

DIAGNOSTIC REPORT

TRUST NAME: ELIZABETH CITY FOUNDATION COMMITTEE
FEDERAL EIN: 23-7076018
TRUST NUMBER: RBW-490006012

** No Severe Diagnostics Detected **

Informational Diagnostics: Total 1

Federal (1)

1. Form 2220

The Form 2220 will not print per your underpayment penalty compute option

** No Electronic Filing Alerts Detected **

** No Electronic Filing Rejects Detected **

** No Electronic Filing XML Validation Errors Detected **

Date 11/10/2020

To: THOMAS F. WIGGINS

RE: ELIZABETH CITY FOUNDATION COMMITTEE
07/31/2020

Subject: Minimum Required Payout for Private Foundation

Part I: Undistributed Income

A private foundation that is not an operating foundation must spend a minimum amount annually in the form of grants to public charities and private operating foundations to accomplish its charitable purposes. The tax statute prescribes a minimum payout of at least 5% of the total fair market value of the foundation's assets, subject to certain adjustments. The foundation is given two years in which to make the qualifying distributions - the year for which the minimum distributable amount is calculated and the subsequent year. Failure to comply with the minimum payout requirement results initially in a penalty tax of 30% on the undistributed amount.

Please be aware that if an initial 30% tax is imposed under IRC Sec. 4942(a) and any portion of such income remains undistributed as of the end of the subsequent fiscal year, the IRS is authorized to impose a tax equal to 100% of the amount remaining undistributed pursuant to IRC Sec. 4942(b).

Required distribution for 07/31/2020	\$	169,455.	
Undistributed from prior years	\$	0.	
Total Required Distributions			\$ 169,455.
Qualifying distributions for 07/31/2020	\$	214,165.	
Excess distributions carried over from PY	\$	132,473.	
Total Distributions			\$ 346,638.
Undistributed income for 07/31/2020	\$	0.	
or			
Excess Distribution Carryover to 07/31/2021	\$		109,094.

The undistributed income if any must be distributed by no later than 07/31/2021 or the trust will be subject to the 30% penalty tax.

Part II: Excess Distributions carryover to 07/31/2021

Excess from 07/31/2016	\$	7,914.
Excess from 07/31/2017	\$	10,609.
Excess from 07/31/2018	\$	30,183.
Excess from 07/31/2019	\$	15,678.
Excess from 07/31/2020	\$	44,710.
Total	\$	109,094.

Please note the excess distribution in the amount of \$ 7,914. for the 07/31/2016 tax year will be lost if not used by 07/31/2021.

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning 08/01, 2019, and ending 07/31, 20 20

▶ **Do not send to the IRS. Keep for your records.**

▶ **Go to www.irs.gov/Form8879EO for the latest information.**

2019

Department of the Treasury
Internal Revenue Service

Name of exempt organization

ELIZABETH CITY FOUNDATION COMMITTEE

Employer identification number

23-7076018

Name and title of officer

THOMAS F. WIGGINS, SVP

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5).	4b <u>765.</u>
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize ERNST & YOUNG LLP to enter my PIN 5 6 0 2 2 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ Thomas F. Wiggins, SVP Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

5 4 6 1 8 5 2 0 0 5 1
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.**

ERO's signature ▶ Doak A. Pelt Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2019)

ESTIMATED TAX WORKSHEET FOR FORM 990-W

A. 2020 Estimated Tax		A	
B. Enter 100 % of Line A	B		
C. Enter 100 % of tax on 2019 FORM 990-PF	C	765.	
D. Required Annual Payment (Smaller of lines B or C)	D		765.
E. Income tax withheld (if applicable)	E		NONE
F. Balance (As rounded to the nearest multiple of 4)	F		768.

Record of Estimated Tax Payments

Payment number	(a) Date	(b) Amount	(c) 2018 overpayment credit applied	(d) Total amount paid and credited (add (b) and (c))
1	12/15/2020		192.	192.
2	01/15/2021	81.	111.	192.
3	04/15/2021	192.		192.
4	07/15/2021	192.		192.
Total		465.	303.	768.

ESTIMATED PAYMENTS MUST BE MADE USING THE ELECTRONIC FEDERAL TAX PAYMENTS SYSTEM (EFTPS). THIS WORKSHEET MERELY PROVIDES THE AMOUNTS WHICH NEED TO BE PAID VIA THE ABOVE METHOD.

Department of the Treasury
Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation
▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning 08/01, 2019, and ending 07/31, 2020

Name of foundation **ELIZABETH CITY FOUNDATION COMMITTEE**
EC-COMMUNITY FUND

A Employer identification number
23-7076018

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite
PO BOX 29522

B Telephone number (see instructions)
919-716-2015

City or town, state or province, country, and ZIP or foreign postal code
RALEIGH, NC 27626

C If exemption application is pending, check here

G Check all that apply:
Initial return Initial return of a former public charity
Final return Amended return
Address change Name change

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 3,664,255.
J Accounting method: Cash Accrual
 Other (specify) _____
(Part I, column (d), must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	60,050.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments	221.	221.		STMT 1
4 Dividends and interest from securities	70,414.	68,704.		STMT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	32,366.			
b Gross sales price for all assets on line 6a 2,993,843				
7 Capital gain net income (from Part IV, line 2)		32,366.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less: Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	163,051.	101,291.		
13 Compensation of officers, directors, trustees, etc.	42,368.	22,368.		20,000.
14 Other employee salaries and wages		NONE	NONE	
15 Pension plans, employee benefits		NONE	NONE	
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) STMT 3	750.	750.	NONE	NONE
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions) STMT 4	3,800.	1,624.		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings		NONE	NONE	
22 Printing and publications		NONE	NONE	
23 Other expenses (attach schedule) STMT 5	2,166.			2,166.
24 Total operating and administrative expenses. Add lines 13 through 23	49,084.	24,742.	NONE	22,166.
25 Contributions, gifts, grants paid	191,999.			191,999.
26 Total expenses and disbursements. Add lines 24 and 25	241,083.	24,742.	NONE	214,165.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements	-78,032.			
b Net investment income (if negative, enter -0-)		76,549.		
c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	63,783.	55,366.	55,366.
	2 Savings and temporary cash investments	56,704.	68,470.	68,470.
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶	NONE		
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations (attach schedule)			
	b Investments - corporate stock (attach schedule)			
	c Investments - corporate bonds (attach schedule)			
	11 Investments - land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶ (attach schedule)			
	12 Investments - mortgage loans			
	13 Investments - other (attach schedule) STMT .6.	3,355,709.	3,273,220.	3,540,419.
	14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶ (attach schedule)			
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	3,476,196.	3,397,056.	3,664,255.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons.			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)		NONE		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>			
	26 Capital stock, trust principal, or current funds	3,476,196.	3,397,056.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	3,476,196.	3,397,056.		
30 Total liabilities and net assets/fund balances (see instructions)	3,476,196.	3,397,056.		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	3,476,196.
2	Enter amount from Part I, line 27a	2	-78,032.
3	Other increases not included in line 2 (itemize) ▶ ROUNDING	3	12.
4	Add lines 1, 2, and 3	4	3,398,176.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 8	5	1,120.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	3,397,056.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES						
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))			
a 2,993,843.		2,961,477.	32,366.			
b						
c						
d						
e						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.						
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0- or Losses (from col. (h))			
a			32,366.			
b						
c						
d						
e						
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	32,366.		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8			3			

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	184,140.	3,390,580.	0.054309
2017	206,897.	3,599,650.	0.057477
2016	182,768.	3,497,795.	0.052252
2015	171,491.	3,379,313.	0.050747
2014	235,473.	3,399,357.	0.069270
2 Total of line 1, column (d)			2 0.284055
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			3 0.056811
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			4 3,404,397.
5 Multiply line 4 by line 3.			5 193,407.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 765.
7 Add lines 5 and 6			7 194,172.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			8 214,165.

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations (1), tax under section 511 (2), total credits and payments (7), and tax due/overpayment (9-11). Total tax due is 303, refunded 303.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Includes questions about political campaign influence (1a-1c), unrelated business income (4a-4b), and substantial contributors (10).

Part VII-A Statements Regarding Activities (continued)

		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.ELIZABETHCITYFOUNDATION.ORG</u>	X	
14	The books are in care of ► <u>SEE STATEMENT 9</u> Telephone no. ► _____ Located at ► _____ ZIP+4 ► _____		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year		15
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ► _____		X

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

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

		Yes	No
1a	During the year, did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here		X
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► _____, _____, _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____, _____, _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?		X

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

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

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

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		42,368.		

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 **NONE**

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

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE

Total number of others receiving over \$50,000 for professional services **NONE**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 NONE	
2	
All other program-related investments. See instructions. 3 NONE	

Total. Add lines 1 through 3

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	3,353,173.
b	Average of monthly cash balances	1b	58,628.
c	Fair market value of all other assets (see instructions).	1c	44,440.
d	Total (add lines 1a, b, and c)	1d	3,456,241.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d.	3	3,456,241.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	51,844.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,404,397.
6	Minimum investment return. Enter 5% of line 5	6	170,220.

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

1	Minimum investment return from Part X, line 6	1	170,220.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	765.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b.	2c	765.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	169,455.
4	Recoveries of amounts treated as qualifying distributions.	4	NONE
5	Add lines 3 and 4	5	169,455.
6	Deduction from distributable amount (see instructions).	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	169,455.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26.	1a	214,165.
b	Program-related investments - total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	214,165.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	765.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	213,400.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				169,455.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			NONE	
b Total for prior years: 20____, 20____, 20____		NONE		
3 Excess distributions carryover, if any, to 2019:				
a From 2014	68,089.			
b From 2015	7,914.			
c From 2016	10,609.			
d From 2017	30,183.			
e From 2018	15,678.			
f Total of lines 3a through e	132,473.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ <u>214,165.</u>				
a Applied to 2018, but not more than line 2a			NONE	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2019 distributable amount				169,455.
e Remaining amount distributed out of corpus.	44,710.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	177,183.			
b Prior years' undistributed income. Subtract line 4b from line 2b.		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	NONE			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	68,089.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	109,094.			
10 Analysis of line 9:				
a Excess from 2015	7,914.			
b Excess from 2016	10,609.			
c Excess from 2017	30,183.			
d Excess from 2018	15,678.			
e Excess from 2019	44,710.			

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

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling ▶

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

	Tax year		Prior 3 years		(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

N/A

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

N/A

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

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

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

SEE STATEMENT 13

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

SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

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

SEE ATTACHED STATEMENT FOR LINE 2

Part XV **Supplementary Information** *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEE STATEMENT 23				191,999.
Total			▶ 3a	191,999.
b <i>Approved for future payment</i>				
Total			▶ 3b	

Schedule of Contributors

2019

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

Name of the organization <u>ELIZABETH CITY FOUNDATION COMMITTEE</u>	Employer identification number <u>23-7076018</u>
--	---

Organization type (check one):

Filers of:

Section:

- | | |
|--------------------|--|
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)() (enter number) organization

<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation

<input type="checkbox"/> 527 political organization |
| Form 990-PF | <input checked="" type="checkbox"/> 501(c)(3) exempt private foundation

<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation

<input type="checkbox"/> 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 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 ELIZABETH CITY FOUNDATION COMMITTEE	Employer identification number 23-7076018
--	---

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	PHIL AND ISABELLE SAWYER <hr/> 1076 US 17 SOUTH <hr/> ELIZABETH CITY, NC 27909	\$ 50,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	EDWIN BRANTLEY SAWYER ESTATE <hr/> 1162 MEADOW WOODS ROAD <hr/> BUFFALO, SC 29321	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FEDERATED HERMES GOVERNMENT	221.	221.
	-----	-----
TOTAL	221.	221.
	=====	=====

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
DIVIDENDS AND INTEREST FROM SECURITIES	70,414.	68,704.
TOTAL	70,414.	68,704.

=====

=====

FORM 990PF, PART I - ACCOUNTING FEES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
TAX PREPARATION FEE (NON-ALLOC	750.	750.		
TOTALS	750.	750.	NONE	NONE

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
FEDERAL TAX PAYMENT - PRIOR YE	1,108.	
FEDERAL ESTIMATES - PRINCIPAL	1,068.	
FOREIGN TAXES ON QUALIFIED FOR	1,432.	1,432.
FOREIGN TAXES ON NONQUALIFIED	192.	192.
	-----	-----
TOTALS	3,800.	1,624.
	=====	=====

FORM 990PF, PART I - OTHER EXPENSES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	CHARITABLE PURPOSES -----
LIABILITY INSURANCE	854.	854.
OFFICE EXPENSE & POSTAGE	818.	818.
SCHOLARSHIP SELECTION COMMITTEE	300.	300.
PAPER STATEMENT	60.	60.
POST OFFICE BOX FEE	134.	134.
TOTALS	----- 2,166. =====	----- 2,166. =====

FORM 990PF, PART II - OTHER INVESTMENTS

=====

DESCRIPTION -----	COST/ FMV C OR F -----	ENDING BOOK VALUE -----	ENDING FMV ---
INVESCO OPPENHEIMER STEELPATH	C		
AMERICAN BEACON BRIDGEWAY LC V	C	145,444.	150,741.
AMERICAN BEACON GARCIA HAMILTO	C		
ARTISAN INTL SMALL-MID	C	16,623.	20,098.
BAIRD AGGREGATE	C	269,228.	292,630.
ISHARES MSCI EAFE INTL INDEX	C	117,109.	109,523.
CARILLON CLARIVEST CAPITAL	C	68,223.	89,181.
CAUSEWAY EMERGING MKTS	C		
COLUMBIA SC INDEX	C	27,499.	28,733.
FEDERATED HERMES MDT SC CORE	C	25,572.	27,752.
FIDELITY LC VALUE INDEX	C	96,406.	105,871.
FIDELITY LC GROWTH INDEX	C	93,925.	128,384.
GOLDMAN SACHS ENHANCED INCOME	C		
GOLDMAN SACHS INT	C	27,264.	25,601.
WCM FOCUSED INTL GROWTH	C	65,682.	86,466.
JPMORGAN TR I VALUE ADVANTAGE	C	100,320.	100,697.
LAZARD INTL EQUITY	C	76,759.	72,420.
MFS MID CAP VALUE	C	40,931.	42,423.
TORTOISE MLP & PIPELINE	C		
JACKSON SQUARE MC GROWTH	C	17,368.	23,211.
MORGAN STANLEY INST	C	49,858.	77,324.
PEAR TREE POLARIS FOREIGN VALU	C	95,370.	88,369.
PEAR TREE POLARIS FOREIGN VALU	C	21,671.	18,581.
PIMCO STOCKSPLUS INTL	C	48,107.	67,048.
PIMCO STOCKSPLUS SMALL	C	30,695.	35,454.
T ROWE PRICE MID-CAP GROWTH	C	21,769.	26,684.
TIAA-CREF EMERGING MKT EQUITY	C	48,902.	48,973.
VANGUARD MID CAP VALUE INDEX	C		
VANGUARD MID CAP GROWTH INDEX	C		

FORM 990PF, PART II - OTHER INVESTMENTS

=====

DESCRIPTION -----	COST/ FMV C OR F -----	ENDING BOOK VALUE -----	ENDING FMV ---
VICTORY INTEGRITY DISCOVERY	C		
WELLS FARGO SPECIAL MID CAP VA	C	37,016.	36,927.
WELLS FARGO CORE BD	C	240,447.	261,990.
GOLDMAN SACHS EMERGING MKTS EQ	C	31,729.	31,756.
T ROWE PRICE EMERGING MKT ST	C	34,265.	35,479.
ASHMORE EMERGING MARKETS ACTIV	C	39,534.	41,396.
BALLIE GIFFORD EMERGING MARKET	C	36,762.	39,329.
BLACKROCK MID-CAP GROWTH EQUIT	C	22,669.	27,449.
COHEN & STEERS REAL ESTATE SEC	C	15,855.	16,831.
FIDELITY MID CAP VALUE INDEX	C	160,768.	169,660.
FIDELITY MID CAP GROWTH INDEX	C	90,204.	117,225.
T ROWE PRICE INSTI LC	C	76,284.	89,336.
MAINSTAY CBRE GLOBAL INFRASTRU	C	14,987.	15,346.
NUANCE MID CAP VALUE	C	35,683.	33,581.
NUVEEN GLOBAL INFRAST	C	15,604.	16,205.
PRINCIPAL REAL ESTATE SECURITI	C	22,724.	24,353.
VANGUARD EQUITY INCOME	C	118,756.	111,069.
ISHARES RUSSELL TOP 200 VALUE	C	202,041.	212,107.
ISHARES RUSSELL TOP 200 GROWTH	C	241,405.	261,051.
PROSHARES TR DJ BROOKFIELD GLO	C	7,769.	7,870.
VANGUARD SCOTTSDALE FDS VNG	C	22,303.	23,051.
VANGUARD SHORT TERM BD	C	301,690.	302,244.
		-----	-----
	TOTALS	3,273,220.	3,540,419.
		=====	=====

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

=====

DESCRIPTION -----	AMOUNT -----
COST ADJUSTMENT - ROC & WASH SALES	695.
OUTSTANDING CHECKS	425.

TOTAL	1,120.
	=====

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF
=====

NAME: FIRST CITIZENS BANK
C/O R BRANDON WHITLE
ADDRESS: 100 E TRYON ROAD
RALEIGH, NC 27603

TELEPHONE NUMBER: (919)716-2015

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:
 LEE L LEIDY
 ADDRESS:
 1108 WEST MAIN STREET
 ELIZABETH CITY, NC 27909
 TITLE:
 COMMITTEE MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 GEORGE E THOMAS, JR
 ADDRESS:
 806 LISTER CHASE ROAD
 ELIZABETH CITY, NC 27909
 TITLE:
 COMMITTEE MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 THOMAS P NASH IV
 ADDRESS:
 200 N WATER STREET
 ELIZABETH CITY, NC 27909
 TITLE:
 COMMITTEE MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 ARTHUR A MCPHERSON III
 ADDRESS:
 1212 CRESCENT DRIVE
 ELIZABETH CITY, NC 27909
 TITLE:
 COMMITTEE MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:
 JAMES A WHITE
 ADDRESS:
 1027 SIMPSON DITCH RD
 ELIZABETH CITY, NC 27909
 TITLE:
 COMMITTEE MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:
 TERRI S GRIFFIN
 ADDRESS:
 100 E tRON rOAD
 RALEIGH, NC 27603
 TITLE:
 COMMITTEE MEMBER
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:
 FIRST CITIZENS BANK
 ADDRESS:
 100 E TRYON ROAD
 RALEIGH, NC 27603
 TITLE:
 TRUSTEE
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10
 COMPENSATION 22,368.

OFFICER NAME:
 DAVID R GRIFFIN
 ADDRESS:
 200 BELCROSS ROAD
 CAMDEN, NC 27921
 TITLE:
 EXECUTIVE DIRECTOR
 AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10
 COMPENSATION 20,000.

TOTAL COMPENSATION: 42,368.
 =====

AVERAGE MONTHLY FMV - 990PF, PART X, LINES 1a-1c

=====

MONTH -----	LINE 1a-FMV SECURITIES -----	LINE 1b-FMV CASH BALANCES -----	LINE 1c-FMV OTHER ASSETS -----
JANUARY	3,486,947.	50,557.	47,903.
FEBRUARY	3,296,541.	54,054.	47,898.
MARCH	2,904,933.	59,474.	38,904.
APRIL	3,175,338.	56,451.	43,145.
MAY	3,336,235.	46,465.	20,489.
JUNE	3,400,377.	73,112.	20,330.
JULY	3,540,421.	68,470.	55,366.
AUGUST	3,395,366.	53,651.	61,665.
SEPTEMBER	3,429,748.	36,630.	59,971.
OCTOBER	3,354,837.	61,804.	62,494.
NOVEMBER	3,422,300.	67,219.	30,686.
DECEMBER	3,495,028.	75,649.	44,427.
TOTAL	----- 40,238,071. =====	----- 703,536. =====	----- 533,278. =====
AVERAGE FMV	----- 3,353,173. =====	----- 58,628. =====	----- 44,440. =====

RECIPIENT NAME:

Elizabeth City Foundation

ADDRESS:

P O BOX 574

Elizabeth City, NC 27909

RECIPIENT'S PHONE NUMBER: 252-338-3235

FORM, INFORMATION AND MATERIALS:

By completion of the attached application (s) in such manner
as the applicant desires

SUBMISSION DEADLINES:

March 1 for Educational Scholarships; Other grants should be applied
for by 03/15 and 09/15 for consideration at the meetings in Apr. & Oct

RESTRICTIONS OR LIMITATIONS ON AWARDS:

Scholarships confined to students in Camden and/or Pasquotank County
per to the terms of trust document (s). Other grants are confined to
agencies in the counties of the Albemarle area of Northeast NC.

=====

RECIPIENT NAME:

JOHN HOPKINS UNIVERSITY

ADDRESS:

3101 WYMAN PARK DRIVE
BALTIMORE, MD 21218

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATION

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

UNC - SCHOOL OF THE ARTS

ADDRESS:

1533 S. MAIN ST
WINSTON-SALEM, NC 27127

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATION

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 850.

RECIPIENT NAME:

VIRGINIA TECH UNIVERSITY

ADDRESS:

800 WASHINGTON STREET, SW
BLACKSBURG, VA 24061

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATION

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 750.

=====

RECIPIENT NAME:

APPALACHAIN STATE UNIVERSITY

ADDRESS:

ASU BOX 32005
Boone, NC 28608

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

RECIPIENT NAME:

COMMUNITY CARE COLLABORATIVE
ALBEMARLE AREA UNITED WAY

ADDRESS:

P O BOX 293
ELIZABETH CITY, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

WAKE FOREST UNIVERSITY

ADDRESS:

1834 WAKE FOREST ROAD BOX 7227
Winston Salem, NC 27109

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 33,613.

=====

RECIPIENT NAME:

NENC BLUE LINE CHARITIES

ADDRESS:

P O BOX 344

ELIZABETH CITY, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:

AMERICAN RED CROSS

ADDRESS:

1409-B PARKVIEW DRIVE

Elizabeth City, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 12,000.

RECIPIENT NAME:

GIRL SCOUTS OF THE COLONIAL COAST

ADDRESS:

912 CEDAR RD

Chesapeake, VA 23322

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,800.

=====

RECIPIENT NAME:

CAMPBELL UNIVERSITY

ADDRESS:

PO BOX 36
Buies Creek, NC 27506

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 750.

RECIPIENT NAME:

MEREDITH COLLEGE

ADDRESS:

3800 HILLSBOROUGH ST
Raleigh, NC 27607

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 800.

RECIPIENT NAME:

WAKE TECHNICAL COMMUNITY COLLEGE

ADDRESS:

9101 FAYETTEVILLE ROAD
Raleigh, NC 27603

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 500.

=====

RECIPIENT NAME:

ELIZABETH CITY STATE UNIVERSITY

ADDRESS:

1704 WEEKSVILLE ROAD
Elizabeth City, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 1,200.

RECIPIENT NAME:

UNC WILMINGTON

ADDRESS:

601 S. COLLEGE ROAD
Wilmington, NC 28403

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,775.

RECIPIENT NAME:

FOOD BANK OF THE ALBEMARLE

ADDRESS:

109 TIDEWATER WAY
ELIZABETH CITY, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 12,500.

=====

RECIPIENT NAME:

ALBEMARLE HOPELINE, INC.

ADDRESS:

P.O. BOX 2064

ELIZABETH CTY, NC 27906

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

NORTH CAROLINA A&T UNIVERSITY

ADDRESS:

100 DOWDY ADMINISTRATIVE BUILDING 1

Greensboro, NC 27411

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:

EAST CAROLINA UNIVERSITY

ADDRESS:

2200 SOUTH CHARLES BLVD. ROOM 2900

Greenville, NC 27858

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 12,500.

=====

RECIPIENT NAME:

NC STATE UNIVERSITY

ADDRESS:

2016 HARRIS HALL, BOX 7302
Raleigh, NC 27695

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 7,488.

RECIPIENT NAME:

UNIVERSITY OF NORTH CAROLINA

ADDRESS:

SUITE 2215, SASB
Chapel Hill, NC 27599

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,375.

RECIPIENT NAME:

FRIENDS OF THE MUSEUM OF THE ALBERMARLE
FUND

ADDRESS:

501 SOUTH WATER STREET
Elizabeth City, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 3,249.

=====

RECIPIENT NAME:

BOY SCOUTS OF AMERICA

ADDRESS:

1032 HEATHERWOOD DRIVE
Virginia Beach, VA 23455

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPSOE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,800.

RECIPIENT NAME:

ARTS OF THE ALBEMARLE

ADDRESS:

516 EAST MAIN STREET
Elizabeth City, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 30,000.

RECIPIENT NAME:

COLLEGE OF THE ALBEMARLE

ADDRESS:

PO BOX 2327
Elizabeth City, NC 27906

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 6,274.

=====

RECIPIENT NAME:

SPCA OF NORTHEASTERN NORTH CAROLINA

ADDRESS:

102 ENTERPRISE DRIVE
Elizabeth City, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 7,000.

RECIPIENT NAME:

BOYS & GIRLS CLUB OF THE ALBEMARLE

ADDRESS:

306 NORTH ROAD STREET
Elizabeth City, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:

WESTERN CAROLINA UNIVERSITY

ADDRESS:

118 KILLIAN ANNEX 1 UNIVERSITY DRIV
Cullowhee, NC 28723

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 475.

=====

RECIPIENT NAME:

MILLIGAN COLLEGE

ADDRESS:

PO BOX 250
Milligan College, TN 37682

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 800.

RECIPIENT NAME:

GREEN SAVES GREEN

ADDRESS:

909 COURTHOUSE LANE
ELIZABETH CITY, NC 27909

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 2,500.

TOTAL GRANTS PAID:

191,999.

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