

3 Enter total number of other organizations or entities ▶ 3

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ..... [X] Yes [ ] No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ..... [ ] Yes [X] No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ..... [ ] Yes [X] No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ..... [X] Yes [ ] No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ..... [X] Yes [ ] No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ..... [ ] Yes [X] No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information Regarding Fundraising or Gaming Activities	OMB No. 1545-0047
	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	2019 Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part I — Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
- b ☐ Internet and email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Total ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 WIG & STACH BASH (event type)	(b) Event #2 GOLF EVENT (event type)	(c) Other events 1 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	208,381.	51,175.	6,728.	266,284.
	2 Less: Contributions	191,106.	20,000.	6,728.	217,834.
	3 Gross income (line 1 minus line 2)	17,275.	31,175.		48,450.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	14,553.	17,360.	4,767.	36,680.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				36,680.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				11,770.

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: ____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: ____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: ____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility ..... 13a %

b An outside facility ..... 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ______ and the amount of gaming revenue retained by the third party ▶ $ ______

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
50CAN, INC. 8983 UNIVERSITY BLVD., SUITE 104-142 - NORTH CHARLESTON, SC 29406	27-3069592	501(C)(3)	25,000.	0.			SPECIAL PROJECT SUPPORT
NEW DIRECTIONS OF HORRY COUNTY 732 8TH AVENUE NORTH MYRTLE BEACH, SC 29577	20-1831970	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NEW DESTINY CENTER, INC. 406 CAL CAUSEWAY ROAD TILLMAN, SC 29943	26-1640743	501(C)(3)	9,750.	0.			GENERAL OPERATING SUPPORT
NEIGHBORHOOD OUTREACH CONNECTION P.O. BOX 23558 HILTON HEAD ISLAND, SC 29925	54-2083947	501(C)(3)	36,250.	0.			MULTIPLE GRANTS AWARDED
NEIGHBOR TO NEIGHBOR OF SOUTH CAROLINA, INC. - P.O. BOX 3030 - MYRTLE BEACH, SC 29578	20-3314190	501(C)(3)	6,720.	0.			GENERAL OPERATING SUPPORT
NATURE CONSERVANCY, INC. 32 SOUTH EWING HELENA, MT 59601	53-0242652	501(C)(3)	16,000.	0.			MULTIPLE GRANTS AWARDED

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 348.

3 Enter total number of other organizations listed in the line 1 table ▶ 45.

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2019)**

932101 10-26-19

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATURAL RESOURCES DEFENSE COUNCIL, INC. - 40 WEST 20TH STREET - NEW YORK, NY 10011	13-2654926	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NATIONAL INVENTORS HALL OF FAME INC. - 3701 HIGHLAND PARK NW - NORTH CANTON, OH 44720	34-1580038	501(C)(3)	9,500.	0.			SPECIAL PROJECT SUPPORT
NATIONAL DOMESTIC WORKERS ALLIANCE, INC. - 45 BROADWAY, SUITE 320 - NEW YORK, NY 10006	35-2420942	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NEW YORK PUBLIC RADIO 160 VARICK STREET, 8TH FLOOR NEW YORK, NY 10013	13-3015230	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
NAMI LOWCOUNTRY P.O. BOX 24128 HILTON HEAD, SC 29926	57-0920882	501(C)(3)	20,500.	0.			MULTIPLE GRANTS AWARDED
MUSIC BATTERY 235 DELAHOW STREET DANIEL ISLAND, SC 29492	46-5228881	501(C)(3)	23,000.	0.			GENERAL OPERATING SUPPORT
MUSCULAR DYSTROPHY ASSOCIATION 207 REGENCY EXECUTIVE PARK DR, SUIT CHARLOTTE, NC 28217	13-1665552	501(C)(3)	8,500.	0.			MULTIPLE GRANTS AWARDED
MULTIPLYING GOOD 15 WEST 38TH STREET, SUITE 1210 NEW YORK, NY 10018	52-0959336	501(C)(3)	18,000.	0.			MULTIPLE GRANTS AWARDED
MORGAN STANLEY GLOBAL IMPACT FUNDING TRUST, INC. - 150 CLOVE ROAD - LITTLE FALLS, NJ 07424	52-7082731	501(C)(3)	218,180.	0.			SPECIAL PROJECT SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTCLAIR KIMBERLY ACADEMY FOUNDATION - 201 VALLEY ROAD - MONTCLAIR, NJ 07042	23-7365263	501(C)(3)	25,000.	0.			SPECIAL PROJECT SUPPORT
MONTCLAIR FREE PUBLIC LIBRARY FOUNDATION, INC. - 50 SOUTH FULLERTON AVENUE - MONTCLAIR, NJ 07042	82-0558746	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
MONTCLAIR FILM FESTIVAL, INC. 41 WATCHUNG PLAZA, #345 MONTCLAIR, NJ 07042	27-1732322	501(C)(3)	35,000.	0.			MULTIPLE GRANTS AWARDED
MISSION COLLECTIVE 142 SPORTSMAN ISLAND DR., UNIT C CHARLESTON, SC 29492	20-2383515	501(C)(3)	13,000.	0.			MULTIPLE GRANTS AWARDED
MY SISTER'S HOUSE, INC. P.O. BOX 71171 NORTH CHARLESTON, SC 29415-1171	57-0730861	501(C)(3)	6,423.	0.			MULTIPLE GRANTS AWARDED
NORTH CHARLESTON POPS! 5001 COLISEUM DRIVE NORTH CHARLESTON, SC 29418	35-2450311	501(C)(3)	18,000.	0.			MULTIPLE GRANTS AWARDED
NORTHWESTERN UNIVERSITY 2020 RIDGE AVENUE EVANSTON, IL 60208	36-2167817	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
NPR FOUNDATION P.O. BOX 791490 BALTIMORE, MD 21279-1490	52-1795789	501(C)(3)	10,000.	0.			MULTIPLE GRANTS AWARDED
PRESERVATION TRUST OF HISTORIC ST. HELENA CHURCH - PO BOX 1043 - BEAUFORT, SC 29901	20-0779465	501(C)(3)	25,000.	0.			SPECIAL PROJECT SUPPORT

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESERVATION SOCIETY OF CHARLESTON P.O. BOX 521 CHARLESTON, SC 29402	57-0439524	501(C)(3)	46,029.	0.			MULTIPLE GRANTS AWARDED
POST AND COURIER FOUNDATION 134 COLUMBUS STREET CHARLESTON, SC 29403	57-6020356	501(C)(3)	11,350.	0.			MULTIPLE GRANTS AWARDED
POSSE FOUNDATION 14 WALL STREET, SUITE 8A-60 NEW YORK, NY 10005	13-3840394	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
PORTER-GAUD FOUNDATION 300 ALBEMARLE ROAD CHARLESTON, SC 29407	45-2701202	501(C)(3)	43,684.	0.			MULTIPLE GRANTS AWARDED
PORT ROYAL SOUND FOUNDATION 310 OKATIE HIGHWAY OKATIE, SC 29909	20-4431922	501(C)(3)	24,000.	0.			MULTIPLE GRANTS AWARDED
PLANNED PARENTHOOD SOUTH ATLANTIC 100 SOUTH BOYLAN AVENUE RALEIGH, NC 27603	56-1282557	501(C)(3)	432,063.	0.			MULTIPLE GRANTS AWARDED
PI KAPPA ALPHA FOUNDATION 8347 WEST RANGE COVE MEMPHIS, TN 38125-0721	62-6039877	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
PENN CENTER, INC. MARTIN LUTHER KING, JR. DRIVE, PO BOX 126 - ST. HELENA ISLAND, SC 29920-0126	57-0324930	501(C)(3)	16,000.	0.			SPECIAL PROJECT SUPPORT
PATTISON'S DREAM ACADEMY PO BOX 80426 CHARLESTON, SC 29416	20-3419262	501(C)(3)	42,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARENTS AND GUARDIANS ASSOCIATION OF THE COASTAL CENTER - 9995 JAMISON ROAD - SUMMERVILLE, SC 29485	57-0735284	501(C)(3)	6,304.	0.			GENERAL OPERATING SUPPORT
PALMETTO PROJECT, INC. PO BOX 183 CHARLESTON, SC 29402	57-0807801	501(C)(3)	41,028.	0.			MULTIPLE GRANTS AWARDED
PALMETTO CITY BALLET 494-A WANDO PARK BLVD. MT. PLEASANT, SC 29464	46-5203899	501(C)(3)	5,250.	0.			MULTIPLE GRANTS AWARDED
OUR LADY OF MERCY COMMUNITY OUTREACH SERVICES - P.O. BOX 607 - JOHNS ISLAND, SC 29457	57-0905488	501(C)(3)	73,055.	0.			MULTIPLE GRANTS AWARDED
OREGON BALLET THEATRE 0720 SW BANCROFT ST PORTLAND, OR 97239	93-1009305	501(C)(3)	8,500.	0.			MULTIPLE GRANTS AWARDED
OPERATION SIGHT 1101 CLARITY ROAD, SUITE 100 MOUNT PLEASANT, SC 29464	45-3449443	501(C)(3)	18,500.	0.			MULTIPLE GRANTS AWARDED
OPERATION HOME, INC. 3973 RIVERS AVE,., SUITE 104 NORTH CHARLESTON, SC 29405	62-1745925	501(C)(3)	41,710.	0.			MULTIPLE GRANTS AWARDED
ONE80 PLACE P.O. BOX 20038 CHARLESTON, SC 29413-0038	57-0789483	501(C)(3)	56,750.	0.			MULTIPLE GRANTS AWARDED
ONE FELLOWSHIP 142 SPORTSMAN ISLAND DRIVE, UNIT C CHARLESTON, SC 29492	84-3427442	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISS RUBY'S KIDS P. O. BOX 1007 GEORGETOWN, SC 29442	20-3933169	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
MIDDLETON PLACE FOUNDATION 4300 ASHLEY RIVER ROAD CHARLESTON, SC 29414	57-0611604	501(C)(3)	12,168.	0.			MULTIPLE GRANTS AWARDED
MIDDLE TYGER COMMUNITY CENTER 84 GRACE ROAD LYMAN, SC 29365	57-1077940	501(C)(3)	40,625.	0.			SPECIAL PROJECT SUPPORT
MID SOUTH RAPTOR CENTER 1176 DEARING ROAD MEMPHIS, TN 38117	38-3704653	501(C)(3)	7,000.	0.			MULTIPLE GRANTS AWARDED
LOWCOUNTRY AIDS SERVICES 3547 MEETING STREET ROAD NORTH CHARLESTON, SC 29405	57-0905550	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT
LITTLE RED DOG FOUNDATION 55 WOODLAND RIDGE CIRCLE BEAUFORT, SC 29907	35-2300822	501(C)(3)	15,000.	0.			MULTIPLE GRANTS AWARDED
LITTLE ACORN HOUSE 1916 BERUE DRIVE COATSVILLE, PA 19320	82-2093264	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
LITERACY VOLUNTEERS OF THE LOWCOUNTRY, INC. - P.O. BOX 3725 - BLUFFTON, SC 29910	57-0727884	501(C)(3)	29,000.	0.			MULTIPLE GRANTS AWARDED
LINCOLN TUBMAN FOUNDATION 574 NEEDLERUSH PARKWAY MT. PLEASANT, SC 29464	83-1145725	501(C)(3)	13,000.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KT DESTINY CENTER, INC. POST OFFICE BOX 2292 RIDGELAND, SC 29936	46-0704390	501(C)(3)	7,000.	0.			GENERAL OPERATING SUPPORT
KIDS ON POINT, INC. P.O. BOX 22731 CHARLESTON, SC 29413	27-0771548	501(C)(3)	57,500.	0.			MULTIPLE GRANTS AWARDED
YOUTH EMPOWERMENT SERVICES P.O. BOX 41784 CHARLESTON, SC 29423	57-1092673	501(C)(3)	8,500.	0.			MULTIPLE GRANTS AWARDED
JUNIOR LEAGUE OF CHARLESTON, INC. 51 FOLLY ROAD CHARLESTON, SC 29407	57-0335419	501(C)(3)	10,343.	0.			MULTIPLE GRANTS AWARDED
JUNIOR ACHIEVEMENT OF GREATER SOUTH CAROLINA, INC. - 2711 MIDDLEBURG DRIVE, SUITE 105 - COLUMBIA, SC 29204	57-0477845	501(C)(3)	21,500.	0.			MULTIPLE GRANTS AWARDED
JOHNS HOPKINS UNIVERSITY 146 GARLAND HALL, 3400 N. CHARLES S BALTIMORE, MD 21218-2683	52-0595110	501(C)(3)	15,000.	0.			MULTIPLE GRANTS AWARDED
JAZZ HOUSE KIDS, INC. 347 BLOOMFIELD AVENUE LOWER LEVEL MONTCLAIR, NJ 07042	56-2303577	501(C)(3)	35,000.	0.			MULTIPLE GRANTS AWARDED
JASPER COUNTY COUNCIL FOR THE AGING - P.O. BOX 641 - RIDGELAND, SC 29936	57-0564656	501(C)(3)	17,500.	0.			MULTIPLE GRANTS AWARDED
IRAQ AND AFGHANISTAN VETERANS OF AMERICA, INC. - 85 BROAD STREET, 16TH FLOOR - NEW YORK, NY 10004	20-1664531	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL AFRICAN AMERICAN MUSEUM - PO BOX 22761 - CHARLESTON, SC 29413	20-3398254	501(C)(3)	742,242.	0.			MULTIPLE GRANTS AWARDED
ICNA RELIEF USA PROGRAMS, INC. 1092 JOHNNIE DODDS BLVD. SUITE 108 MOUNT PLEASANT, SC 29464	04-3810161	501(C)(3)	6,000.	0.			MULTIPLE GRANTS AWARDED
HUMANITIES FOUNDATION, INC. 474 WANDO PARK BLVD. STE. 102 MOUNT PLEASANT, SC 29464-7933	57-0952289	501(C)(3)	33,000.	0.			MULTIPLE GRANTS AWARDED
HUMAN NEEDS FOOD PANTRY, INC. 9 LABEL STREET MONTCLAIR, NJ 07042	22-3057065	501(C)(3)	20,000.	0.			MULTIPLE GRANTS AWARDED
HOWARD UNIVERSITY 2400 SIXTH STREET, NW - SUITE 218 WASHINGTON, DC 20059	53-0204707	501(C)(3)	15,885.	0.			MULTIPLE GRANTS AWARDED
LOWCOUNTRY ALLIANCE FOR MODEL COMMUNITIES - 2125 DORCHESTER ROAD - NORTH CHARLESTON, SC 29405	20-3979178	501(C)(3)	24,000.	0.			MULTIPLE GRANTS AWARDED
PROGRAMS FOR EXCEPTIONAL PEOPLE 39 SHERIDAN PARK CIRCLE, SUITE 2 BLUFFTON, SC 29910	57-1036680	501(C)(3)	10,000.	0.			SPECIAL PROJECT SUPPORT
LOWCOUNTRY FOOD BANK, INC. 2864 AZALEA DRIVE CHARLESTON, SC 29405	57-0751835	501(C)(3)	350,395.	0.			MULTIPLE GRANTS AWARDED
LOWCOUNTRY LAND TRUST, INC. 635 RUTLEDGE AVENUE, SUITE 107 CHARLESTON, SC 29403	57-0809313	501(C)(3)	35,700.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028	13-1624086	501(C)(3)	6,500.	0.			MULTIPLE GRANTS AWARDED
METANOIA 2005 REYNOLDS AVENUE NORTH CHARLESTON, SC 29405	20-0310400	501(C)(3)	92,781.	0.			MULTIPLE GRANTS AWARDED
MESOTHELIOMA APPLIED RESEARCH FOUNDATION, INC. - 1615 L STREET NW, SUITE 430 - WASHINGTON, DC 20036	75-2816066	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
MEPKIN ABBEY CATHOLIC CONFERENCE 1098 MEPKIN ABBEY ROAD MONCKS CORNER, SC 29461	57-0416728	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
MEMORY MATTERS P.O. BOX 22330 HILTON HEAD ISLAND, SC 29925-2330	58-2291775	501(C)(3)	20,500.	0.			MULTIPLE GRANTS AWARDED
MEETING STREET SCHOOLS 642 MEETING STREET CHARLESTON, SC 29403	20-4587841	501(C)(3)	20,000.	0.			SPECIAL PROJECT SUPPORT
MEET THE NEEDS CHARLESTON 275 BEECH HILL MOUNT PLEASANT, SC 29464	47-2703106	501(C)(3)	12,000.	0.			MULTIPLE GRANTS AWARDED
MEDICAL UNIVERSITY OF SOUTH CAROLINA FOUNDATION - 18 BEE STREET, MSC 450 - CHARLESTON, SC 29425	57-6028985	501(C)(3)	359,871.	0.			MULTIPLE GRANTS AWARDED
MED-I-ASSIST, INC. P.O. BOX 3164 BLUFFTON, SC 29910	32-0212924	501(C)(3)	33,000.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEALS ON WHEELS, BLUFFTON-HILTON HEAD, INC. - P.O. BOX 23691 - HILTON HEAD ISLAND, SC 29925	57-0691109	501(C)(3)	52,500.	0.			MULTIPLE GRANTS AWARDED
MEALS ON WHEELS OF SUMMERVILLE P.O. BOX 592 SUMMERVILLE, SC 29484	57-0730993	501(C)(3)	24,500.	0.			MULTIPLE GRANTS AWARDED
MEALS ON WHEELS AMERICA 1550 CRYSTAL DRIVE, SUITE 1004 ARLINGTON, VA 22202	23-7447812	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	13,000.	0.			MULTIPLE GRANTS AWARDED
MARCH OF DIMES FOUNDATION PO BOX 18819 ATLANTA, GA 31126	13-1846366	501(C)(3)	6,000.	0.			MULTIPLE GRANTS AWARDED
MAKE-A-WISH FOUNDATION OF S.C., INC. - 225 SOUTH PLEASANTBURG DRIVE, #C17 - GREENVILLE, SC 29607	57-0786119	501(C)(3)	8,000.	0.			GENERAL OPERATING SUPPORT
LUTHERAN SOCIAL SERVICES OF THE GREATER CHARLESTON AREA - 2105 COSGROVE AVENUE - NORTH CHARLESTON, SC 29405	57-0794782	501(C)(3)	24,500.	0.			MULTIPLE GRANTS AWARDED
LOWCOUNTRY ORPHAN RELIEF P.O. BOX 70185 NORTH CHARLESTON, SC 29415	26-1108081	501(C)(3)	23,500.	0.			MULTIPLE GRANTS AWARDED
LOWCOUNTRY LOCAL FIRST PO BOX 72018 NORTH CHARLESTON, SC 29415	87-0792700	501(C)(3)	17,800.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOWCOUNTRY LEGAL VOLUNTEERS P.O. BOX 2496 BLUFFTON, SC 29910	56-2202319	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
LOWCOUNTRY HABITAT FOR HUMANITY 616 PARRIS ISLAND GATEWAY BEAUFORT, SC 29906	57-0920920	501(C)(3)	32,800.	0.			MULTIPLE GRANTS AWARDED
PUBLIC LIBRARY FOUNDATION OF BEAUFORT COUNTY - 311 SCOTT STREET, SUITE 201 - BEAUFORT, SC 29902	14-1925218	501(C)(3)	55,000.	0.			MULTIPLE GRANTS AWARDED
REACH OUT AND READ, INC. 18 PLOTT DRIVE SYLVA, NC 28779	04-3481253	501(C)(3)	26,000.	0.			MULTIPLE GRANTS AWARDED
READING PARTNERS 6296 RIVERS AVENUE, SUITE 305 NORTH CHARLESTON, SC 29406-4973	77-0568469	501(C)(3)	48,875.	0.			MULTIPLE GRANTS AWARDED
UNITED SCHOOLS NETWORK, INC. 1469 E. MAIN STREET COLUMBUS, OH 43205	46-2265149	501(C)(3)	8,000.	0.			GENERAL OPERATING SUPPORT
UNDER ONE ROOF SERVICES, INC. P.O. BOX 1901 BEAUFORT, SC 29901	27-0981486	501(C)(3)	30,000.	0.			MULTIPLE GRANTS AWARDED
UNDER 21 P.O. BOX 731 NEW YORK, NY 10108-0900	13-3076376	501(C)(3)	34,000.	0.			MULTIPLE GRANTS AWARDED
TRINITY EPISCOPAL CATHEDRAL 1100 SUMTER STREET COLUMBIA, SC 29201	57-0314419	501(C)(3)	23,000.	0.			MULTIPLE GRANTS AWARDED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRINITY COLLEGE 300 SUMMIT STREET HARTFORD, CT 06106	06-0646927	501(C)(3)	100,000.	0.			SPECIAL PROJECT SUPPORT
TRIDENT UNITED WAY, INC. P.O. BOX 63305 NORTH CHARLESTON, SC 29419	57-0314378	501(C)(3)	211,427.	0.			MULTIPLE GRANTS AWARDED
TRIDENT TECHNICAL COLLEGE FOUNDATION, INC. - P.O. BOX 61227 - CHARLESTON, SC 29419-1227	57-0699317	501(C)(3)	57,789.	0.			MULTIPLE GRANTS AWARDED
TRIDENT LITERACY ASSOCIATION 6185-D RIVERS AVENUE NORTH CHARLESTON, SC 29406	57-0721308	501(C)(3)	54,908.	0.			MULTIPLE GRANTS AWARDED
TRIDENT ACADEMY, INC. 1455 WAKENDAW ROAD MOUNT PLEASANT, SC 29464	57-0542727	501(C)(3)	214,007.	0.			MULTIPLE GRANTS AWARDED
TRI-COUNTY CRADLE-TO-CAREER COLLABORATIVE - 6296 RIVERS AVENUE, SUITE 308 - NORTH CHARLESTON, SC 29406	46-2902337	501(C)(3)	36,000.	0.			MULTIPLE GRANTS AWARDED
TREVECCA NAZARENE UNIVERSITY 333 MURFREESBORO ROAD NASHVILLE, TN 37210-2877	62-0497990	501(C)(3)	150,000.	0.			SPECIAL PROJECT SUPPORT
TOGETHER SC PO BOX 12903 COLUMBIA, SC 29211	57-1057398	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
TIMROD LITERARY AND LIBRARY ASSOCIATION - 217 CENTRAL AVENUE - SUMMERVILLE, SC 29483	57-0370528	501(C)(3)	7,200.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TIDELANDS COMMUNITY HOSPICE FOUNDATION - 2591 NORTH FRASER STREET - GEORGETOWN, SC 29440	57-0752796	501(C)(3)	22,759.	0.			MULTIPLE GRANTS AWARDED
THUMBS UP, INC. 914 HAMAR STREET BEAUFORT, SC 29902	57-1025876	501(C)(3)	31,000.	0.			MULTIPLE GRANTS AWARDED
THE VILLAGE REPERTORY COMPANY 34 WOOLFE STREET CHARLESTON, SC 29403	30-0137284	501(C)(3)	51,000.	0.			MULTIPLE GRANTS AWARDED
THE VILLAGE GROUP P. O. BOX 700 GEORGETOWN, SC 29442-0700	06-1749252	501(C)(3)	10,000.	0.			MULTIPLE GRANTS AWARDED
THE NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD, SUITE 1200 JENKINTOWN, PA 19046	23-7825575	501(C)(3)	4,946,887.	0.			MULTIPLE GRANTS AWARDED
THE LIBRARY FOUNDATION OF CHARLESTON - 5 SAINT MICHAELS ALLEY - CHARLESTON, SC 29401	30-0963256	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
UNITED WAY ASSOCIATION OF SOUTH CAROLINA, INC. - 914 RICHLAND STREET, SUITE A200 - COLUMBIA, SC 29201	57-0515275	501(C)(3)	10,000.	0.			MULTIPLE GRANTS AWARDED
THE LEUKEMIA & LYMPHOMA SOCIETY, INC. - 941 HOUSTON NORTHCUTT BOULEVARD, SUITE 203 - MOUNT PLEASANT, SC 29464	13-5644916	501(C)(3)	6,684.	0.			MULTIPLE GRANTS AWARDED
UNITED WAY OF HORRY COUNTY, INC. POST OFFICE BOX 673 CONWAY, SC 29528	57-0558692	501(C)(3)	55,000.	0.			GENERAL OPERATING SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY WORLDWIDE PO BOX 418607 BOSTON, MA 02241	13-1635294	501(C)(3)	25,000.	0.			SPECIAL PROJECT SUPPORT
YOUNG LIFE P.O. BOX 1885 BEAUFORT, SC 29901	84-0385934	501(C)(3)	13,000.	0.			MULTIPLE GRANTS AWARDED
YMCA OF COASTAL CAROLINA P.O. BOX 1087 GEORGETOWN, SC 29942	57-0747196	501(C)(3)	15,000.	0.			GENERAL OPERATING SUPPORT
YESCAROLINA 171 CHURCH ST., SUITE 212 CHARLESTON, SC 29401	20-3562766	501(C)(3)	9,600.	0.			MULTIPLE GRANTS AWARDED
YALE UNIVERSITY P O BOX 208288 NEW HAVEN, CT 06520	06-0646973	501(C)(3)	16,000.	0.			MULTIPLE GRANTS AWARDED
WOUNDED WARRIOR PROJECT, INC. P.O. BOX 758517 TOPEKA, KS 66675-8517	20-2370934	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
WORLDVIEW MINISTRY INTERNATIONAL, INC. - P.O. BOX 529 - NORTH MYRTLE BEACH, SC 29597	26-4164344	501(C)(3)	10,000.	0.			SPECIAL PROJECT SUPPORT
WORLD CENTRAL KITCHEN 1342 FLORIDA AVE, NW WASHINGTON, DC 20009	27-3521132	501(C)(3)	29,500.	0.			MULTIPLE GRANTS AWARDED
WOMEN'S RIGHTS AND EMPOWERMENT NETWORK - 1201 MAIN STREET SUITE 320 - COLUMBIA, SC 29201	81-0775184	501(C)(3)	205,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOFFORD COLLEGE 429 NORTH CHURCH STREET SPARTANBURG, SC 29303-3663	57-0314422	501(C)(3)	19,950.	0.			MULTIPLE GRANTS AWARDED
WINGS FOR KIDS 476 MEETING STREET, SUITE E CHARLESTON, SC 29403-4841	57-1055054	501(C)(3)	66,500.	0.			MULTIPLE GRANTS AWARDED
WINDWOOD FARM HOME FOR CHILDREN, INC. - 4857 WINDWOOD FARM ROAD - AWENDAW, SC 29429	57-0807424	501(C)(3)	60,250.	0.			MULTIPLE GRANTS AWARDED
WILLIAM TEMPLE HOUSE 2023 NW HOYT STREET PORTLAND, OR 09720	93-0559964	501(C)(3)	15,000.	0.			MULTIPLE GRANTS AWARDED
WESLEYAN UNIVERSITY 237 HIGH STREET MIDDLETON, CT 06459	06-0646959	501(C)(3)	12,000.	0.			MULTIPLE GRANTS AWARDED
WE ARE FAMILY P.O. BOX 21806 CHARLESTON, SC 29413	57-1008020	501(C)(3)	23,500.	0.			MULTIPLE GRANTS AWARDED
WATER MISSIONS INTERNATIONAL P.O. BOX 63320 CHARLOTTE, NC 28263-3320	57-1116978	501(C)(3)	62,529.	0.			MULTIPLE GRANTS AWARDED
VOLUNTEERS IN MEDICINE CLINIC 15 NORTHRIDGE DRIVE HILTON HEAD ISLAND, SC 29926	57-0959206	501(C)(3)	40,000.	0.			MULTIPLE GRANTS AWARDED
VITAL AGING OF WILLIAMSBURG COUNTY, INC. - P.O. BOX 450 - KINGSTREE, SC 29556	58-2276534	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGIN UNITE USA, INC. 65 BLEECKER STREET, 6TH FLOOR NEW YORK, NY 10012	20-3963486	501(C)(3)	22,225.	0.			SPECIAL PROJECT SUPPORT
UNIVERSITY OF SOUTH CAROLINA EDUCATIONAL FOUNDATION - 1027 BARNWELL STREET - COLUMBIA, SC 29208	57-6017985	501(C)(3)	305,000.	0.			MULTIPLE GRANTS AWARDED
UNITED WAY OF THE LOWCOUNTRY, INC. P.O. BOX 202 BEAUFORT, SC 29901-0202	57-0405847	501(C)(3)	35,394.	0.			MULTIPLE GRANTS AWARDED
HOPEFUL HORIZONS, INC. P.O. BOX 1775 BEAUFORT, SC 29901	57-1063332	501(C)(3)	135,672.	0.			MULTIPLE GRANTS AWARDED
THE HUMANE SOCIETY OF THE UNITED STATES - 1255 23RD STREET NW, SUITE 450 - WASHINGTON, DC 20037	53-0225390	501(C)(3)	6,382.	0.			MULTIPLE GRANTS AWARDED
THE CITADEL FOUNDATION 171 MOULTRIE STREET CHARLESTON, SC 29409	57-6020493	501(C)(3)	7,115.	0.			MULTIPLE GRANTS AWARDED
SOUTH CAROLINA COASTAL CONSERVATION LEAGUE, INC. - P.O. BOX 1765 - CHARLESTON, SC 29402-9940	57-0887278	501(C)(3)	149,849.	0.			MULTIPLE GRANTS AWARDED
SOUTH CAROLINA ARTS FOUNDATION 1989 - 1026 SUMTER STREET, SUITE 200 - COLUMBIA, SC 29201	57-0892045	501(C)(3)	47,389.	0.			MULTIPLE GRANTS AWARDED
SOUTH CAROLINA AQUARIUM 100 AQUARIUM WHARF CHARLESTON, SC 29401	57-0961897	501(C)(3)	124,889.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOS HEALTH CARE, INC. P.O. BOX 7136 MYRTLE BEACH, SC 29572-7136	57-0909189	501(C)(3)	15,400.	0.			MULTIPLE GRANTS AWARDED
SOMOS AMIGOS MEDICAL MISSIONS PO BOX 2351 SARASOTA, CA 95070	77-0553014	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SMITH MEDICAL CLINIC, INC. 99 BASKERVILL DRIVE PAWLEYS ISLAND, SC 29585	57-0786699	501(C)(3)	10,365.	0.			MULTIPLE GRANTS AWARDED
SMALLS INSTITUTE FOR MUSIC AND YOUTH LEADERSHIP - P.O. BOX 13497 - CHARLESTON, SC 29422-3497	27-0707233	501(C)(3)	8,000.	0.			GENERAL OPERATING SUPPORT
SECOND HELPINGS P.O. BOX 23521 HILTON HEAD ISLAND, SC 29925	57-0938469	501(C)(3)	73,000.	0.			MULTIPLE GRANTS AWARDED
SEABROOK ISLAND VILLAGE NEIGHBORS HELPING NEIGHBORS - 2540 OTTER LAND - SEABROOK ISLAND, SC 29455	83-3342522	501(C)(3)	5,678.	0.			GENERAL OPERATING SUPPORT
SEA ISLANDS HUNGER AWARENESS FOUNDATION - P.O. BOX 268 - JOHNS ISLAND, SC 29457-0268	47-2730495	501(C)(3)	20,000.	0.			MULTIPLE GRANTS AWARDED
SEA ISLAND HABITAT FOR HUMANITY 2545 BOHICKET ROAD JOHNS ISLAND, SC 29455	57-0840667	501(C)(3)	43,000.	0.			MULTIPLE GRANTS AWARDED
SALVATION ARMY 2135 ASHLEY RIVER ROAD CHARLESTON, SC 29407	58-0660607	501(C)(3)	45,477.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
S.C. GOVERNOR'S SCHOOL FOR SCIENCE & MATH FOUNDATION, INC. - 1122 LADY STREET SUITE 700 - COLUMBIA, SC 29201	57-0881347	501(C)(3)	13,500.	0.			MULTIPLE GRANTS AWARDED
ROPER ST. FRANCIS FOUNDATION 125 DOUGHTY STREET, STE 790 CHARLESTON, SC 29403	57-1068509	501(C)(3)	8,883.	0.			MULTIPLE GRANTS AWARDED
RONALD MCDONALD HOUSE CHARITIES OF THE COASTAL EMPIRE - 4710 WATERS AVENUE - SAVANNAH, GA 31404	58-1630107	501(C)(3)	35,000.	0.			MULTIPLE GRANTS AWARDED
RONALD MCDONALD HOUSE CHARITIES OF CHARLESTON SC, INC. - 81 GADSDEN STREET - CHARLESTON, SC 29401-1156	57-0724845	501(C)(3)	26,786.	0.			MULTIPLE GRANTS AWARDED
REFUGEES INTERNATIONAL 2001 S STREET, NW, SUITE 700 WASHINGTON, DC 20009	52-1224516	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
REFUGEE & IMMIGRANT CENTER FOR EDUCATION & LEGAL SERVICES - 1305 N. FLORES STREET - SAN ANTONIO, TX 78212	74-2436920	501(C)(3)	9,000.	0.			MULTIPLE GRANTS AWARDED
RECONCILIATION MINISTRIES SC 3120 KAY STREET COLUMBIA, SC 29210	26-0067588	501(C)(3)	100,000.	0.			MULTIPLE GRANTS AWARDED
SOUTH CAROLINA COMMUNITY LOAN FUND, INC. - 1051-A GARDNER ROAD, SUITE 302 - CHARLESTON, SC 29407	01-0793507	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
THE HILTON HEAD ISLAND DEEP WELL PROJECT - PO BOX 5543 - HILTON HEAD ISLAND, SC 29938	57-0566098	501(C)(3)	15,000.	0.			SPECIAL PROJECT SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH CAROLINA ENVIRONMENTAL LAW PROJECT, INC. - P.O. BOX 1380 - PAWLEYS ISLAND, SC 29585	57-1031430	501(C)(3)	37,900.	0.			MULTIPLE GRANTS AWARDED
SOUTH CAROLINA LIONS CHARITABLE SERVICES - 234 OUTLET POINT BOULEVARD, SUITE C - COLUMBIA, SC 29210	23-7105526	501(C)(3)	7,000.	0.			GENERAL OPERATING SUPPORT
THE CHARLESTON STAGE COMPANY, INC. P.O. BOX 356 CHARLESTON, SC 29402	57-0694183	501(C)(3)	98,375.	0.			MULTIPLE GRANTS AWARDED
THE CHARITY FOUNDATION 1544 EAST MONTAGUE AVENUE NORTH CHARLESTON, SC 29405	57-1111199	501(C)(3)	30,000.	0.			SPECIAL PROJECT SUPPORT
THE APOLLO THEATER FOUNDATION, INC. - 253 WEST 125TH STREET - NEW YORK, NY 10027	13-3630066	501(C)(3)	8,500.	0.			GENERAL OPERATING SUPPORT
TECHNICAL COLLEGE OF THE LOWCOUNTRY FOUNDATION INCORPORATED - P.O. BOX 2614 - BEAUFORT, SC 29901	57-0767384	501(C)(3)	243,000.	0.			MULTIPLE GRANTS AWARDED
TEACHERS SUPPLY CLOSET 2731 GORDON STREET NORTH CHARLESTON, SC 29405	45-0542815	501(C)(3)	29,560.	0.			MULTIPLE GRANTS AWARDED
TEACH MY PEOPLE P.O. BOX 2848 PAWLEYS ISLAND, SC 29585	57-1075900	501(C)(3)	13,000.	0.			MULTIPLE GRANTS AWARDED
TEACH FOR AMERICA, INC. 635 RUTLEDGE AVENUE, SUITE 201 CHARLESTON, SC 29403	13-3541913	501(C)(3)	32,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYRIAN AMERICAN MEDICAL SOCIETY FOUNDATION - PO BOX 34115 - WASHINGTON, DC 20043	16-1717058	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SYMPHONY SPACE, INC. 2537 BROADWAY NEW YORK, NY 10025	13-2941455	501(C)(3)	12,500.	0.			GENERAL OPERATING SUPPORT
STORYCORPS, INC. 80 HANSON PLACE, 2ND FLOOR BROOKLYN, NY 11217	13-3753011	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION - 2361 HYLAN BLVD - STATEN ISLAND, NY 10306	02-0554654	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SPRING HILL COLLEGE 4000 DAUPHIN STREET MOBILE, AL 36608	63-0302179	501(C)(3)	250,000.	0.			GENERAL OPERATING SUPPORT
SPOLETO FESTIVAL U.S.A. 14 GEORGE STREET CHARLESTON, SC 29401	57-0660848	501(C)(3)	330,114.	0.			MULTIPLE GRANTS AWARDED
SPELMAN COLLEGE 350 SPELMAN LANE S.W. ATLANTA, GA 30314	58-0566243	501(C)(3)	7,500.	0.			SCHOLARSHIP
SOUTHERN ENVIRONMENTAL LAW CENTER 201 WEST MAIN STREET, SUITE 14 CHARLOTTESVILLE, VA 22902-5065	52-1436778	501(C)(3)	46,000.	0.			MULTIPLE GRANTS AWARDED
SOUTHERN DHARMA RETREAT CENTER, INC. - 1661 WEST ROAD - HOT SPRINGS, NC 28743	56-1695711	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHEAST RESCUE 1462 FIDDLERS MARSH DRIVE MT. PLEASANT, SC 29464	83-2636619	501(C)(3)	25,000.	0.			SPECIAL PROJECT SUPPORT
SOUTH CAROLINA VICTIM ASSISTANCE NETWORK - PO BOX 212863 - COLUMBIA, SC 29221	57-0813749	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT
SOUTH CAROLINA SPECIAL OLYMPICS 5469 PARKERS FERRY ROAD ADAMS RUN, SC 29426	57-0680248	501(C)(3)	8,800.	0.			MULTIPLE GRANTS AWARDED
SOUTH CAROLINA JUNIOR GOLF FOUNDATION - P.O. BOX 286 - IRMO, SC 29063	57-1021847	501(C)(3)	12,000.	0.			SPECIAL PROJECT SUPPORT
HOME OF MONTCLAIR ECUMENICAL CORP. 17 TALBOT STREET MONTCLAIR, NJ 07042	22-2904529	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
KAHAL KADOSH BETH ELOHIM 90 HASELL STREET CHARLESTON, SC 29401	57-0406806	501(C)(3)	43,809.	0.			MULTIPLE GRANTS AWARDED
HISTORIC COLUMBIA FOUNDATION, INC. 1601 RICHLAND STREET COLUMBIA, SC 29201	57-6020250	501(C)(3)	15,000.	0.			SPECIAL PROJECT SUPPORT
CHARLESTON AREA THERAPEUTIC RIDING, INC. - P.O. BOX 146 - JOHNS ISLAND, SC 29457	57-0937061	501(C)(3)	15,625.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON AREA SENIOR CITIZENS SERVICES, INC. - 259 MEETING STREET - CHARLESTON, SC 29401	57-6030048	501(C)(3)	21,950.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON AREA JUSTICE MINISTRY P.O. BOX 71416 NORTH CHARLESTON, SC 29415	46-1758506	501(C)(3)	9,000.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON ANIMAL SOCIETY 2455 REMOUNT ROAD NORTH CHARLESTON, SC 29406	57-6021863	501(C)(3)	66,090.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON ACADEMY OF MUSIC P.O. BOX 22364 CHARLESTON, SC 29413	01-0739765	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
CENTER FOR HEIRS' PROPERTY PRESERVATION - 1535 SAM RITTENBERG BLVD, SUITE D - CHARLESTON, SC 29407	52-2452879	501(C)(3)	60,000.	0.			MULTIPLE GRANTS AWARDED
CATHOLIC COMMUNITY FOUNDATION OF SC - PO BOX 31257 - CHARLESTON, SC 29417	82-1557805	501(C)(3)	9,700.	0.			MULTIPLE GRANTS AWARDED
CATHOLIC CHARITIES OF TENNESSEE 2806 MCGAVOCK PIKE NASHVILLE, TN 37214	62-0679520	501(C)(3)	6,000.	0.			SPECIAL PROJECT SUPPORT
CHARLESTON CHARTER SCHOOL FOR MATH AND SCIENCE - 1002 KING STREET - CHARLESTON, SC 29403	84-1720146	501(C)(3)	8,750.	0.			MULTIPLE GRANTS AWARDED
CAROLINA ART ASSOCIATION 135 MEETING STREET CHARLESTON, SC 29401	57-0323047	501(C)(3)	39,810.	0.			MULTIPLE GRANTS AWARDED
CAMPUS CRUSADE FOR CHRIST, INC. P.O. BOX 628222 ORLANDO, FL 32862-8222	95-6006173	501(C)(3)	7,200.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPHILL SPECIAL SCHOOL 1784 FAIRVIEW ROAD GLENMOORE, PA 19343	23-1443766	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
CAMP WILDWOOD, INC. P.O. BOX 123 HAMPTON, SC 29924	57-1059635	501(C)(3)	29,500.	0.			MULTIPLE GRANTS AWARDED
CAMP RISE ABOVE, INC. P.O. BOX 31295 CHARLESTON, SC 29417	27-0545990	501(C)(3)	15,000.	0.			MULTIPLE GRANTS AWARDED
CAMP HAPPY DAYS, INC. 1 CARRIAGE LANE, BUILDING C, SUITES 101 & 102 - CHARLESTON, SC 29407	57-0755466	501(C)(3)	46,764.	0.			MULTIPLE GRANTS AWARDED
BRIDGES FOR END-OF-LIFE P.O. BOX 417 MOUNT PLEASANT, SC 29465	57-0701359	501(C)(3)	5,851.	0.			MULTIPLE GRANTS AWARDED
BOYS & GIRLS CLUBS OF THE LOWCOUNTRY, INC. - 10 PINCKNEY COLONY ROAD, SUITE 103 - BLUFFTON, SC 29909	57-0811876	501(C)(3)	43,000.	0.			MULTIPLE GRANTS AWARDED
BOY SCOUTS OF AMERICA COASTAL CAROLINA COUNCIL, INC. - 9297 MEDICAL PLAZA DRIVE - NORTH CHARLESTON, SC 29406	57-0327870	501(C)(3)	19,577.	0.			MULTIPLE GRANTS AWARDED
CANNON STREET YMCA 61 CANNON STREET CHARLESTON, SC 29403	57-0935533	501(C)(3)	21,500.	0.			SPECIAL PROJECT SUPPORT
CHARLESTON COLLEGIATE SCHOOL 2024 ACADEMY DRIVE JOHNS ISLAND, SC 29455	57-0524957	501(C)(3)	7,627.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON COUNTY HUMAN SERVICES COMMISSION - PO BOX 20968 - CHARLESTON, SC 29413	57-0816782	501(C)(3)	9,800.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON COUNTY PARKS FOUNDATION, INC. - 861 RIVERLAND DR. - CHARLESTON, SC 29412	57-0913949	501(C)(3)	10,334.	0.			MULTIPLE GRANTS AWARDED
CHILDREN'S TRUST OF SOUTH CAROLINA 1330 LADY STREET, #310 COLUMBIA, SC 29201	57-0785431	501(C)(3)	5,500.	0.			MULTIPLE GRANTS AWARDED
CHILDREN'S RECOVERY CENTER, INC. PO BOX 1499, 1801 LEGION STREET MYRTLE BEACH, SC 29577	57-1047247	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
CHILDREN'S MUSEUM OF THE LOWCOUNTRY - 25 ANN STREET - CHARLESTON, SC 29403	57-1014498	501(C)(3)	36,000.	0.			MULTIPLE GRANTS AWARDED
CHILDREN'S CENTER, INC. 8 NATURE'S WAY HILTON HEAD ISLAND, SC 29926	57-0485356	501(C)(3)	20,500.	0.			MULTIPLE GRANTS AWARDED
CHILDREN IN CRISIS OF DORCHESTER COUNTY, INC. - 303 E. RICHARDSON AVE. - SUMMERVILLE, SC 29483	57-1078099	501(C)(3)	50,765.	0.			MULTIPLE GRANTS AWARDED
CHILD ABUSE PREVENTION ASSOCIATION P.O. BOX 531 BEAUFORT, SC 29901-0531	57-0722206	501(C)(3)	34,500.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON SYMPHONY ORCHESTRA P.O. BOX 30818 CHARLESTON, SC 29417	57-6000192	501(C)(3)	123,676.	0.			MULTIPLE GRANTS AWARDED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON SOUTHERN UNIVERSITY PO BOX 118087 CHARLESTON, SC 29423	57-0474291	501(C)(3)	63,665.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON PROMISE NEIGHBORHOOD 1834 SUMMERVILLE AVE., SUITE 200 CHARLESTON, SC 29405	80-0597710	501(C)(3)	66,000.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON PARKS CONSERVANCY, INC. PO BOX 31187 CHARLESTON, SC 29417	20-8375561	501(C)(3)	5,200.	0.			MULTIPLE GRANTS AWARDED
HOLE IN THE WALL GANG FUND, INC. 555 LONG WHARF DRIVE NEW HAVEN, CT 06511	06-1157655	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
CHARLESTON LIBRARY SOCIETY 164 KING STREET CHARLESTON, SC 29401	57-0314372	501(C)(3)	31,950.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON JUNIOR GOLF FOUNDATION 321 WINGO WAY, SUITE 201 CHARLESTON, SC 29464	20-3959266	501(C)(3)	5,650.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON JEWISH FEDERATION 176 CROGHAN SPUR ROAD, SUITE 100 CHARLESTON, SC 29407	57-6000188	501(C)(3)	18,250.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON JAZZ 3005 WEST MONTAGUE AVENUE, SUITE 20 NORTH CHARLESTON, SC 29418	83-0504523	501(C)(3)	223,250.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON HORTICULTURAL SOCIETY 46 WINDERMERE BOULEVARD CHARLESTON, SC 29407	56-2211468	501(C)(3)	20,520.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON HOPE P.O. BOX 21315 CHARLESTON, SC 29413	90-0903530	501(C)(3)	7,500.	0.			SPECIAL PROJECT SUPPORT
CHARLESTON DEVELOPMENT ACADEMY CHARTER SCHOOL - 233 LINE STREET, PO BOX 20518 - CHARLESTON, SC 29403	02-0679580	501(C)(3)	9,164.	0.			GENERAL OPERATING SUPPORT
CHARLESTON DAY SCHOOL, INC. 15 ARCHDALE STREET CHARLESTON, SC 29401	57-0524184	501(C)(3)	18,725.	0.			MULTIPLE GRANTS AWARDED
BORN TO READ, INC. 703 BLADEN STREET BEAUFORT, SC 29902	20-8599185	501(C)(3)	14,800.	0.			MULTIPLE GRANTS AWARDED
CIRCLE OF HOPE MINISTRIES, INC. P.O. BOX 554 BEAUFORT, SC 29901	27-3678596	501(C)(3)	70,000.	0.			MULTIPLE GRANTS AWARDED
BNY MELLON CHARITABLE GIFT FUND 201 WASHINGTON ST. BOSTON, MA 02108	30-0748315	501(C)(3)	323,600.	0.			MULTIPLE GRANTS AWARDED
BLUFFTON JASPER COUNTY VOLUNTEERS IN MEDICINE - P.O. BOX 2653 - BLUFFTON, SC 29910	32-0298086	501(C)(3)	32,000.	0.			MULTIPLE GRANTS AWARDED
ANGEL FLIGHT SOARS, INC. 2000 AIRPORT ROAD, SUITE 227 PDK AI ATLANTA, GA 30341	58-1702239	501(C)(3)	9,822.	0.			SPECIAL PROJECT SUPPORT
AMERICAN UNIVERSITY 4400 MASSACHUSETTS AVENUE, NW WASHINGTON, DC 20016	53-0196549	501(C)(3)	7,500.	0.			SCHOLARSHIP

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN NATIONAL RED CROSS 3531 PAMPAS DRIVE MYRTLE BEACH, SC 29577	53-0196605	501(C)(3)	135,792.	0.			MULTIPLE GRANTS AWARDED
AMERICAN LUNG ASSOCIATION 44-A MARKFIELD DRIVE CHARLESTON, SC 29407	13-1632524	501(C)(3)	6,000.	0.			MULTIPLE GRANTS AWARDED
AMERICAN HEART ASSOCIATION, INC. 1113 44TH AVENUE NORTH, STE 200 MYRTLE BEACH, SC 29577	13-5613797	501(C)(3)	26,145.	0.			MULTIPLE GRANTS AWARDED
AMERICAN ENDOWMENT FOUNDATION 5700 DARROW ROAD, SUITE 118 HUDSON, OH 44236	34-1747398	501(C)(3)	20,709.	0.			SPECIAL PROJECT SUPPORT
AMERICAN COLLEGE OF THE BUILDING ARTS - 649 MEETING STREET - CHARLESTON, SC 29403	57-1075250	501(C)(3)	50,006.	0.			MULTIPLE GRANTS AWARDED
AMERICAN CANCER SOCIETY, INC. 5900 CORE ROAD SUITE 103 NORTH CHARLESTON, SC 29406	13-1788491	501(C)(3)	31,067.	0.			MULTIPLE GRANTS AWARDED
ANTIOCH EDUCATIONAL CENTER P.O. BOX 1930 RIDGELAND, SC 29936	76-0818789	501(C)(3)	29,000.	0.			MULTIPLE GRANTS AWARDED
ALZHEIMERS FAMILY SERVICES OF GREATER BEAUFORT - P.O. BOX 1514 - BEAUFORT, SC 29901-1514	57-0879175	501(C)(3)	31,000.	0.			MULTIPLE GRANTS AWARDED
ALLIANCE FOR FULL ACCEPTANCE P.O. BOX 22088 CHARLESTON, SC 29413-2088	57-1072394	501(C)(3)	5,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALEX'S LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BLVD, STE 203 BALA CYNWYRD, PA 19004	56-2496146	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
AGAPE FAMILY LIFE CENTER, INC. 5855 SOUTH OKATIE HIGHWAY HARDEEVILLE, SC 29927-7953	57-1106874	501(C)(3)	11,000.	0.			MULTIPLE GRANTS AWARDED
AFRICAN AMERICAN SETTLEMENT COMMUNITY HISTORIC COMMISSION - 440 VENNING STREET - MT. PLEASANT, SC 29464	81-5335010	501(C)(3)	20,000.	0.			GENERAL OPERATING SUPPORT
ADOPT A SCHOOL OF BEAUFORT COUNTY, INC. - PO BOX 862 - ST. HELENA ISLAND, SC 29920	57-1033986	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
ADDLESTONE HEBREW ACADEMY 1675 RAOUL WALLENBERG BOULEVARD CHARLESTON, SC 29407	57-0409223	501(C)(3)	13,408.	0.			MULTIPLE GRANTS AWARDED
ADAPTIVE GOLF EXPERIENCE, INC. 65 BOSTICK CIRCLE BEAUFORT, SC 29902	82-4203422	501(C)(3)	7,800.	0.			MULTIPLE GRANTS AWARDED
ABLE LIFE FOUNDATION 995 MORRISON DRIVE, P.O. BOX 22708 CHARLESTON, SC 29403	57-0516401	501(C)(3)	5,400.	0.			MULTIPLE GRANTS AWARDED
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION, INC. - 4124 CLEMSON BOULEVARD, SUITE L - ANDERSON, SC 29621	13-3039601	501(C)(3)	10,990.	0.			MULTIPLE GRANTS AWARDED
ARCADIA UNIVERSITY 450 S. EASTON ROAD GLENSIDE, PA 19038	23-1352620	501(C)(3)	10,000.	0.			SCHOLARSHIP

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARK OF SC PO BOX 1540 SUMMERVILLE, SC 29484	47-1350098	501(C)(3)	21,097.	0.			MULTIPLE GRANTS AWARDED
ARTS CENTER OF COASTAL CAROLINA 14 SHELTER COVE LANE HILTON HEAD ISLAND, SC 29928	57-1035817	501(C)(3)	24,320.	0.			MULTIPLE GRANTS AWARDED
BLUFFTON COMMUNITY SOUP KITCHEN PO BOX 993 BLUFFTON, SC 29910	82-3282038	501(C)(3)	15,000.	0.			SPECIAL PROJECT SUPPORT
BLACK RIVER UNITED WAY P.O. BOX 1065 GEORGETOWN, SC 29442	57-0526145	501(C)(3)	60,000.	0.			MULTIPLE GRANTS AWARDED
BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY - 1 BISHOP GADSDEN WAY - CHARLESTON, SC 29412	57-0337132	501(C)(3)	16,822.	0.			MULTIPLE GRANTS AWARDED
BISHOP ENGLAND HIGH SCHOOL 363 SEVEN FARMS DRIVE CHARLESTON, SC 29492-7534	57-6000118	501(C)(3)	41,456.	0.			MULTIPLE GRANTS AWARDED
BIG BROTHERS BIG SISTERS OF THE LOWCOUNTRY - 4151 SPRUILL AVE., SUITE 140 - NORTH CHARESTON, SC 29405	23-1365190	501(C)(3)	114,381.	0.			MULTIPLE GRANTS AWARDED
BEYOND OUR WALLS, INC. 2615 HARVEY AVENUE, SUITE 4 NORTH CHARLESTON, SC 29405	33-1087506	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
BEYOND BORDERS, INC. P.O. BOX 2132 NORRISTOWN, PA 19404	23-2713126	501(C)(3)	10,000.	0.			SPECIAL PROJECT SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEAUFORT-JASPER YMCA OF THE LOWCOUNTRY, INC. - 1801 RICHMOND AVENUE - PORT ROYAL, SC 29935	57-0910326	501(C)(3)	53,250.	0.			MULTIPLE GRANTS AWARDED
BEAUFORT MEMORIAL HOSPITAL FOUNDATION - POST OFFICE BOX 2233 - BEAUFORT, SC 29901	57-0792360	501(C)(3)	93,000.	0.			MULTIPLE GRANTS AWARDED
BEAUFORT COUNTY OPEN LAND TRUST, INC. - P.O. BOX 75 - BEAUFORT, SC 29901	23-7114992	501(C)(3)	139,250.	0.			MULTIPLE GRANTS AWARDED
BEAUFORT COUNTY MEMORIAL HOSPITAL 955 RIBAUT ROAD BEAUFORT, SC 29902	57-6000094	501(C)(3)	29,000.	0.			MULTIPLE GRANTS AWARDED
BEAUFORT COUNTY FIRST STEPS P.O. BOX 6421 BEAUFORT, SC 29903	57-1097779	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
BE A MENTOR, INC. 1801 REYNOLDS AVE, UNIT D4 CHARLESTON, SC 29405	04-3704334	501(C)(3)	8,500.	0.			MULTIPLE GRANTS AWARDED
BARRIER ISLANDS FREE MEDICAL CLINIC, INC. - 3226 MAYBANK HWY, BUILDING C - JOHNS ISLAND, SC 29455	20-5628911	501(C)(3)	76,218.	0.			MULTIPLE GRANTS AWARDED
AVIAN CONSERVATION CENTER P.O. BOX 1247 CHARLESTON, SC 29402	57-0966813	501(C)(3)	11,468.	0.			MULTIPLE GRANTS AWARDED
ASSUMPTION COLLEGE FOR SISTERS 200 A MORRIS AVENUE DENVILLE, NJ 07834	52-1318258	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION FOR THE BLIND AND VISUALLY IMPAIRED SC - 1 CARRIAGE LANE, BUILDING A - CHARLESTON, SC 29407	57-0324912	501(C)(3)	38,763.	0.			MULTIPLE GRANTS AWARDED
ASHLEY RIDGE CHURCH PO BOX 51846 SUMMERVILLE, SC 29485	27-1500620	501(C)(3)	8,000.	0.			SPECIAL PROJECT SUPPORT
ASHLEY HALL FOUNDATION 172 RUTLEDGE AVENUE CHARLESTON, SC 29403	57-0314364	501(C)(3)	43,855.	0.			MULTIPLE GRANTS AWARDED
BLUFFTON SELF HELP, INC. P.O. BOX 2420 BLUFFTON, SC 29910	57-0862658	501(C)(3)	33,000.	0.			MULTIPLE GRANTS AWARDED
CLAP YOUR HANDS P.O. BOX 51322 SUMMERVILLE, SC 29485-1322	47-2014292	501(C)(3)	12,000.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON ORPHAN HOUSE, INC. 5055 LACKAWANNA BOULEVARD NORTH CHARLESTON, SC 29405	57-0669877	501(C)(3)	105,066.	0.			MULTIPLE GRANTS AWARDED
FAMILY JUSTICE CENTER OF GEORGETOWN COUNTY - P.O. BOX 366 - GEORGETOWN, SC 29442	30-0420199	501(C)(3)	8,400.	0.			MULTIPLE GRANTS AWARDED
FRIENDS OF CAROLINE HOSPICE OF BEAUFORT, INC. - 1110 13TH STREET - PORT ROYAL, SC 29935	57-0725866	501(C)(3)	136,500.	0.			MULTIPLE GRANTS AWARDED
FRIENDS OF BERKELEY COUNTY ANIMAL CENTER - 101 DUNDALK COURT - GOOSE CREEK, SC 29445	83-3548657	501(C)(3)	10,000.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRESHSTART 1935 CLEMENT AVENUE NORTH CHARLESTON, SC 29405	81-1440642	501(C)(3)	9,165.	0.			MULTIPLE GRANTS AWARDED
FRESH FUTURE FARM, INC. P.O. BOX 22194 CHARLESTON, SC 29413	46-5699947	501(C)(3)	68,500.	0.			MULTIPLE GRANTS AWARDED
FRENCH PROTESTANT HUGUENOT CHURCH OF CHARLESTON, SC - PO DRAWER 917 - CHARLESTON, SC 29402	57-0329784	501(C)(3)	6,700.	0.			GENERAL OPERATING SUPPORT
FREEDOM READERS, INC. P.O. BOX 30548 MYRTLE BEACH, SC 29588	27-2517686	501(C)(3)	13,000.	0.			MULTIPLE GRANTS AWARDED
FOUR HOLES INDIAN ORGANIZATION EDISTO TRIBAL, INC. - 1125 RIDGE ROAD - RIDGEVILLE, SC 29472	57-0570165	501(C)(3)	8,000.	0.			SPECIAL PROJECT SUPPORT
FORCESUNITED 701 GREENE STREET, SUITE 104 AUGUSTA, GA 30901	26-1176267	501(C)(3)	18,000.	0.			MULTIPLE GRANTS AWARDED
FLOWERTOWN PLAYERS, INC. 133 SOUTH MAIN STREET SUMMERVILLE, SC 29483	57-0638943	501(C)(3)	7,500.	0.			MULTIPLE GRANTS AWARDED
FRIENDS OF COLLETON COUNTY ANIMAL SHELTER - 33 POOR FARM ROAD - WALTERBORO, SC 29488	26-4474266	501(C)(3)	8,659.	0.			GENERAL OPERATING SUPPORT
FLORENCE CRITTENTON PROGRAMS OF SOUTH CAROLINA - 19 SAINT MARGARET STREET - CHARLESTON, SC 29403	57-0342030	501(C)(3)	7,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FETTER HEALTH CARE NETWORK, INC. 51 NASSAU STREET CHARLESTON, SC 29403	57-0604703	501(C)(3)	20,000.	0.			SPECIAL PROJECT SUPPORT
FAMILY SERVICES, INC. 4925 LACROSS ROAD, SUITE 215 CHARLESTON, SC 29406	57-0324920	501(C)(3)	15,725.	0.			MULTIPLE GRANTS AWARDED
FAMILY PROMISE OF BEAUFORT COUNTY 181 BLUFFTON ROAD, D101 BLUFFTON, SC 29910	20-5647589	501(C)(3)	30,000.	0.			MULTIPLE GRANTS AWARDED
FAMILY CONNECTION OF SOUTH CAROLINA, INC. - 124 KIMBERTON AVENUE - MONCKS CORNER, SC 29461	57-0901467	501(C)(3)	7,000.	0.			SPECIAL PROJECT SUPPORT
EXTRA MILE CLUB OF THE LOWCOUNTRY P.O. BOX 1915 BEAUFORT, SC 29901	46-3127074	501(C)(3)	15,700.	0.			MULTIPLE GRANTS AWARDED
ETV ENDOWMENT OF SOUTH CAROLINA, INC. - 401 EAST KENNEDY STREET - SUITE B1 - SPARTANBURG, SC 29302	57-0657549	501(C)(3)	15,440.	0.			MULTIPLE GRANTS AWARDED
ENGAGING CREATIVE MINDS P.O. BOX 31875 CHARLESTON, SC 29417	46-1710691	501(C)(3)	6,500.	0.			MULTIPLE GRANTS AWARDED
EDISTO INDIAN FREE CLINIC 1125 RIDGE ROAD RIDGEVILLE, SC 29472	82-1691197	501(C)(3)	6,760.	0.			SPECIAL PROJECT SUPPORT
EAST COOPER MEALS ON WHEELS, INC. P.O. BOX 583 MOUNT PLEASANT, SC 29465	57-0804618	501(C)(3)	63,950.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIELDS TO FAMILIES P.O. BOX 21117 CHARLESTON, SC 29413-1117	03-0608779	501(C)(3)	12,500.	0.			MULTIPLE GRANTS AWARDED
EAST COOPER HABITAT FOR HUMANITY P.O. BOX 1990 MOUNT PLEASANT, SC 29465	57-0903917	501(C)(3)	12,500.	0.			MULTIPLE GRANTS AWARDED
FRIENDS OF HUNTING ISLAND STATE PARK - POST OFFICE BOX 844 - ST HELENAS ISLAND, SC 29920	57-1012715	501(C)(3)	6,000.	0.			SPECIAL PROJECT SUPPORT
GEORGE WASHINGTON UNIVERSITY 800 21ST ST., NW SUITE GROUND WASHINGTON, DC 20052	53-0196584	501(C)(3)	13,500.	0.			MULTIPLE GRANTS AWARDED
HISTORIC CHARLESTON FOUNDATION 40 EAST BAY STREET, P.O. BOX 1120 CHARLESTON, SC 29402-1120	57-6000599	501(C)(3)	14,143.	0.			MULTIPLE GRANTS AWARDED
HISTORIC BEAUFORT FOUNDATION P.O. BOX 11 BEAUFORT, SC 29901	23-7005532	501(C)(3)	9,432.	0.			MULTIPLE GRANTS AWARDED
HELPING HANDS OF MYRTLE BEACH, INC. - P.O. BOX 2886 - MYRTLE BEACH, SC 29578	57-0627993	501(C)(3)	10,000.	0.			SPECIAL PROJECT SUPPORT
HELPING HANDS OF GEORGETOWN, INC. 1813 HIGHMARKET STREET GEORGETOWN, SC 29440	57-0883461	501(C)(3)	75,000.	0.			MULTIPLE GRANTS AWARDED
HELPING HAND CENTER, INC. 1263 COHEN ROAD PINELAND, SC 29934	80-0751064	501(C)(3)	18,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELPING AND LENDING OUTREACH SUPPORT - 4995 LACROSS ROAD, SUITE 1250 - NORTH CHARLESTON, SC 29406	20-0858549	501(C)(3)	74,900.	0.			MULTIPLE GRANTS AWARDED
HELP OF SUMMERVILLE 316 WEST CAROLINA AVENUE, P.O. BOX SUMMERVILLE, SC 29484	57-0624976	501(C)(3)	18,300.	0.			MULTIPLE GRANTS AWARDED
HELP OF BEAUFORT P.O. BOX 472 BEAUFORT, SC 29901	57-0721545	501(C)(3)	45,000.	0.			MULTIPLE GRANTS AWARDED
HEARTS OF HUGER REVITALIZATION EFFORTS - P.O. BOX 245 - HUGER, SC 29450	68-0663934	501(C)(3)	7,500.	0.			MULTIPLE GRANTS AWARDED
FRIENDSHIP PLACE, INC. P.O. BOX 282 GEORGETOWN, SC 29442	57-1073276	501(C)(3)	5,400.	0.			MULTIPLE GRANTS AWARDED
HEART 611 B. RUTLEDGE AVENUE CHARLESTON, SC 29403	47-1069422	501(C)(3)	9,000.	0.			GENERAL OPERATING SUPPORT
HARVEST HOPE FOOD BANK 2220 SHOP ROAD COLUMBIA, SC 29201	57-0725560	501(C)(3)	10,000.	0.			SPECIAL PROJECT SUPPORT
HALLIE HILL ANIMAL SANCTUARY 5604 NEW ROAD HOLLYWOOD, SC 29449	76-0731341	501(C)(3)	6,000.	0.			MULTIPLE GRANTS AWARDED
HABITAT FOR HUMANITY OF BERKELEY COUNTY - 1 BELKNAP RD. - GOOSE CREEK, SC 29445	57-0907019	501(C)(3)	12,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRENADINES PARTNERSHIP FUND 808 LADY STREET, SUITE C COLUMBIA, SC 29201	27-1329191	501(C)(3)	130,918.	0.			MULTIPLE GRANTS AWARDED
GREEN RIVER PRESERVE 301 GREEN RIVER ROAD CEDAR MOUNTAIN, NC 28718	56-1554526	501(C)(3)	20,000.	0.			MULTIPLE GRANTS AWARDED
GREEN HEART PROJECT, INC. 759 A KING STREET CHARLESTON, SC 29403	46-0829120	501(C)(3)	25,810.	0.			MULTIPLE GRANTS AWARDED
GOOD NEIGHBOR FREE MEDICAL CLINIC 30 PROFESSIONAL VILLAGE CIRCLE BEAUFORT, SC 29907	26-0335357	501(C)(3)	250,000.	0.			MULTIPLE GRANTS AWARDED
GIRL SCOUTS OF EASTERN SOUTH CAROLINA - 7956 CROSS COUNTRY ROAD - NORTH CHARLESTON, SC 29418	57-0341216	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
GEORGIA FORESTWATCH, INC. 81 CROWN MOUNTAIN PLACE, BUILDING C DAHLONEGA, GA 30533	58-2188475	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT
HEALTHY LEARNERS 2749 LAUREL STREET COLUMBIA, SC 29204	57-1127197	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
EAST COOPER ECUMENICAL NETWORK, INC. - P.O. BOX 1071 - MOUNT PLEASANT, SC 29465	45-4775468	501(C)(3)	8,000.	0.			MULTIPLE GRANTS AWARDED
YWCA OF GREATER CHARLESTON PO BOX 80935 CHARLESTON, SC 29416	57-0518147	501(C)(3)	14,243.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COOPER SCHOOL 13 OAKDALE PLACE CHARLESTON, SC 29407	20-8818159	501(C)(3)	6,000.	0.			GENERAL OPERATING SUPPORT
CONSERVATION VOTERS OF SOUTH CAROLINA EDUCATION FUND - 701 WHALEY STREET, SUITE 207 - COLUMBIA, SC 29201	20-0335383	501(C)(3)	17,250.	0.			MULTIPLE GRANTS AWARDED
CRISTO REY NETWORK 11 EAST ADAMS STREET, SUITE 800 CHICAGO, IL 60603	04-3730980	501(C)(3)	20,000.	0.			SPECIAL PROJECT SUPPORT
COMMUNITY FOUNDATION OF THE LOWCOUNTRY, INC. - P.O. BOX 23019 - HILTON HEAD ISLAND, SC 29925-3019	57-0756987	501(C)(3)	13,445.	0.			MULTIPLE GRANTS AWARDED
COMMUNITY FOUNDATION OF NEW JERSEY P.O. BOX 338 MORRISTOWN, NJ 07963-0338	22-2281783	501(C)(3)	10,000.	0.			SPECIAL PROJECT SUPPORT
DARKNESS TO LIGHT 1064 GARDNER ROAD, SUITE 210 CHARLESTON, SC 29407	57-1095108	501(C)(3)	10,500.	0.			MULTIPLE GRANTS AWARDED
DAVIDSON COLLEGE PO BOX 7170 DAVIDSON, NC 28035-7170	56-0529961	501(C)(3)	7,000.	0.			MULTIPLE GRANTS AWARDED
DEE NORTON LOWCOUNTRY CHILDREN'S CENTER - 1061 KING STREET - CHARLESTON, SC 29403	57-0905724	501(C)(3)	234,319.	0.			MULTIPLE GRANTS AWARDED
COMMUNITIES IN SCHOOLS OF THE CHARLESTON AREA, INC. - 1691 TURNBULL AVENUE - NORTH CHARLESTON, SC 29405	57-0915384	501(C)(3)	41,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBUS METROPOLITAN LIBRARY FOUNDATION - 96 S. GRANT AVE - COLUMBUS, OH 43215	31-1692755	501(C)(3)	10,000.	0.			MULTIPLE GRANTS AWARDED
DIVINE REDEEMER PARISH SCHOOL 1104 FORT DRIVE HANAHAN, SC 29410	57-0405151	501(C)(3)	25,000.	0.			GENERAL OPERATING SUPPORT
COLUMBIA MUSEUM OF ART P.O. BOX 2068 COLUMBIA, SC 29202	57-6007869	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
CONWAY DOWNTOWN ALIVE, INC. 425 MAIN STREET CONWAY, SC 29526	57-0831098	501(C)(3)	15,000.	0.			SPECIAL PROJECT SUPPORT
DONORSCHOOSE.ORG MAIL CODE 6656, PO BOX 7247 PHILADELPHIA, PA 19170	13-4129457	501(C)(3)	30,953.	0.			MULTIPLE GRANTS AWARDED
DORCHESTER COUNTY COMMUNITY OUTREACH - P.O. BOX 2994 - SUMMERVILLE, SC 29483	47-3909720	501(C)(3)	9,600.	0.			MULTIPLE GRANTS AWARDED
COLLETON COUNTY FIRST STEPS 609 COLLETON LOOP WALTERBORO, SC 29488	57-1097790	501(C)(3)	21,000.	0.			MULTIPLE GRANTS AWARDED
DOCTORS WITHOUT BORDERS USA P.O. BOX 5023 HAGERSTOWN, MD 21741	13-3433452	501(C)(3)	42,361.	0.			MULTIPLE GRANTS AWARDED
DORCHESTER PAWS 136 FOUR PAWS LANE SUMMERVILLE, SC 29483	57-0620182	501(C)(3)	38,373.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COASTAL POLICE CHAPLAINCY P.O. BOX 21833 CHARLESTON, SC 29413	57-0989842	501(C)(3)	14,845.	0.			MULTIPLE GRANTS AWARDED
COLLETON COUNTY COUNCIL ON AGING, INC. - 39 SENIOR AVENUE - WALTERBORO, SC 29488	57-0571436	501(C)(3)	23,000.	0.			MULTIPLE GRANTS AWARDED
COLLETON CENTER P.O. BOX 468 WALTERBORO, SC 29488	20-4536007	501(C)(3)	7,000.	0.			GENERAL OPERATING SUPPORT
EAST COOPER COMMUNITY OUTREACH 1145 SIX MILE ROAD MOUNT PLEASANT, SC 29466	57-0939280	501(C)(3)	104,000.	0.			MULTIPLE GRANTS AWARDED
DUKE UNIVERSITY BOX NUMBER 104145 DURHAM, NC 27708	56-0532129	501(C)(3)	18,500.	0.			MULTIPLE GRANTS AWARDED
COLLEGE OF CHARLESTON FOUNDATION 66 GEORGE STREET CHARLESTON, SC 29424	23-7069236	501(C)(3)	148,685.	0.			MULTIPLE GRANTS AWARDED
COLLETON COUNTY ARTS COUNCIL, INC. 344 WICHMAN STREET WALTERBORO, SC 29488	57-0966741	501(C)(3)	16,847.	0.			MULTIPLE GRANTS AWARDED
DOWNTOWN CHURCH 2030 GREGG STREET COLUMBIA, SC 29201	45-5444017	501(C)(3)	10,000.	0.			MULTIPLE GRANTS AWARDED
DRAYTON HALL PRESERVATION TRUST 3380 ASHLEY RIVER ROAD CHARLESTON, SC 29414	45-4938941	501(C)(3)	17,500.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JAMES T BRYAN, JR. - U.S.S. YORKTOWN CV-10 ASSOCIATION, INC. - POST OFFICE BOX 1021 - MOUNT PLEASANT, SC 29465	57-0646242	OTHER	11,790.	0.			SPECIAL PROJECT SUPPORT
UNIVERSITY OF CENTRAL FLORIDA P. O. BOX 160115 ORLANDO, FL 32816-0115		OTHER	10,000.	0.			SCHOLARSHIP
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET PHILADELPHIA, PA 19104-6270		OTHER	11,000.	0.			MULTIPLE GRANTS AWARDED
UNIVERSITY OF SOUTH CAROLINA 1244 BLOSSOM ST., SUITE 128 COLUMBIA, SC 29208		OTHER	69,955.	0.			MULTIPLE GRANTS AWARDED
UNIVERSITY OF SOUTH CAROLINA - UPSTATE - 800 UNIVERSITY WAY, HEALTH EDUCATION COMPLEX, SUITE 2081 - SPARTANBURG, SC 29303		OTHER	16,625.	0.			MULTIPLE GRANTS AWARDED
WINTHROP UNIVERSITY 22 TILLMAN HALL ROCK HILL, SC 29733		OTHER	28,120.	0.			MULTIPLE GRANTS AWARDED
COLLABORATIVE ORGANIZATION OF SERVICES FOR YOUTH - POST OFFICE DRAWER 1228 - BEAUFORT, SC 29901	57-6000311	OTHER	14,000.	0.			SPECIAL PROJECT SUPPORT
SAINT CLARE OF ASSISI CATHOLIC CHURCH - 225 SEVEN FARMS DRIVE, STE 100 - DANIEL ISLAND, SC 29492		OTHER	117,500.	0.			MULTIPLE GRANTS AWARDED
CHURCH OF THE NATIVITY 1061 FOLLY ROAD CHARLESTON, SC 29412		OTHER	25,000.	0.			SPECIAL PROJECT SUPPORT

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE OF CHARLESTON 66 GEORGE STREET CHARLESTON, SC 29424-0001		OTHER	32,138.	0.			MULTIPLE GRANTS AWARDED
ALDERSGATE UNITED METHODIST CHURCH 1444 REMOUNT ROAD NORTH CHARLESTON, SC 29406		OTHER	8,000.	0.			MULTIPLE GRANTS AWARDED
COLLETON COUNTY MEMORIAL LIBRARY 600 HAMPTON STREET WALTERBORO, SC 29488		OTHER	23,000.	0.			MULTIPLE GRANTS AWARDED
UNIVERSITY OF VIRGINIA P.O. BOX 400204 CHARLOTTESVILLE, VA 22904-4204		OTHER	30,200.	0.			MULTIPLE GRANTS AWARDED
SEA ISLAND PRESBYTERIAN CHURCH P.O. BOX 966 BEAUFORT, SC 29901	57-0878446	OTHER	10,000.	0.			GENERAL OPERATING SUPPORT
STELLA MARIS ROMAN CATHOLIC CHURCH P.O. BOX 280 SULLIVAN'S ISLAND, SC 29482		OTHER	14,000.	0.			MULTIPLE GRANTS AWARDED
NORTH CAROLINA STATE UNIVERSITY 2016 HARRIS HALL, BOX 7302 RALEIGH, NC 27695-7302		OTHER	13,500.	0.			MULTIPLE GRANTS AWARDED
ST. LUKE'S EPISCOPAL CHURCH 73 S. FULLERTON AVENUE MONTCLAIR, NJ 07042		OTHER	20,000.	0.			MULTIPLE GRANTS AWARDED
ST. HELENA'S EPISCOPAL CHURCH P.O. BOX 1043 BEAUFORT, SC 29901		OTHER	12,000.	0.			GENERAL OPERATING SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. CASSIAN ROMAN CATHOLIC CHURCH 187 BELLEVUE AVENUE UPPER MONTCLAIR, NJ 07043		OTHER	15,000.	0.			MULTIPLE GRANTS AWARDED
SYNAGOGUE EMANU-EL 5 WINDSOR DRIVE CHARLESTON, SC 29407		OTHER	16,653.	0.			MULTIPLE GRANTS AWARDED
ST. ANDREWS CHURCH - MT. PLEASANT 440 WHILDEN STREET MOUNT PLEASANT, SC 29464		OTHER	45,911.	0.			MULTIPLE GRANTS AWARDED
MOUNT CARMEL BAPTIST CHURCH 367 KEANS NECK ROAD SEABROOK, SC 29940		OTHER	33,000.	0.			MULTIPLE GRANTS AWARDED
BURKE HIGH SCHOOL 244 PRESIDENT STREET CHARLESTON, SC 29403		OTHER	14,500.	0.			MULTIPLE GRANTS AWARDED
THE CHARLESTON CATHOLIC SCHOOL 888-A KING STREET CHARLESTON, SC 29403	57-0930700	OTHER	23,378.	0.			MULTIPLE GRANTS AWARDED
THE CITADEL 171 MOULTRIE STREET CHARLESTON, SC 29409	12-3456789	OTHER	8,521.	0.			MULTIPLE GRANTS AWARDED
NATIONAL CATHEDRAL SCHOOL 3612 WOODLEY ROAD NW WASHINGTON, DC 20016		OTHER	10,000.	0.			SPECIAL PROJECT SUPPORT
SOUTH CAROLINA STATE UNIVERSITY 300 COLLEGE STREET, POST OFFICE BOX 7386 - ORANGEBURG, SC 29117-0001		OTHER	12,250.	0.			MULTIPLE GRANTS AWARDED

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGIA STATE UNIVERSITY P.O. BOX 4009 ATLANTA, GA 30302		OTHER	7,500.	0.			SCHOLARSHIP
CHARLESTON BAPTIST ASSOCIATION P. O. BOX 71486 NORTH CHARLESTON, SC 29415		OTHER	11,156.	0.			SPECIAL PROJECT SUPPORT
BETH ISRAEL SYNAGOGUE 401 SCOTTS STREET, PO BOX 328 BEAUFORT, SC 29901		OTHER	5,250.	0.			MULTIPLE GRANTS AWARDED
BERKELEY COUNTY SCHOOL DISTRICT 229 EAST MAIN STREET, POST OFFICE B MONCKS CORNER, SC 29641		OTHER	11,500.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON COUNTY PUBLIC LIBRARY 68 CALHOUN STREET CHARLESTON, SC 29401		OTHER	24,700.	0.			MULTIPLE GRANTS AWARDED
CHARLESTON COUNTY SCHOOL DISTRICT 75 CALHOUN STREET CHARLESTON, SC 29401		OTHER	35,000.	0.			MULTIPLE GRANTS AWARDED
TRIDENT TECHNICAL COLLEGE P.O. BOX 118067 CHARLESTON, SC 29423-8067		OTHER	6,200.	0.			MULTIPLE GRANTS AWARDED
NEW ROSEMONT HOMEOWNERS ASSOCIATION - 1841 B DOSCHER AVENUE - CHARLESTON, SC 29405		OTHER	6,000.	0.			SPECIAL PROJECT SUPPORT
TRINITY BAPTIST CHURCH 124 W. DARLINGTON STREET FLORENCE, SC 29501		OTHER	50,000.	0.			GENERAL OPERATING SUPPORT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. MARY'S OF THE ANNUNCIATION CATHOLIC CHURCH - 89 HASELL STREET - CHARLESTON, SC 29401		OTHER	250,000.	0.			CAPITAL/BUILDING SUPPORT
NORTH CAROLINA A&T STATE UNIVERSITY - 1601 EAST MARKET STREET - GREENSBORO, NC 27411		OTHER	11,650.	0.			MULTIPLE GRANTS AWARDED
GEORGETOWN COUNTY COUNCIL ON AGING 2104 LINCOLN STREET GEORGETOWN, SC 29440		OTHER	10,000.	0.			GENERAL OPERATING SUPPORT
GEORGETOWN PRESBYTERIAN CHURCH 558 BLACK RIVER ROAD GEORGETOWN, SC 29440	57-0648722	OTHER	10,000.	0.			GENERAL OPERATING SUPPORT
GEORGIA COLLEGE CAMPUS BOX 30 MILLEDGEVILLE, GA 31061		OTHER	6,000.	0.			MULTIPLE GRANTS AWARDED
MEDICAL UNIVERSITY OF SOUTH CAROLINA - 1 SOUTH PARK CIRCLE, SUITE 402 - CHARLESTON, SC 29407		OTHER	53,000.	0.			MULTIPLE GRANTS AWARDED
CLEMSON UNIVERSITY 18 JOHN GALT ROAD BEAUFORT, SC 29906		OTHER	103,125.	0.			MULTIPLE GRANTS AWARDED
COASTAL CAROLINA UNIVERSITY P.O. BOX 261954 CONWAY, SC 29528-6054		OTHER	17,300.	0.			MULTIPLE GRANTS AWARDED
YOURCAUSE 6505 W. PARK BLVD., SUITE 306, PMB PLANO, TX 75093		OTHER	16,107.	0.			MULTIPLE GRANTS AWARDED

Schedule I (Form 990)

932241
04-01-19

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	175	579,399.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ONCE THE FUNDS ARE DISTRIBUTED FROM THE ORGANIZATION, A RECEIPT IS RQUESTED FOR ALL GRANTS AND AN ANNUAL REPORT IS REQUIRED OF ALL GRANTEES WHO HAVE RECIEVED A GRANT FROM AT LEAST ONE OF THE ORGANIZATION'S COMPETITIVE PROGRAMS OF $5,000 OR MORE.

CCF HAS AN EXPENDITURE RESPONSIBILITY POLICY FOR THEIR DONOR ADVISED FUND GRANTS. ALL GRANTS ARE DISTRIBUTED AND MONITORED IN COMPLIANCE WITH CCF'S EXPENDITURE RESPONSIBILITY POLICY.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. [X] Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations [X] Written employment contract [X] Compensation survey or study [X] Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DARRIN GOSS	(i)	225,640.	15,000.	0.	12,102.	16,096.	268,838.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	108	3,795,704.	AVG HI/LO ON GIFT DA
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests	X	37	216,084.	FMV
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... 29 | 0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

932141 09-27-19

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

FOR REAL ESTATE GIFTS, THE FOUNDATION HAS HIRED AGENTS TO REPRESENT IT IN THE MARKETING AND SALE.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RESOURCES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOUNDATION ADMINISTERS MORE THAN 800 INDIVIDUAL FUNDS, EACH ESTABLISHED WITH AN INSTRUMENT OF GIFT DESCRIBING EITHER THE GENERAL OR SPECIFIC PURPOSES FOR WHICH GRANTS ARE TO BE MADE.

THE FOUNDATION'S WORK IS CARRIED OUT THROUGH ITS DEVELOPMENT & STEWARDSHIP AND GRANTMAKING & COMMUNITY LEADERSHIP EFFORTS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PHILANTHROPIC ASSETS INCLUDE SOCIAL, MORAL, INTELLECTUAL, REPUTATIONAL AND FINANCIAL CAPITAL. THIS UNDERSTANDING OF THE AVAILABLE ASSETS LEADS THE FOUNDATION TO DEPLOY FINANCIAL CAPITAL THROUGH GRANTMAKING AND IMPACT INVESTING AND TO DEPLOY THE OTHER FORMS OF CAPITAL THROUGH ITS PROGRAMMATIC WORK.

GRANTMAKING - THE FOUNDATION'S GRANTMAKING SPANS THE COMMUNITY'S BROADEST AREAS, FROM ARTS AND CULTURE TO COMMUNITY DEVELOPMENT, AND PROVIDES CRITICAL OPERATIONAL AND CAPITAL SUPPORT FOR THE NETWORK OF NONPROFITS IN THE FOUNDATION'S 9-COUNTY SERVICE AREA AND BEYOND. THE FOUNDATION'S GRANTMAKING TAKES THE FORMS OF DONOR-ADVISED GRANTS, COMPETITIVE GRANTS IN FIELD OF INTEREST PROGRAMS, SCHOLARSHIP PROGRAM ADMINISTRATION AND CORPORATE-ADVISED GRANTMAKING.

Name of the organization	Employer identification number
COASTAL COMMUNITY FOUNDATION	23-7390313

COASTAL COMMUNITY FOUNDATION DISBURSED 2,345 GRANTS AND SCHOLARSHIPS TOTALING $23,347,158. THESE GRANTS WERE DISTRIBUTED AS FOLLOWS: 133 GRANTS TOTALING $884,823 IN SUPPORT OF RELIGIOUS EFFORTS, 137 GRANTS TOTALING $1,178,977 IN SUPPORT OF THE ARTS, 751 GRANTS TOTALING $5,077,827 SUPPORTING VARIOUS EDUCATIONAL PURSUITS, 303 GRANTS TOTALING $2,078,867 SUPPORTING HEALTH INITIATIVES, 633 GRANTS TOTALING $6,091,021 SUPPORTING HUMAN NEEDS, 77 GRANTS TOTALING $707,593 SUPPORTING NEIGHBORHOOD & COMMUNITY DEVELOPMENT, 62 GRANTS TOTALING $5,944,950 SUPPORTING PHILANTHROPY, 223 GRANTS TOTALING $993,050 SUPPORTING ENVIRONMENTAL EFFORTS, AND 26 GRANTS TOTALING $390,050 SUPPORTING SOCIAL JUSTICE PROGRAMS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PROVIDED TO AND REVIEWED BY KEY STAFF, THE FINANCE COMMITTEE AND THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY, THE BOARD AND OFFICERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE DOCUMENT. THIS DOCUMENT REQUESTS DISCLOSURE OF ANY POTENTIAL CONFLICTS SUCH AS VENDOR RELATIONSHIPS OR GRANT RECIPIENT RELATIONSHIPS. IN ADDITION, AT EACH BOARD MEETING, MEMBERS ARE ASKED TO DISCLOSE ANY POTENTIAL CONFLICTS AND, UPON SUCH DISCLOSURES, TO LEAVE THE MEETING AND REFRAIN FROM VOTING.

FORM 990, PART VI, SECTION B, LINE 15:

THE FOUNDATION PARTICIPATES ANNUALLY IN THE GRANTMAKER SALARY AND BENEFITS SURVEY FROM THE COUNCIL ON FOUNDATIONS (COF), AND UTILIZES THE RESULTING ANNUAL REPORT TO REVIEW THE APPROPRIATE SALARY RANGES FOR THE PRESIDENT AND

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

OTHER TOP MANAGEMENT/KEY STAFF MEMBERS. THE COF'S REPORT PROVIDES COMPARATIVE DATA ON A LARGE GROUP OF GRANTMAKERS FROM REGIONAL AND NATIONAL MARKETS. THE ANALYSIS OF THESE DATA BUILDS UPON THE METHODOLOGY AND APPROACH ESTABLISHED BY THE COF IN 1980. THE SALARY BUDGET IS APPROVED BY THE BOARD AS PART OF AN ANNUAL REVIEW. COMPENSATION FOR THE PRESIDENT/CEO IS BASED ON THE RECOMMENDATION OF THE GOVERNANCE AND PERSONNEL COMMITTEE AFTER THE COMPLETION OF THE ANNUAL PERFORMANCE REVIEW PROCESS, AND IS APPROVED BY THE BOARD OF DIRECTORS. FINAL SALARIES FOR MANAGEMENT AND KEY STAFF MEMBERS ARE DETERMINED BY THE PRESIDENT/CEO BASED UPON THE RESULTS OF PERFORMANCE REVIEWS. ALL DECISIONS ABOUT THE FOUNDATION'S OFFICERS SALARIES ARE DOCUMENTED.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS, INCLUDING FORM 990, AVAILABLE ON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN CASH VALUE OF LIFE INSURANCE	72,783.
CHANGE IN BENEFICIAL INTEREST IN TRUST	-35,632.
CHANGE IN VALUE-GIFT ANNUITY	-5,747.
TOTAL TO FORM 990, PART XI, LINE 9	31,404.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: COASTAL COMMUNITY FOUNDATION

Employer identification number: 23-7390313

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
TCF REALTY LLC - 23-7390313 1691 TURNBULL AVENUE NORTH CHARLESTON, SC 29405	REAL ESTATE TITLE	SOUTH CAROLINA	0.	0.	COASTAL COMMUNITY FOUNDATION

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
FRANCES P BUNNELLE FOUNDATION - 57-1095197 95 CENTERMARSH LANE PAWLEYS ISLAND, SC 29585	SUPPORTING ORGANIZATION-GRANTMAKING	SOUTH CAROLINA	501(C)(3)	509(A)(3) (TYPE1)	COASTAL COMMUNITY FOUNDATION		X
JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON - 57-1042419, 1691 TURNBULL AVE, N CHARLESTON, SC 29405	SUPPORTING ORGANIZATION-GRANTMAKING	SOUTH CAROLINA	501(C)(3)	509(A)(3) (TYPE1)	COASTAL COMMUNITY FOUNDATION AND CHARLESTON JEWISH		X
SAUL ALEXANDER FOUNDATION - 23-7420175 1691 TUNBULL AVE N CHARLESTON, SC 29405	SUPPORTING ORGANIZATION-GRANTMAKING	SOUTH CAROLINA	501(C)(3)	509(A)(3) (TYPE3)	N/A		X
WACCAMAW COMMUNITY FOUNDATION - 56-2121992 3655 S. HIGHWAY 17 BUSINESS MURRELLS INLET, SC 29576	SUPPORTING ORGANIZATION-GRANTMAKING	SOUTH CAROLINA	501(C)(3)	509(A)(3) (TYPE1)	COASTAL COMMUNITY FOUNDATION		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule R (Form 990) 2019**

SEE PART VII FOR CONTINUATIONS

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d		X
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o	Sharing of paid employees with related organization(s)	1o		X
p	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE FRANCES P. BUNNELLE FOUNDATION	C	51,000.	FAIR MARKET VALUE
(2) THE SAUL ALEXANDER FOUNDATION	C	82,000.	FAIR MARKET VALUE
(3) JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON	L	148,855.	FAIR MARKET VALUE
(4) THE SAUL ALEXANDER FOUNDATION	L	27,157.	FAIR MARKET VALUE
(5) THE FRANCES P. BUNNELLE FOUNDATION	L	107,813.	FAIR MARKET VALUE
(6) WACCAMAW COMMUNITY FOUNDATION INC.	L	93,105.	FAIR MARKET VALUE

Part V **Continuation of Transactions With Related Organizations** (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON	Q	3,475.	FAIR MARKET VALUE
(8) THE FRANCES P. BUNNELLE FOUNDATION	Q	464,572.	FAIR MARKET VALUE
(9) WACCAMAW COMMUNITY FOUNDATION INC.	Q	139,771.	FAIR MARKET VALUE
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor-tionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

932164 09-10-19

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

JEWISH ENDOWMENT FOUNDATION OF GREATER CHARLESTON

DIRECT CONTROLLING ENTITY: COASTAL COMMUNITY FOUNDATION AND CHARLESTON JEWISH FEDERATION