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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2008

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

Department of the Treasury
Internal Revenue Service

For calendar year 2008, or tax year beginning

, 2008, and ending

Check all that apply: Initial return ☐ Final return ☐ Amended return ☒ Address change ☐ Name change ☐

Use the IRS label. Otherwise, print or type. See Specific Instructions.

Name of foundation: **Daniel-Mickel Foundation**

Number and street (or P.O. box number if mail is not delivered to street address): **P.O. Box 9278**

City or town: **Greenville** State: **SC** ZIP code: **29604**

A Employer identification number: **57-0673409**

B Telephone number (see the instructions): **(864) 271-7171**

C If exemption application is pending, check here ☐

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

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

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

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

I Fair market value of all assets at end of year (from Part II, column (c), line 16): **\$ 13,500,295.**

J Accounting method: ☒ Cash ☐ Accrual
☐ Other (specify) _____ (Part I, column (d) must be on cash basis)

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the 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 (att sch)				
2	Check <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
3	Interest on savings and temporary cash investments	13,024.	13,024.		
4	Dividends and interest from securities	493,560.	493,560.		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain/(loss) from sale of assets not on line 10	-477,060.	L-6a Stmt		
b	Gross sales price for all assets on line 6a	8,326,738.			
7	Capital gain net income (from Part IV, line 2)		-289,615.		
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/(loss) (att sch)				
11	Other income (attach schedule) See Line 11 Stmt	-70,495.	-59,675.		
12	Total. Add lines 1 through 11	-40,971.	157,294.		
13	Compensation of officers, directors, trustees, etc	18,000.	12,045.		5,955.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach sch) L-16b Stmt	34,000.	16,988.		12,280.
c	Other prof fees (attach sch) L-16c Stmt	369.	130.		239.
17	Interest				
18	Taxes (attach schedule) See Line 18 Stmt	2,080.	1,385.		667.
19	Depreciation (attach sch) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	35.			35.
22	Printing and publications				
23	Other expenses (attach schedule) See Line 23 Stmt	41,218.	34,685.		950.
24	Total operating and administrative expenses. Add lines 13 through 23	95,702.	65,233.		20,126.
25	Contributions, gifts, grants paid	708,500.			708,500.
26	Total expenses and disbursements. Add lines 24 and 25	804,202.	65,233.		728,626.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	-845,173.			
b	Net investment income (if negative, enter -0-)		92,061.		
c	Adjusted net income (if negative, enter -0-)				

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Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash – non-interest-bearing	106,156.	4,255.	4,255.
	2 Savings and temporary cash investments	339,277.	98,200.	98,200.
	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 the instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	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) L-10b Stmt	13,024,860.	13,270,824.	13,206,660.
	c Investments – corporate bonds (attach schedule) L-10c Stmt		147,050.	149,957.
	11 Investments – land, buildings, and equipment: basis			
LIABILITIES	Less: accumulated depreciation (attach schedule)			
	12 Investments – mortgage loans			
	13 Investments – other (attach schedule) L-13 Stmt	1,041,375.	107,968.	19,809.
	14 Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe L-15 Stmt)	10,741.	21,414.	21,414.
	16 Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)	14,522,409.	13,649,711.	13,500,295.
	17 Accounts payable and accrued expenses	27,525.	0.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	27,525.	0.	
FUND ASSETS AND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	14,494,884.	13,649,711.	
	30 Total net assets or fund balances (see the instructions)	14,494,884.	13,649,711.	
	31 Total liabilities and net assets/fund balances (see the instructions)	14,522,409.	13,649,711.	

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 30 (must agree with end-of-year figure reported on prior year's return)	1	14,494,884.
2	Enter amount from Part I, line 27a	2	-845,173.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	13,649,711.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	13,649,711.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a				
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			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
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

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 the instructions) If (loss), enter -0- in Part I, line 8

2

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 does not 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 (column (b) divided by column (c))
2007	1,007,925.	20,997,752.	0.048002
2006	911,396.	18,686,465.	0.048773
2005	844,341.	17,344,039.	0.048682
2004	824,371.	16,088,583.	0.051240
2003	626,616.	13,987,371.	0.044799

2 Total of line 1, column (d)

2

0.241496

3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

3

0.048299

4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5

4

17,392,935.

5 Multiply line 4 by line 3

5

840,061.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

921.

7 Add lines 5 and 6

7

840,982.

8 Enter qualifying distributions from Part XII, line 4

8

728,626.

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

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling letter _____ (attach copy of ruling letter if necessary – see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	1,841.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0.
3 Add lines 1 and 2		3	1,841.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	1,841.
6 Credits/Payments			
a 2008 estimated tax pmts and 2007 overpayment credited to 2008	6a	3,000.	
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	3,000.	
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,159.	
11 Enter the amount of line 10 to be Credited to 2009 estimated tax <input type="checkbox"/> 1,159. Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
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? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XIV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) <input type="checkbox"/>		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	X	
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 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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Part VII-A Statements Regarding Activities Continued

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(3)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>www.daniel-mickelfoundation.org</u>	13	X	
14	The books are in care of <u>Tamara S Lawson, EA</u> Telephone no <u>(864) 271-7503</u> Located at <u>880 S. Pleasantburg Dr., Ste 2F Greenville SC</u> ZIP + 4 <u>29607</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			

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
1 a 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 the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1 b	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 2008?	1 c	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 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
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 the instructions)	2 b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
3 a 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 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008.)	3 b	X
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	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 2008?	4 b	X

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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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ 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?

☐ Yes ☒ 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)?

5b

Organizations relying on a current notice regarding disaster assistance check here

☐

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?

☐ Yes ☐ 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?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

If you answered 'Yes' to 6b, also file Form 8870

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

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

1 List all officers, directors, trustees, 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
Minor M. Shaw 16 Hemlock Dr. Greenville, SC 29601	Chairman/CEO 40.00	6,000.	0.	0.
Buck A. Mickel 6 Woodland Way Cir. Greenville, SC 29601	Vice President 10.00	6,000.	0.	0.
Charles C. Mickel PO Box 6721 Greenville, Greenville SC 29606	Vice President 10.00	6,000.	0.	0.

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				
0				
0				
0				
0				

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		
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	
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	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

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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	17,399,024.
b	Average of monthly cash balances	1b	258,778.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	17,657,802.
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	
3	Subtract line 2 from line 1d	3	17,657,802.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	264,867.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	17,392,935.
6	Minimum investment return. Enter 5% of line 5	6	869,647.

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	869,647.
2a	Tax on investment income for 2008 from Part VI, line 5	2a	1,841.
b	Income tax for 2008 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	1,841.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	867,806.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	867,806.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	867,806.

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	728,626.
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	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	728,626.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	728,626.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7				867,806.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2008.				
a From 2003	0.			
b From 2004	0.			
c From 2005	0.			
d From 2006	10,527.			
e From 2007	5,003.			
f Total of lines 3a through e	15,530.			
4 Qualifying distributions for 2008 from Part XII, line 4: ► \$ 728,626.				
a Applied to 2007, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2008 distributable amount				728,626.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a))	15,530.			15,530.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2007 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2008 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2009				123,650.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2003 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2004	0.			
b Excess from 2005	0.			
c Excess from 2006	0.			
d Excess from 2007	0.			
e Excess from 2008	0.			

BAA

Form 990-PF (2008)

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

N/A

- 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, 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)

- 2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

[illegible]

- 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 organization 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))

- 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

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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number of the person to whom applications should be addressed

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

- c Any submission deadlines.

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a Paid during the year				
AMA - Academy of Model Aeronautics 5161 E Memorial Dr Muncie IN 47302	Exempt	Public	General	100.
American Cancer Society PO Box 100902 Columbia SC 29290	Exempt	Public	Health	250.
American Heart Association 520 Gervais St Columbia SC 29201	Exempt	Public	Health	250.
American Red Cross PO Box 9035 Greenville SC 29604	Exempt	Public	Health	350.
Artisphere 16 Augusta St Greenville SC 29601	Exempt	Public	Arts	250.
Blue Ridge Council PO Box 339 Mauldin SC 29662	Exempt	Public	General	100.
Brookgreen Gardens PO Box 3368 Pawleys Island SC 29585	Exempt	Public	Community Improvement	2,750.
Christ Church Episcopal 101 N Church St Greenville SC 29601	Exempt	Public	Religion & Education	29,230.
Clements Kindness for Children 27 Cleveland St Ste 101 Greenville SC 29601	Exempt	Public	Child Welfare	100.
See Line 3a statement				675,120.
Total			3a	708,500.
b Approved for future payment				
Artisphere MAC Augusta St Greenville SC 29601	Exempt	Public	Arts	5,000.
Imagine Nation 300 College St Greenville SC 29601	Exempt	Public	Child Development	80,000.
See Line 3b statement				1,098,500.
Total			3b	1,183,500.

Form 990-PF, Page 10, Part XV, line 3b

Continued

Line 3b statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
b <i>Approved for future payment</i>				
<u>Memminger Auditorium</u>	<u>Exempt</u>	<u>Public</u>	<u>Arts</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>PO Box 157</u>				60,000.
<u>Charleston SC 29401</u>				
<u>Meyer Center</u>	<u>Exempt</u>	<u>Public</u>	<u>Special Needs</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>1132 Rutherford Rd</u>				60,000.
<u>Greenville SC 29609</u>				
<u>Charity Ball (Rose Ball)</u>	<u>Exempt</u>		<u>General</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>P.O. Box 16834</u>				10,000.
<u>Greenville SC 29606</u>		<u>Public</u>		
<u>Conestee Foundation</u>	<u>Exempt</u>		<u>Conservation</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>P.O. Box 9111</u>				7,500.
<u>Greenville SC 29604</u>		<u>Public</u>		
<u>Elbert County High School</u>	<u>Exempt</u>		<u>Education</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>600 Abernathy Circle</u>				3,000.
<u>Elberton GA 30635</u>		<u>Public</u>		
<u>Community Foundation of Greater Greenvil</u>	<u>Exempt</u>		<u>General</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/>
<u>27 Cleveland St. Ste. 101</u>				20,000.
<u>Greenville SC 29601</u>		<u>Public</u>		

Total

1,098,500.

Form 990-PF, Page 1, Part I, Line 16b

L-16b Stmt

Line 16b - Accounting Fees:		Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Name of Provider	Type of Service Provided				
<u>The Lewis Company</u>	<u>Accounting & Bookkeepi</u>	<u>29,000.</u>	<u>18,000.</u>		<u>9,780.</u>
<u>The Lewis Company</u>	<u>Tax Preparation</u>	<u>5,000.</u>	<u>2,000.</u>		<u>2,500.</u>
<u>Accounting & Tax Exp</u>	<u>Allocable to UBTI</u>	<u>0.</u>	<u>-3,012.</u>		
Total		<u>34,000.</u>	<u>16,988.</u>		<u>12,280.</u>

R

Supporting Statement of:

Form 990-PF, p1/Line 23(b)-3

Description	Amount
Total K-1 Investment Interest	27,624.
Amount Allocated to UBTI	-3,830.
Total	<u>23,794.</u>

Supporting Statement of:

Form 990-PF, p1/Line 23(b)-4

Description	Amount
Total K-1 Other Deductions	12,644.
Amount Allocated to UBTI	-1,753.
Total	<u>10,891.</u>

Supporting Statement of:

Form 990-PF, p12/Line 7 Column (b)

Description	Amount
Vault K-1 notes to K-1	-10,806.
Total	<u>-10,806.</u>

Supporting Statement of:

Form 990-PF, p12/Line 8 Column (b)

Description	Amount
Per Vault Notes to K-1	-49,341.
Total	<u>-49,341.</u>

Supporting Statement of:

Continued

Supporting Statement of:

29,000.

Supporting Statement of:

Legal and Professional Fees/Line 16b Net invest inc-1

Description	Amount
Total Per Books	29,000.
Charitable Portion	-9,780.
Amount Allocated to UBTI	-1,220.
Total	<u>18,000.</u>

Supporting Statement of:

Legal and Professional Fees/Line 16b Net invest inc-2

Description	Amount
Total Tax Prep Fees	5,000.
Allocated to Charlieable	-2,500.
Amount Allocated to UBTI	-500.
Total	<u>2,000.</u>

Supporting Statement of:

Legal and Professional Fees/Line 16c Net invest inc-2

Description	Amount
Total Investment Acct Fees	260.
Charitable Amount	-130.

R

**Form 990-PF
Part I, Line 6a**

Net Gain or Loss From Sale of Assets

2008

Name Daniel-Mickel Foundation	Employer Identification Number 57-0673409
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Asset Information:

Description of Property		<u>Short Term capital Gain Distributions</u>
Date Acquired	How Acquired	
Date Sold	<u>various</u>	Name of Buyer
Sales Price	<u>125,825.</u>	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method	
Total Gain (Loss)	<u>125,825.</u>	Accumulation Depreciation
Description of Property		<u>Short Term Loss per K-1 Vault</u>
Date Acquired	How Acquired:	
Date Sold	<u>various</u>	Name of Buyer
Sales Price		Cost or other basis (do not reduce by depreciation) <u>351,757.</u>
Sales Expense	Valuation Method	
Total Gain (Loss)	<u>-351,757.</u>	Accumulation Depreciation
Description of Property		<u>Long Term Capital Gain Distributions</u>
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	<u>284,007.</u>	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method	
Total Gain (Loss)	<u>284,007.</u>	Accumulation Depreciation
Description of Property		<u>Long Term Gain Loss per K-1 Vault</u>
Date Acquired	How Acquired	
Date Sold:	Name of Buyer	
Sales Price	<u>12,868.</u>	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method	
Total Gain (Loss)	<u>12,868.</u>	Accumulation Depreciation
Description of Property		<u>35360.679 AIM International Allocation Fund</u>
Date Acquired	<u>08/28/07</u>	How Acquired <u>Purchased</u>
Date Sold	<u>02/19/08</u>	Name of Buyer
Sales Price	<u>454,385.</u>	Cost or other basis (do not reduce by depreciation) <u>500,000.</u>
Sales Expense	Valuation Method <u>Fair Market Value</u>	
Total Gain (Loss)	<u>-45,615.</u>	Accumulation Depreciation
Description of Property		<u>27726.433 Pimco Developing Markets</u>
Date Acquired	<u>08/28/07</u>	How Acquired <u>Purchased</u>
Date Sold	<u>02/19/08</u>	Name of Buyer
Sales Price	<u>292,883.</u>	Cost or other basis (do not reduce by depreciation) <u>300,000.</u>
Sales Expense	Valuation Method <u>Fair Market Value</u>	
Total Gain (Loss)	<u>-7,117.</u>	Accumulation Depreciation
Description of Property		<u>45537.341 Absolute Strategies Fund</u>
Date Acquired	<u>09/19/07</u>	How Acquired <u>Purchased</u>
Date Sold	<u>02/26/08</u>	Name of Buyer
Sales Price	<u>489,526.</u>	Cost or other basis (do not reduce by depreciation) <u>500,000.</u>
Sales Expense	Valuation Method <u>Fair Market Value</u>	
Total Gain (Loss)	<u>-10,474.</u>	Accumulation Depreciation
Description of Property		<u>See Net Gain or Loss from Sale of Assets</u>
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	

Form 990-PF, Part I, Lines 6a

Net Gain or Loss from Sale of Assets**Asset Information:**

Description of Property	<u>9960.159 Janus Advisor Intech Rish managed</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>05/22/07</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>03/25/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>130,551.</u>	Cost or other basis (do not reduce by depreciation)	<u>150,000.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-19,449.</u>	Accumulated Depreciation	
Description of Property	<u>16561.775</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>08/28/07</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>03/25/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>467,042.</u>	Cost or other basis (do not reduce by depreciation)	<u>500,000.</u>
Sales Expense		Valuation Method	
Total Gain (Loss)	<u>-32,958.</u>	Accumulated Depreciation	
Description of Property	<u>26357.406 Blackrock Large Cap Value</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>12/21/07</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>05/20/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>463,890.</u>	Cost or other basis (do not reduce by depreciation)	<u>500,000.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-36,110.</u>	Accumulated Depreciation	
Description of Property	<u>10167.768 Goldman Sachs Bric Fund</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>11/27/07</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>05/20/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>193,696.</u>	Cost or other basis (do not reduce by depreciation)	<u>200,000.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-6,304.</u>	Accumulated Depreciation	
Description of Property	<u>20080.321 John Hancock International</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>12/21/07</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>05/27/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>482,932.</u>	Cost or other basis (do not reduce by depreciation)	<u>500,000.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-17,068.</u>	Accumulated Depreciation	
Description of Property	<u>23364.486 Snow Capital Opportunity Fund</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>11/12/07</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>07/25/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>405,672.</u>	Cost or other basis (do not reduce by depreciation)	<u>500,000.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-94,328.</u>	Accumulated Depreciation	
Description of Property	<u>37509.377 Janus Advisor Long/Short Fund</u>		
Business Code	Exclusion Code	<u>18</u>	
Date Acquired	<u>02/19/08</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>08/25/08</u>	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	<u>420,985.</u>	Cost or other basis (do not reduce by depreciation)	<u>500,000.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-79,015.</u>	Accumulated Depreciation	

Form 990-PF, Part I, Lines 6a

Continued

Net Gain or Loss from Sale of Assets**Asset Information:**

Description of Property 38051.75 Janus Advisor Long/Short Fund
Business Code _____ Exclusion Code 18
Date Acquired 02/26/08 How Acquired Purchased
Date Sold 08/25/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 427,073. Cost or other basis (do not reduce by depreciation) 500,000.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -72,927. Accumulated Depreciation _____
Description of Property 42122.999 American High Income Trust
Business Code _____ Exclusion Code 18
Date Acquired 05/27/08 How Acquired Purchased
Date Sold 09/24/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 440,185. Cost or other basis (do not reduce by depreciation) 500,000.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -59,815. Accumulated Depreciation _____
Description of Property 20000.00 Bank America Corp 8.2% Dep
Business Code _____ Exclusion Code 18
Date Acquired 05/20/08 How Acquired Purchased
Date Sold 12/22/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 384,793. Cost or other basis (do not reduce by depreciation) 500,000.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -115,207. Accumulated Depreciation _____
Description of Property 10731.680 Janus Advisor Intech Risk Managed
Business Code _____ Exclusion Code 18
Date Acquired 10/26/05 How Acquired Purchased
Date Sold 02/14/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 140,663. Cost or other basis (do not reduce by depreciation) 141,336.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -673. Accumulated Depreciation _____
Description of Property 23946.360 Fidelity Advisor New Insights Fund
Business Code _____ Exclusion Code 18
Date Acquired 11/23/05 How Acquired Purchased
Date Sold 05/20/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 500,000. Cost or other basis (do not reduce by depreciation) 408,046.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) 91,954. Accumulated Depreciation _____
Description of Property 5000.00 Keely Small Cap Value Fund
Business Code _____ Exclusion Code 18
Date Acquired 08/25/04 How Acquired Purchased
Date Sold 05/20/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 150,000. Cost or other basis (do not reduce by depreciation) 81,800.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) 68,200. Accumulated Depreciation _____
Description of Property 16987.542 Touchstone Mid Cap Growth Fund
Business Code _____ Exclusion Code 18
Date Acquired 10/26/01 How Acquired Purchased
Date Sold 05/20/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 403,624. Cost or other basis (do not reduce by depreciation) 300,000.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) 103,624. Accumulated Depreciation _____

Form 990-PF, Part I, Lines 6a

Continued

Net Gain or Loss from Sale of Assets**Asset Information:**

Description of Property 4885.198 Fidelity Advisor New Insights Fund
Business Code _____ Exclusion Code 18
Date Acquired 11/23/05 How Acquired Purchased
Date Sold 05/27/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 100,000. Cost or other basis (do not reduce by depreciation) 83,244.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) 16,756. Accumulated Depreciation _____
Description of Property 37537.538 Alger Small Cap Growth Fund
Business Code _____ Exclusion Code 18
Date Acquired 12/26/06 How Acquired Purchased
Date Sold 09/24/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 218,093. Cost or other basis (do not reduce by depreciation) 250,000.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -31,907. Accumulated Depreciation _____
Description of Property 38873.117 Evergreen Asset Allocation Fund
Business Code _____ Exclusion Code 18
Date Acquired various How Acquired Purchased
Date Sold 09/24/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 501,463. Cost or other basis (do not reduce by depreciation) 537,615.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -36,152. Accumulated Depreciation _____
Description of Property 65963.061 Loomis Sayles Strategic Income
Business Code _____ Exclusion Code 18
Date Acquired 04/25/07 How Acquired Purchased
Date Sold 09/24/08 Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 836,412. Cost or other basis (do not reduce by depreciation) 1,000,000.
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) -163,588. Accumulated Depreciation _____
Description of Property MFS Total Return Class Action Settlement Check received
Business Code _____ Exclusion Code 18
Date Acquired various How Acquired Purchased
Date Sold various Name of Buyer _____
Check Box, if Buyer is a Business ☐
Sales Price 170. Cost or other basis (do not reduce by depreciation) _____
Sales Expense _____ Valuation Method Fair Market Value
Total Gain (Loss) 170. Accumulated Depreciation _____

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
<u>Pioneer Natural Resrc Property R</u>	<u>512.</u>	<u>512.</u>	
<u>Vault K-1 Ordinary Income</u>	<u>-71,007.</u>	<u>-60,187.</u>	
Total	<u>-70,495.</u>	<u>-59,675.</u>	

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
<u>Federal Excise tax (990-PF)</u>	<u>1,841.</u>	<u>1,174.</u>		<u>667.</u>
<u>Unrelated Business Income Tax (9</u>	<u>0.</u>	<u>0.</u>		
<u>Texas Property taxes</u>	<u>36.</u>	<u>36.</u>		
<u>Vault Foreign Tax</u>	<u>203.</u>	<u>175.</u>		
Total	<u>2,080.</u>	<u>1,385.</u>		<u>667.</u>

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
<u>Dues-Assn of Small Foundations</u>	<u>495.</u>			<u>495.</u>
<u>Bank Service Charges</u>	<u>138.</u>			<u>138.</u>
<u>K-1 Investment Interest</u>	<u>27,624.</u>	<u>23,794.</u>		
<u>K-1 Other Deductions</u>	<u>12,644.</u>	<u>10,891.</u>		
<u>Postage</u>	<u>317.</u>			<u>317.</u>
Total	<u>41,218.</u>	<u>34,685.</u>		<u>950.</u>

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
<u>Clemson Foundation</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>110 Daniel Dr</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Clemson SC 29631</u>				<u>150.</u>
<u>Clemson Annual Fund</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>110 Daniel Dr</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Clemson SC 29631</u>				<u>1,000.</u>
<u>Clemson ICAR</u>			<u>Education/Research</u>	Person or <input type="checkbox"/>
<u>110 Daniel Dr</u>				Business <input checked="" type="checkbox"/>
<u>Clemson SC 29631</u>		<u>Public</u>		<u>50,000.</u>
<u>Community Foundation of Greater Greenville</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>27 Cleveland St ste 101</u>	<u>Exempt</u>			Business <input checked="" type="checkbox"/>
<u>Greenville SC 29601</u>		<u>Public</u>		<u>11,250.</u>

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
<u>Elbert County High School</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>600 Abernathy Cir</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Elberton GA 30635</u>				3,000.
<u>ETV Endowment of SC</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>401 E Kennedy St Ste B-1</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Spartanburg SC 29302</u>				9,250.
<u>First Baptist Church of Greenville</u>			<u>Religion</u>	Person or <input type="checkbox"/>
<u>847 Cleveland St</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29601</u>				5,000.
<u>First Presbyterian Church</u>			<u>Religion</u>	Person or <input type="checkbox"/>
<u>393 E Main St</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Spartanburg SC 29302</u>				2,500.
<u>Friends of Springwood Cemetary</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>13 W Hillcrest Dr</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29609</u>				100.
<u>Friends of the Zoo</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>PO Box 515</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29602</u>				100.
<u>Furman University</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>3300 Poinsett Hwy</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29613</u>				8,000.
<u>Greenville County Historical Society</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>PO Box 10472</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29603</u>				100.
<u>Greenville County Museum of Art</u>			<u>Arts</u>	Person or <input type="checkbox"/>
<u>420 College St</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29601</u>				173,500.
<u>Greenville County Recreation Department</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>4806 Old Spartanburg Rd</u>				Business <input checked="" type="checkbox"/>
<u>Taylors SC 29687</u>	<u>Exempt</u>	<u>Public</u>		25,000.
<u>Greenville Forward</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>14 Manley St</u>				Business <input checked="" type="checkbox"/>
<u>Greenville SC 29601</u>	<u>Exempt</u>	<u>Public</u>		20,000.
<u>Greenville Literacy Association</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>301 University Ridge</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29601</u>				100.
<u>Greenville Little League</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>20 Dogwood Ln</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29607</u>				250.
<u>Greenville Tech Foundation</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>PO Box 5616</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29606</u>				5,100.
<u>Historic Greenville Foundation</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>540 Buncombe St</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29601</u>				100.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
HSUS - Shriners Rutherford Rd Greenville SC 29609	Exempt	Public	Health	Person or Business <input checked="" type="checkbox"/> 100.
Imagine Nation 300 College St Greenville SC 29601	Exempt	Public	General	Person or Business <input checked="" type="checkbox"/> 40,000.
IPTAY PO Box 1529 Clemson SC 29633	Exempt	Public	General	Person or Business <input checked="" type="checkbox"/> 5,600.
Junior Achievement of SC PO Box 532 Columbia SC 29202	Exempt	Public	General	Person or Business <input checked="" type="checkbox"/> 500.
kappa Alpha Order Educational Foundation Po Bix 1865 Lexington VA 24450	Exempt	Public	Education	Person or Business <input checked="" type="checkbox"/> 100.
March of Dimes 37 Villa Rd #B-123 Greenville SC 29615	Exempt	Public	Health	Person or Business <input checked="" type="checkbox"/> 100.
Memminger Auditorium Po Box 157 Charleston SC 29401	Exempt	Public	Education	Person or Business <input checked="" type="checkbox"/> 20,000.
Meyer Center 1132 Rutherford Rd. Greenville SC 29609	Exempt	Public	Health	Person or Business <input checked="" type="checkbox"/> 20,000.
Miracle Hill Rescue Mission PO Box 2546 Greenville SC 29602	Exempt	Public	General	Person or Business <input checked="" type="checkbox"/> 6,000.
Museum Association 420 College St Greenville SC 29601	Exempt	Public	Arts	Person or Business <input checked="" type="checkbox"/> 500.
Naturaland Trust PO Box 728 Greenville SC 29602	Exempt	Public	General	Person or Business <input checked="" type="checkbox"/> 250.
Nature Conservancy 2231 devine St Ste 100 Columbia SC 29205	Exempt	Public	General	Person or Business <input checked="" type="checkbox"/> 6,100.
Peace Center for the Performing Arts 101 W Broad St Greenville SC 29601	Exempt	Public	Arts	Person or Business <input checked="" type="checkbox"/> 1,500.
Randolph Macon Women's College Randolph Macon Womens College Lynchburg VA 24503	Exempt	Public	Education	Person or Business <input checked="" type="checkbox"/> 1,000.
Roper Mountain Science Center 504 Roper Mntn Rd Greenville SC 29615	Exempt	Public	Education	Person or Business <input checked="" type="checkbox"/> 100.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
<u>Rotary Charities</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>PO Box 3537</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29608</u>				50.
<u>Rotary International Foundation</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>PO Box 3537</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29608</u>				100.
<u>S.C. Gov School Science & Math</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>Po Box 2848</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29602</u>				1,000.
<u>Salvation Army</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>PO Box 1237</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29602</u>				50,115.
<u>SC Sheriff's Association</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>PO Box 21428</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Columbia SC 29221</u>				200.
<u>SC Independent Colleges & Universities</u>			<u>Education</u>	Person or <input type="checkbox"/>
<u>Po Box 12007</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Columbia SC 29211</u>				10,500.
<u>Susan G Komen Race for the Cure</u>			<u>Health</u>	Person or <input type="checkbox"/>
<u>301 Halton Rd Ste D-2</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29607</u>				2,500.
<u>The 100 Club of Greenville</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>2446 Laurens Rd</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29607</u>				100.
<u>The NRA Foundation</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>11250 Waples Mill Rd</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Fairfax VA 22030</u>				250.
<u>The South Carolina Historical Society</u>			<u>Community</u>	Person or <input type="checkbox"/>
<u>100 Meeting St</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Charleston SC 29401</u>				55.
<u>United Way-de Toqueville Society</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>105 Edingburg Ct</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29607</u>				10,000.
<u>United Way of Greenville County</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>105 Edingburg Ct</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29607</u>				1,000.
<u>Upstate Forever</u>			<u>community</u>	Person or <input type="checkbox"/>
<u>PO Box 2308</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29602</u>				27,000.
<u>Urban League of the Upstate</u>			<u>community</u>	Person or <input type="checkbox"/>
<u>15 Regency Hill Dr</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Greenville SC 29607</u>				500.
<u>USA Shooting</u>			<u>General</u>	Person or <input type="checkbox"/>
<u>One Olympic Plaza</u>	<u>Exempt</u>	<u>Public</u>		Business <input checked="" type="checkbox"/>
<u>Colorado Springs CO 80909</u>				100.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
USC Annual Fund			General	Person or Business <input type="checkbox"/>
901 Sumpter St ste 609	Exempt	Public		<input checked="" type="checkbox"/> X
Columbia SC 29208				100.
YMCA	Exempt		General	Person or Business <input type="checkbox"/>
721 Cleveland St		Public		<input checked="" type="checkbox"/> X
Greenville SC 29601				110,250.
Cancer Society of Greenville	Exempt		Health	Person or Business <input type="checkbox"/>
113 Mills Avenue		Public		<input checked="" type="checkbox"/> X
Greenville, SC 29605				3,500.
Carolina Ballet Theatre	Exempt		Arts	Person or Business <input type="checkbox"/>
P.O. Box 135		Public		<input checked="" type="checkbox"/> X
Greenville SC 29601				5,000.
Conestee Foundation	Exempt		General	Person or Business <input type="checkbox"/>
Post Office Box 9111		Public		<input checked="" type="checkbox"/> X
Greenville SC 29604				7,500.
Crime Stoppers of Greenville	Exempt		General	Person or Business <input type="checkbox"/>
4 McGee Street		Public		<input checked="" type="checkbox"/> X
Greenville SC 29602				250.
Hobcaw Barony - The Belle W. Baruch Foun	Exempt		General	Person or Business <input type="checkbox"/>
22 Hobcaw Road		Public		<input checked="" type="checkbox"/> X
Georgetown SC 29440				1,000.
MDC - Muscular Dystrophy Campaign	Exempt		Health	Person or Business <input type="checkbox"/>
25 Woods Lake Road Suite 704		Public		<input checked="" type="checkbox"/> X
Greenville SC 29607				1,000.
New Carolina			General	Person or Business <input type="checkbox"/>
1411 Gervais Street Suite 315	Exempt	Public		<input checked="" type="checkbox"/> X
Columbia SC 29201				1,000.
SC Governor's School for the Arts Founda			Education	Person or Business <input type="checkbox"/>
15 University Street	Exempt	Public		<input checked="" type="checkbox"/> X
Greenville SC 29601				1,500.
Tabernackie Baptist Church - Scholarship			Education	Person or Business <input type="checkbox"/>
3931 White Horse Road	Exempt	Public		<input checked="" type="checkbox"/> X
Greenville SC 29611				2,200.
Univ of NC			Education	Person or Business <input type="checkbox"/>
250 East Franklin Street	Exempt	Public		<input checked="" type="checkbox"/> X
Chapel Hill NC 27599				3,500.
Upstate Music Cares			Arts	Person or Business <input type="checkbox"/>
129 Cleveland Street	Exempt	Public		<input checked="" type="checkbox"/> X
Greenville SC 29601				500.
Univ of SC			Education	Person or Business <input type="checkbox"/>
1600 Hampton Street Suite 738	Exempt	Public		<input checked="" type="checkbox"/> X
Columbia SC 29208				1,000.
Wofford College			Education	Person or Business <input type="checkbox"/>
429 N. Church Street	Exempt	Public		<input checked="" type="checkbox"/> X
Spartanburg SC 29303				2,000.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year <u>YWCA of Greenville</u> <u>700 Augusta St</u> <u>Greenville SC 29605</u>	<u>Exempt</u>	<u>Public</u>	<u>General</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 15,000.

Total

675,120.

Form 990-PF, Page 10, Part XV, line 3b

Line 3b statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
b Approved for future payment <u>Museum Association</u> <u>420 College St</u> <u>Greenville SC 29601</u>	<u>Exempt</u>	<u>Public</u>	<u>Arts</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 125,000.
<u>United Way de Togueville Society</u> <u>105 Edinburg Ct</u> <u>Greenville SC 29607</u>	<u>Exempt</u>	<u>Public</u>	<u>General</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 20,000.
<u>Univ of Sc School of Business</u> <u>Barnwell St</u> <u>Columbia SC 29205</u>	<u>Exempt</u>	<u>Public</u>	<u>Education</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 300,000.
<u>YMCA-Cleveland Street</u> <u>721 Cleveland St</u> <u>Greenville SC 29601</u>	<u>Exempt</u>	<u>Public</u>	<u>General</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 200,000.
<u>Greenville County Recreation Camp Spearh</u> <u>4806 Old Spartanburg Rd</u> <u>Taylors SC 29687</u>	<u>Exempt</u>	<u>Public</u>	<u>Special Needs</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 75,000.
<u>Clemson University ICAR</u> <u>110 Daniel Dr</u> <u>Clemson SC 29631</u>	<u>Exempt</u>	<u>Public</u>	<u>General</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 150,000.
<u>ETV Endowment</u> <u>401 E Kennedy St Ste B-1</u> <u>Spartanburg SC 29302</u>	<u>Exempt</u>	<u>Public</u>	<u>Educational</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 8,000.
<u>Greenville Forward</u> <u>14 Manley St</u> <u>Greenville SC 29601</u>	<u>Exempt</u>	<u>Public</u>	<u>Community</u>	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 60,000.

Form 990-PF, Page 1, Part I, Line 16c

L-16c Stmt

Line 16c - Other Professional Fees:		Amount	Net	Adjusted	Disbursements
Name of Provider	Type of Service Provided	Paid Per Books	Investment Income	Net Income	for Charitable Purposes
The Greenville News	Annual Tax notice	16.			16.
Deutsche Banc Alex B	Investment Account Tra	260.	130.		130.
Web net	web site hosting	93.			93.
Total		<u>369.</u>	<u>130.</u>		<u>239.</u>

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
Allianz NFJ Div. Value Fund	580,000.	447,161.
American International Group Inc	328,005.	42,500.
Berkshire Hathaway Holding Co	258,774.	208,910.
Blackrock Global Allocation Fund	500,000.	393,543.
Davis NY Venture Class A	500,000.	417,757.
DB Private Egtv Gbl.Select Fnd 3	458,538.	433,006.
Dodge & Cox International Fund	310,000.	169,928.
Dodge & Cox Stock fund	225,000.	203,073.
Duke Energy	198,297.	900,600.
Eaton Vance Structured Emerging Mkts	300,000.	138,853.
Fidelity Advisor New Insights	423,710.	284,744.
First Eagle Overseas Fund	450,000.	481,430.
FPA New Income Fund	500,000.	490,161.
Goldentree High Yield	1.	0.
Goldman Sachs Investment Grade	500,000.	489,011.
Henderson International Opportunities Fund	579,545.	458,928.
Henderson Worldwide Bond Fund	500,000.	278,651.
Highbridge Statistical market	500,000.	509,956.
ING International Small Cap Fund	372,880.	201,138.
ISI North American Gov't Bond Fund	500,000.	505,806.
IVY Asset Strategy Fund	1,000,000.	656,858.
JP Morgan Large Cap Core Plus	750,000.	532,130.
Keeley Small Cap Value Fund	268,200.	267,544.
Lateef Fund Class A	500,000.	355,440.
Liberty Street Horizon Fund	500,000.	236,364.
Lorillard Inc (formally Loews)	95,001.	281,750.
MFS Diversified Target Return Fund	750,000.	492,046.
Oak Hill Credit Partners	390,425.	0.
Pimco Total return Fund	500,000.	465,993.
Plum Creek Timber	55,958.	1,896,804.
Reynolds RJ tob.Holdings	83,540.	268,706.
Spectra Energy	142,950.	472,200.
Tital Global Equit Offshore Fund	250,000.	225,669.
Total	<u>13,270,824.</u>	<u>13,206,660.</u>

Form 990-PF, Page 2, Part II, Line 10c

L-10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Morgan Stanley NTS	147,050.	149,957.
Total	<u>147,050.</u>	<u>149,957.</u>

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
Vault Global Opportunities Partnership Investment	107,969.	19,809.
Rounding Difference	-1.	0.
Total	<u>107,968.</u>	<u>19,809.</u>

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
2007 Amended Return Overpayment	10,741.	10,741.	10,741.
2007 Additional Refund of Interest	0.	24.	24.
2008 Tax Refund Receivable	0.	9,490.	9,490.
2008 Overpayment Applied to 2009	0.	1,159.	1,159.
Total	<u>10,741.</u>	<u>21,414.</u>	<u>21,414.</u>

Supporting Statement of:

Form 990-PF, p1/Line 7(b)

Description	Amount
Short Term Total	-351,757.
Short Term Loss Allocable to UBTI	51,145.
Long Term Total	12,868.
Long Term Gain Allocable to UBTI	-1,871.
Total	<u>-289,615.</u>

Supporting Statement of:

Form 990-PF, p1/Line 11(b)-2

Description	Amount
Total Per Vault K-1	-71,007.
Loss Allocable to UBTI	10,820.
Total	<u>-60,187.</u>

Supporting Statement of:

Form 990-PF, p1/Line 13(b)

Description	Amount
Total Trustees Fees	18,000.
Charitable Related	-5,955.
Total	<u>12,045.</u>

Supporting Statement of:

Form 990-PF, p1/Line 18(b)-4

Description	Amount
Total Foreign Tax Paid	203.
Amount Allocated to UBTI	-28.
Total	<u>175.</u>

Continued

Supporting Statement of:

Legal and Professional Fees/Line 16c Net invest inc-2

Description	Amount
Total	130.