Form **990-PF**

Return of Private Foundation

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

2024

OMB No. 1545-0047

Open to Public Inspection

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For	the ca	llendar year 2024, or tax year beginning January 01, 2	2024, and ending Dece	mber 31, 2	024		
		undation d and Boyle Foundation INC			A Emplo	yer identification number	•
		nd street (or P.O. box number if mail is not delivered to street add	Iress)	Room/suite		one number (see instructio	ns)
-		n, state or province, country, and ZIP or foreign postal code			C If exer	nption application is pen	ding, check here
G C	check :	all that apply: Initial return Final return Address change Initial retur Amended i	nge	charity	2. Fore	ign organizations, check ign organizations meetin k here and attach comp	ig the 85% test, utation
		type of organization: Section 501(c)(3) exempt private four				ite foundation status was n 507(b)(1)(A), check here	
I Fa en lin	ir mar d of ye e 16)	wet value of all assets at ear (from Part II, col. (c), \$ 0 Inalysis of Revenue and Expenses (The total of	Cash Accrual be on cash basis.)			oundation is in a 60-mor section 507(b)(1)(B), che	
Pa	a	mounts in columns (b), (c), and (d) may not necessarily equal are amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net inversions		(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received(attach schedule)	8,640				
	2	Check if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments .			0	0	
	4	Dividends and interest from securities	(0	0	
	5a	Gross rents	(0	0	
<u>o</u>	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10 .	(
enn	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications				0	
	10a						
	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	8,645		0		
	13	Compensation of officers, directors, trustees, etc.			0	0	0
	14	Other employee salaries and wages			0	0	0
70	15	Pension plans, employee benefits	(0	0	0
nse	16a	,					
ж		Accounting fees (attach schedule)	24			^	0
and Administrative Expenses	17	Other professional fees (attach schedule)	20		0	0	0
rati	18	Taxes (attach schedule) (see instructions)			- 0	•	•
inist	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy			0	0	0
δ	21	Travel, conferences, and meetings			0	0	0
g	22	Printing and publications			0	0	0
atin	23	Other expenses (attach schedule)					-
Operating	24	Total operating and administrative expenses. Add lines 13 through 23	20		0		0
	25	Contributions, gifts, grants paid	10,200				10,200
	26	Total expenses and disbursements. Add lines 24 and 25	10,220		0		10,200
	27	Subtract line 26 from line 12:	20,320				23,230
	а	Excess of revenue over expenses and disbursements	(1,575)				
	b	Net investment income(if negative, enter -0-)			0		
	С	Adjusted net income(if negative, enter -0-)				0	
	1	in liegative, enter -0-)				U	

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Par	t II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Enc	l of year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing		0	0
	2	Savings and temporary cash investments	2,767	1,192	0
	3	Accounts receivable 0			
		Less: allowance for doubtful accounts 0	0	0	0
	4	Pledges receivable 0			
		Less: allowance for doubtful accounts	0		0
	5	Grants receivable	0	0	0
	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			
əts	8	Inventories for sale or use	0		
Assets	9	Prepaid expenses and deferred charges	0		
	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С 11	Investments – corporate bonds (attach schedule)			
	• • •	Investments—land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule) 0			
	12	Investments—mortgage loans		0	0
	13	Investments—other (attach schedule)			
		Land, buildings, and equipment: basis 0			
		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)	2,767	1,192	0
	17	Accounts payable and accrued expenses		0	
	18	Grants payable		0	
ties	19	Deferred revenue		0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		0	
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			
S	24	Net assets without donor restrictions			
ance	25	Net assets with donor restrictions			
Net Assets or Fund Balances		Foundations that do not follow FASB ASC 958, check here			
nn-		and complete lines 26 through 30.			
orF	26	Capital stock, trust principal, or current funds	0		
sets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0		
t As	28	Retained earnings, accumulated income, endowment, or other funds	2,767	1,192	
Se	29	Total net assets or fund balances (see instructions)	2,767	1,192	
	30	Total liabilities and net assets/fund balances (see instructions)	2,767	1,192	
Par	t III	Analysis of Changes in Net Assets or Fund Balances			
1		al net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agre		1	2,767
2		er amount from Part I, line 27a		2	(1,575)
3	Oth	er increases not included in line 2 (itemize)		 	
4	Ado	llines 1, 2, and 3		4	1,192
5	Dec	reases not included in line 2 (itemize)			1,132
6		al net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line			1.192
-				1 0	1.192

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Parl	V Capital Gains and Losses for Tax on Investr	nent Income							
	(a) List and describe the kind(s) of property sold (for ex common stock, 200 s	• • •	use; or	(b) How acquired P-Purchase D-Donation		Date acquired no., day, yr.)	(d) Date sold (mo., day, yr.)		
1a									
b									
d									
е	(e) Gross sales price	(f) Depreciation allowed		g) Cost or other basis		(h) Gain or (loss)		
	(e) Ciross sales price	(or allowable)	-	plus expense of sale		((e) plus (f) mir			
а									
b									
С									
d									
е						(1)			
	Complete only for assets showing gain in column (h)			(IA) Evenes of sel (i)	c	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or			
	(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		Losses (from col. (h))			
а									
b									
С									
d									
е									
2		ain, also enter in Part I, line 7 bss), enter -0- in Part I, line 7			2				
3	Net short-term capital gain or (loss) as defined in sect	,,							
	If gain, also enter in Part I, line 8, column (c). See instr	}							
	Part I, line 8				3		0		
Part									
1a	Exempt operating foundations described in section 49	. , , , ,							
	Date of ruling or determination letter:(a			ructions)	1		0		
b	All other domestic foundations enter 1.39% (0.0139) of enter 4% (0.04) of Part I, line 12, col. (b)								
2	Tax under section 511 (domestic section 4947(a)(1) tru				2				
3	Add lines 1 and 2				3		0		
4	Subtitle A (income) tax (domestic section 4947(a)(1) tra	usts and taxable foundations only; o	thers, en	ter -0-)	4		0		
5	Tax based on investment income. Subtract line 4 from	m line 3. If zero or less, enter -0			5		0		
6	Credits/Payments:								
а	2024 estimated tax payments and 2023 overpayment	credited to 2024	6a	0					
b	Exempt foreign organizations—tax withheld at source		6b						
С	Tax paid with application for extension of time to file (I	Form 8868)	6c	0					
d	Backup withholding erroneously withheld		6d	0					
7	Total credits and payments. Add lines 6a through 6d.				7				
8	Enter any penalty for underpayment of estimated tax.	Check here if Form 2220 is at	tached		8		0		
9	Tax due. If the total of lines 5 and 8 is more than line 7	, enter amount owed			9		0		
10	Overpayment. If line 7 is more than the total of lines 5	and 8, enter the amount overpaid			10		0		
11	11 Enter the amount of line 10 to be:Credited to 2025 estimated tax Refunded						0		

Part	VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		✓
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		✓
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0 (2) On foundation managers. \$ 0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		✓
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		/
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6		✓
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	/	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	•		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	✓	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII.	9	✓	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		✓
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	11		✓
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	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address https://www.crawfordboyle.com/about-us/foundation/			
14	The books are in care of Crawford and Boyle LLC Telephone no. (678) 680-5	000		
	Located at 306 S HAMMOND DRIVE , Monroe , GA ZIP+4 30655			
15				
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country			

Part VI-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 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? **/** 1a(1) (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified **/** 1a(2) 1a(3) (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? 1a(4) (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or **/** 1a(5) (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 **/** 1a(6) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in 1b Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that 1 1d 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)): At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for 1 If "Yes," list the years 20____, 20___, 20___, 20___ 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 1 2b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20 **3a** Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time 1 3a If "Yes," did it have excess business holdings in 2024 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

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable

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/

/

3b

4a

4b

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Par	t VI-B	Statements Regarding Activities for Which Form 4	720 May Be Required (co	ntinued)				
5a	During	the year, did the foundation pay or incur any amount to	:				Yes	No
	(1) Carr	y on propaganda, or otherwise attempt to influence legisla	tion (section 4945(e))?			5a(1)		/
		ence the outcome of any specific public election (see secti	* *	•				
		rectly, any voter registration drive?				5a(2)		✓
	(3) Prov	vide a grant to an individual for travel, study, or other simila	r purposes?			5a(3)		/
		vide a grant to an organization other than a charitable, etc.,)? See instructions	•	` '		5a(4)		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?							
b	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							
С	Organiz	ations relying on a current notice regarding disaster assista	ance, check here					
d	d 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?							
	If "Yes,"	attach the statement required by Regulations section 53.4	1945-5(d).					
6a	6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							✓
b	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							✓
7a	7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?							/
b	If "Yes,"	did the foundation receive any proceeds or have any net i	ncome attributable to the tra	nsaction?		7a 7b		
8		oundation subject to the section 4960 tax on payment(s) of parachute payment(s) during the year?				8		✓
Par	t V/II	nformation About Officers, Directors, Trustees, Foun and Contractors				1		1
1	List all	officers, directors, trustees, and foundation manager	s and their compensation	n. See instructions.				
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribut	efit plans	(e) Exp	ount
Dave	id Boy	1.0	devoted to position President	enter -0-)	and deferred con	npensation	other allo	owances
		mond Drive ,Monroe ,GA 30655	2	0		0		0
		awford	Treasurer	0		0		0
		mond Drive ,Monroe ,GA 30655	2					
Lin	dsey D S Ham	aniel mond Drive ,Monroe ,GA 30655	Secretary 2	0		0		0
	Compen	sation of five highest-paid employees (other than	those included on line	1—see instructions). If	none, enter			
	(a) Nam	e and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contribut employee b plans and de	enefit	(e) Exp acco other allo	ount,

NONE

Total number of other employees paid over \$50,000.

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Part '	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid Employees,	
3 Fi	ive highest-paid independent contractors for professional se	ervices. See instructions. If none, enter "NONE."	
(a) 1	Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE			
otal r	number of others receiving over \$50,000 for professional se	ervices	
Part	VIII-A Summary of Direct Charitable Activities		
	the foundation's four largest direct charitable activities during the tax year. Inclu anizations and other beneficiaries served, conferences convened, research pape		Expenses
1	The Foundation sponsored the "Big Jump" by E Oconee County, which was a fundraiser for the	SP (Extra Special People) out of Watkinsville, eir charitable activities.	5,000
2	The Foundation sponsored the Horace J. Johns which gives students the opportunity to get	on, Jr. Beyond the Bar Scholarship program, a college scholarship through a written essay.	2,500
3	The Foundation sponsored the Piedmont Rape Cogiveaways.	risis center as part of our holiday cash	500
4	The Foundation sponsored the Truth Chapel's	drug/violence outreach program.	500
Part	VIII-B Summary of Program-Related Investments (see instru	uctions)	
Desc	cribe the two largest program-related investments made by the foundation durin	ng the tax year on lines 1 and 2.	Amount
1			

All other program-related investments. See instructions.

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ar	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	n foundations,		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities		1a	0
b	Average of monthly cash balances		1b	0
С	Fair market value of all other assets (see instructions)		1c	0
d	Total (add lines 1a, b, and c)		1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	1e 0	.u	
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	0
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)		4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	0	
6	Minimum investment return. Enter 5% (0.05) of line 5		6	0
ar	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here and do not complete this part.)	oundations		
1	Minimum investment return from Part IX, line 6		1	
2a	Tax on investment income for 2024 from Part V, line 5	2a		
b	Income tax for 2024. (This does not include the tax from Part V.)	2b		
С	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1		7	
ar	t XI Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26		1a	10,200
b	Program-related investments—total from Part VIII-B		1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	0

3 Amounts set aside for specific charitable projects that satisfy the:

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

0

0

10,200

2

За

3b

4

Part XII Undistributed Income (see instructions)

		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2023	2023	2024
1	Distributable amount for 2024 from Part X, line 7				
2	Undistributed income, if any, as of the end of 2024:				
а	Enter amount for 2023 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2024:				
а	From 2019				
b					
С	From 2021				
	From 2022				
	From 2023				
f	Total of lines 3a through e				
4	Qualifying distributions for 2024 from Part XI, line 4: \$				
	Applied to 2023, but not more than line 2a				
	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2024 distributable amount				
е	3				
5	Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a),)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions.				
е	Undistributed income for 2023. Subtract line				
	4a from line 2a. Taxable amount—see instructions.				
f	Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be				
7	distributed in 2025				
•	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				
е	Fxcess from 2024				

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Par	XIII Private Operating Foundations	s (see instructions and Pa	art VI-A, question 9)				
1a	If the foundation has received a ruling or foundation, and the ruling is effective for					09/03/2019	
b	Check box to indicate whether the found	ation is a private operating f	oundation described in se	ection 4942(j)(3) or	4942(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	(e) Total		
	income from Part I or the minimum investment return from Part IX for	(a) 2024	(b) 2023	(c) 2022	(d) 2021	(e) Iotai	
	each year listed	0	0	0	0	0	
b	85% (0.85) of line 2a	0	0	0	0	0	
	Qualifying distributions from Part XI, line 4, for each year listed	10,200	0	0	0	10,200	
	Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0	
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	10,200	0	0	0	10,200	
3	Complete 3a, b, or c for the alternative test relied upon:						
а	"Assets" alternative test—enter: (1) Value of all assets	0	_	0	0	0	
	(2) Value of assets qualifying under section 4942(i)(3)(B)(i)	0	0	0	0	0	
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed	0	0	0	0	0	
С	"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)	0	0	0	o	0	
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	0	0	0	0	0	
	(3) Largest amount of support from an exempt organization	0	0	0	0	0	
	(4) Gross investment income	0	0	0	0	0	
⊃ari	XIV Supplementary Information (C	Complete this part only if	the foundation had \$5	,000 or more in assets	at		
	any time during the year-see	e instructions.)					
1 a	Information Regarding Foundation Mar List any managers of the foundation who before the close of any tax year (but only	have contributed more than			dation		
b	List any managers of the foundation who ownership of a partnership or other entity				he		
2	Information Regarding Contribution, Gange Check here if the foundation only munsolicited requests for funds. If the foundation only the complete items 2a, b, c, and d. See instructions.	akes contributions to presel dation makes gifts, grants, e	ected charitable organiza				
а	The name, address, and telephone numb	er or email address of the p	erson to whom applicatio	ons should be addressed:			
b	The form in which applications should be	submitted and information	and materials they should	d include:			
С	Any submission deadlines:						
d	Any restrictions or limitations on awards, factors:	such as by geographical are	eas, charitable fields, kinc	ds of institutions, or other			

Form 990-PF (2024) Page **11** Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor Paid during the year See Statements Total 3a 10,200 Approved for future payment

Total

. 3b

Part XV-A Analysis of Income-Producing Activities

Enter	gross amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by s	section 512, 513, or 514	(e)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	a					
	b					
	d					
	de					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					
	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events .					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	С					
	d					
10	e		0		0	0
	Subtotal. Add columns (b), (d), and (e)					
	Total. Add line 12, columns (b), (d), and (e)			1		0
	worksheet in line 13 instructions to verify calculation	S.)				
Par	XV-B Relationship of Activities to the	Accomplishment o	f Exempt Purposes	3		
ine	No. Explain below how each activity for whi	ch income is reported in co	olumn (e) of Part XV-A cor	ntributed import	antly to the accomplishme	ent
-1110	of the foundation's exempt purposes (or	•	, ,	•		
		71 0	1 1 7 7			

Form 990-PF (2024)

Part	: XVI	Information	n Regarding Transfer	s to and Tran	sactions and Rela	tionships With Nor	nchar	itable	Exempt Organizations	i			
1		on 501(c) (oth	directly or indirectly ener than section 501(c)					describ	ed			Yes	No
а	Transfe	rs from the re	eporting foundation to	a noncharitab	ole exempt organiza	ation of:				H			
										. [1a(1)	П	/
	(2) Oth	er assets .									1a(2)		✓
b										. [
			to a noncharitable exe								1b(1)		✓
	(2) Pur	chases of as	sets from a noncharita	ble exempt o	rganization						1b(2)		✓
	(3) Ren	ntal of facilitie	es, equipment, or othe	rassets .							1b(3)		✓
	(4) Rei	mbursement	arrangements								1b(4)		✓
	(5) Loa	ns or loan gu	uarantees								1b(5)		✓
	(6) Per	formance of	services or membersh	ip or fundraisi	ng solicitations.						1b(6)		✓
С	Sharing	of facilities,	equipment, mailing lis	ts, other asse	ts, or paid employe	es					1c		✓
d	given b	y the reportir	ng foundation. If the fo						w the fair market value or sharing arrangement,				
(2)	goods, ine no.		, or services received.	(c) Name	of noncharitable exe	ampt organization		(d) D	escription of transfers, tran	essetions and	sharing or	rangama	nto
(a) L	ine no.	(D) A	mount involved	(C) Name	of Honoriamable exe	aript organization		(u) D	escription of transfers, trai	sactions, and s	silaring ar	rangeme	1115
	section	501(c)(3)) or	ectly or indirectly affiliation in section 527?		elated to, one or mo			ons de	escribed in section 501(c) (other than		Yes	☐ No
	11 163,	<u> </u>	e of organization		(b) Type o	of organization			(c) Deserin	tion of relation	chin		
		(a) Nam	e or organization		(D) Type (or organization			(0) Descrip	ALOTT OF TELEVIOLE	31110		
		Under per	nalties of periury. I declar	e that I have ex	amined this return. in	ncluding accompanying	a sche	edules a	and statements, and to the	best of my kno	wledge a	nd belief.	it is
Sign		true,					-		reparer has any knowledge	·	ougo a	200.,	,
Here		Eric	C Crawford Cra	aford		01/27/2025	Ψ×.	A26111	rer	May the IRS	discuss th	is return	with
		Eric C Crawford Crawford Signature of officer or trustee			Date	Title	the prepa		the preparer s See instruction	_	low?] Yes [No	
			Print/Type preparer's na	ame	Preparer's signa	ture			Date	-	_	PTIN	
Paid			,	. -					· · · -	Check self-empl	if oyed		
Prep	arer		F: 1					 :	EIN		-		
Use	Only		Firm's name					Firm's					
	Firm's address							Phone no					

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2024

Form **990PF** (2024)

Name of the organization Crawford and Boyle Foundation INC		Employer identification number 84-2420961		
Organization type (chec	sk one):			
Filers of:	Section:			
Form 990 or 990-EZ	501(c) () 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			
General Rule For an organizat contributor. Con	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in monplete Parts I and II. See instructions for determining a contributor's total contributions.	ney or property) from any one		
Special Rules				
(A)(vi), that chec	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations u ked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the yea (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.			
more than \$1,00	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, du 0 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to "N/A" in column (b) instead of the contributor name and address), 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	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must a pox 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 require			

Cat. No. 10642I

Name of the organization Crawford and Boyle Foundation INC

Employer identification number 84-2420961

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	(c) Type of contribution	
1	Crawford and Boyle LLC 306 S Hammond Drive Monroe, GA 30655	\$8,640	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution	
		**************************************	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution	
		**************************************	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution	
		**************************************	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for	

Schedule B (Form 990) (2024)

Name of the organization Crawford and Boyle Foundation INC

Employer identification number 84-2420961

	Property (see instructions). Use duplicate copies of Pa		
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
) No. rom	(b)	(c)	(d)
Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Employer identification number

Part III

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

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
ŀ		(e) Transfer of gift	J	
	Transferee's name, address, an		R	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	and ZIP + 4 Relationship of transferor to transferee		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		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	d ZIP + 4	R	Relationship of transferor to transferee

Form 990PF Statements 2024

Name of the Organization Crawford and Boyle Foundation INC	Employer identification number 84-2420961		
Statement name: Other Professional Fees - Part I Line 16c			
Explanation:	Charitable Organization Renewal	. Fee	
Expenses per books:	\$20		
Net Investment Income:	\$0		
Adjusted Net Income:	\$0		
Disbursements for Charity Purpose:	\$0		

Sponsorship of competitive archery team

Team Up Mentoring

Sponsorship of mentoring activities

11

Name of the Organization

Crawford and Boyle Foundation INC

84-2420961

Grants and Contributions Paid during the year - Part XIV Line 3a S. No. Foundation status Amount 1 Piedmont Rape Crisis Center 159 Towne Center Pkwy, Hoschton, GA 30548, PC 500 Grant to assist individuals who come to the PRCC for counseling, testing, and/or assistance. 2 Truth Chapel 3425 Loganville Hwy, Loganville, GA 30052, 500 Contribution to domestic violence / drug support programs. Horace J Johnson Jr Beyond the 2,500 303 S Hammond Drive, Monroe, GA 30655, PF 3 Donation for college scholarship. 225 Bethesda Church Rd, Lawrenceville, GA 250 Brookwood Baseball Assn PF 30044, Sponsorship for team to go to Little League World Series. 605 Tom Brewer Road, #100, Loganville, GA 100 Loganville Police Department GOV 30052, Sponsorship of Donut Dash for Special Olympics 300 Double Springs Church Rd, Monroe, GA 350 MAHS Volleyball GOV 30656, Sponsorship of school activity 7 ESP 189 VFW Dr, Watkinsville, GA 30677, PC 5,000 Sponsorship of Big Jump sponsorship drive Camp Kesem at UGA 102U Tate Student Center, Athens, GA 30602, GOV 500 Sponsorship of summer camp for underprivileged Babes for Boobs 123 N Lumpkin St, Monroe, GA 30655, 100 PF Fundraiser for Susan G Komen foundation 10 Atha Road Elementary 821 HD Atha Rd, Monroe, GA 30655, GOV 150

601 S Madison Ave, Suite B, Monroe, GA 30655,

250

POF