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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009 Open to Public

Form **990** (2009)

									3 - 1		1 Habbersolt	_
Α	For the 2009	cal <u>endar y</u>	ear, or tax year begin	nıng		, and end	ling			_		_
В	Check if applicable	le Please use IRS	C Name of organization			Foundat				D Emp	loyer identification number	
,	Address change	label or	·	c/o St	ısan C.	Prieste	r			ļ		
	Name change	print or	Doing Business As							31	<u>-1568201</u>	_
آ	Initial return	type.	Number and street (or F			o street address)			Room/suite		phone number	
=		See Specific	713 Cresce	ent Ave	nue					86	4-235-9233	_
\equiv	Termination	Instruc-	City or town, state of	• •	1 ZIP + 4	0050				G Gross red	ceipts\$ 1,826,087	_
≓'	Amended return	tions.	Greenville			SC 2960	1-4349			4		
	Application pendi	_{ing} F Name	e and address of princip	al officer						1	s a group return for	
										H(b) Are a	all affiliates	
											ded? Yes No	•
	Tax-exempt s	tatus X	501(c) (3)	◀ (insert no) do	47/0)/4) 01			<u> </u>	- IT-NO	o," attach a list (see instructions)	
	Website: ▶	N/A	[301(c) (3)	(msert no) 454	47(a)(1) or	527			H(c) Cro	ip exemption number	
	Type of organiza		poration X Trust	Association	Other ▶			T ₁	Year of formation		M State of legal domicile SC	=
		Summa		(ribbooldboll	O Silon P				real of formation 1		THE GRACE OF TOGETH CONTROLLS OF CO	<u>-</u>
<u>~</u>	1		he organization's mi	ssion or mo	st significa	nt activities						-
_			specified pu		-		nizatio	ne				
ဗ	Ju	. Jioqq	specified ba	DITCIP	auppor	ted Organ	III Za CIO	1115				
a	ŀ											
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ķ	2 Charl	t this hav	If the organizat					44 7	50/ -f.4 h	4-		
<u>ფ</u> /	i						sposea or m	ore man 2	o % or its net as	1	l c	
∞5	l		members of the go	_	-	•				_3_	5	-
Activities & Governance			endent voting memb	_	overning be	ody (Part VI, III	ne 1b)			4	5	-
ξį			employees (Part V, I							5	0	-
Ac			volunteers (estimate							6		_
	7a Total	7a Total gross unrelated business revenue from Part VIII, column (C), une 12										_
	b Net ui	nrelated bu	siness taxable incon	ne from Fen	11-386-TI	ne 34				7b	0	
			1	N.C.		781			Prior Ye	ar	Current Year	_
<u>o</u>			d grants (Part VIII) lii		~ ~	$1 \cap 1$						_
Revenue	9 Progra	am service	revenue (Part VIII)	Hip 2d) VA	1820	ູ້ໃດໃ						_
ě	10 Invest	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)							<u>8,851</u>	98 , 826	<u>, </u>	
œ	11 Other	revenue (F	Part VIII, column (A),	lines 5, 6d,	-8c;:9c, 10c							_
	12 Total	revenue – a	add lines 8 through	11 (mപട്ടിെ ഫ്ര	Jal Part VII	column (A),	line 12)		- 35	8,851	98,826	Ĺ
	13 Grant	s and simila	ar amounts paid (Pa	rt IX, columi	n (A), lines	1–3)			28	4,600	261,100	
	14 Benef	fits paid to	or for members (Part	t IX, column	(A), line 4))					_	_
S.	15 Saları	es, other c	ompensation, emplo	yee benefits	(Part IX, c	column (A), line	es 5–10)					_
use	16a Profes	ssional fund	draising fees (Part IX	(, column (A	i), line 11e)				=			-
Expenses	b Total	fundraising	expenses (Part IX,	column (D),	line 25) ▶							
ш	17 Other	expenses	(Part IX, column (A),	lines 11a-	11d, 11f–24	lf)				5,075	4,943	_
			Add lines 13-17 (mu)		28	9,675	266,043	
	19 Rever	nue less ex	penses Subtract line	e 18 from lir	ne 12		 	<u></u> .	-64	8,526		_
s or									Beginning of Cu		End of Year	-
Net Assets or Fund Balances	20 Total	•	rt X, line 16)						<u>5,58</u>	<u>2,376</u>	5,344, <u>479</u>	_
ag B	21 Total	liabilities (F	art X, line 26)					ļ				-
			d balances Subtrac	t line 21 fro	m line 20	<u>.</u>			5 , 58	<u>2,376</u>	5,344,479	_
P			re Block									-
		Under penal	ties of perjury, I declare is true, correct, and cor	that I have ex	amined this	return, including	accompanyin	ng schedules	and statements,	and to the be	est of my knowledge	
	1	and belief, it	is tipe, correct, and cor	Tiplete Decial		Darer (Outlet that	onicer) is bas	seu on an inn		/ .i.	s any knowledge	
Sig	in		func.	me	24 <u>-</u>				3//4	//6		_
He	re	Signatu	re of officer	•					, ,	Date	a	
		_Su	<u>san C. Pri</u>	ester,	Trus	tee						_
		Type or	print name and title									
		Preparer's	10	-1				Date	Check	: If	Preparer's identifying number	-
Pai	a	signature	P Jan H	64.4				5/14/	/ l solf	yed ▶	(see instructions) P00581535	^
	eparer's ⊢		J'am	De U	Stuck	ey, Jr.	P.C.	<u> </u>	- I emblo	·	> 57-1025616	77
Us	~ ~ ,	Firm's name	(or yours 710				r.C.			EIN		'
		of self-emplor address, and	,, ,							Phone		7
1.4		•		<u>envill</u>			•			no	<u> 864-467-0907</u>	-
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For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. DAA

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Pa	rt III S	Statement of Program Se	ervice Accomplishments		
1	Briefly desc	ribe the organization's mission			
S	upport	specified publ	icly supported organiza	ations	
		1	1 11 3		
	Did the ere				
2			ant program services during the year which we	ere not listed on	
		rm 990 or 990-EZ?			Yes X No
		scribe these new services on So			
3	Did the org	anization cease conducting, or r	nake significant changes in how it conducts, a	ny program	
	services?				Yes X No
	If "Yes," de	scribe these changes on Sched	ule O		
4	Describe th	e exempt purpose achievement	s for each of the organization's three largest p	rogram services by expenses	
			ns and section 4947(a)(1) trusts are required t		
			nd revenue, if any, for each program service re		
		to divisio, the total expenses, al	ia totoliao, ii aliy, tor oadii program oortioo to	portod	
40	(Code) (Expenses \$	262, 943 including grants of \$	261,100) (Revenue \$	
				261,100) (Revenue \$,
			nts/donations to The Gr		
			nd other publicly suppo	orted	
0	rganiz	ations - See at	tached list		
				•	
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	١
	,,,,,,,	, (=::,po:::doc +	moraling granto or \$) (November 4	,
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$	
	•	, (=-4	mena-mg grama ar t	, (,
4d	Other progr	am services (Describe in Sche	dule O)		
	(Expenses		ncluding grants of \$) (Revenue \$)
4e		am service expenses ▶	262,943		
		<u> </u>			Form 990 (2009)

Part	Checklist of Required Schedules	

• 3

	, ,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
_	complete Schedule A	_1_	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			Х
_	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	5		
2	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	<u> </u>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Χ_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
0	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	-		
3	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
••	VII, VIII, IX, or X as applicable	11		Х
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	•••		
	Schedule D, Part VI			
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
Ū	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
Ĭ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16 ⁹ If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		<u>X</u> _
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		_X_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	, 990	(2009)

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Form 990 (2009) The Priester Foundation
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	_21		Χ
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? if "Yes," complete Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Χ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Χ
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	Į		
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	l		
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			.,
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			1.7
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			.,
	Schedule R, Part V, line 2	35		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			.,
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Χ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			.,
	Part VI	37	ļ.—ļ	<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			τ,
	19? Note. All Form 990 filers are required to complete Schedule O	38_		X
		Forn	1 990	(2009)

	, otatomonto regarding other men mingo and rax compilance		_		Vaa	N-
4-	False the number reported in Day 2 of Form 1006. Annual Cummany and Transmitted of				Yes	No
ıa	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	4.	0			
	U.S. Information Returns. Enter -0- if not applicable	1a	0	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	опаріє	•			v
_	gaming (gambling) winnings to prize winners?	1 1		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		0			
	Statements, filed for the calendar year ending with or within the year covered by this return	_2a _	0	ł i		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by				
	this return?			3a		<u>X</u>
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authorit	у			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancıal				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country. ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	arding				
	Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	е				-
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods				
	and services provided to the payor?			7a		Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s				
	required to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p			1		
	benefit contract?			7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	as		- 3		
••	required?			7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			ļ		
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8		Х
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter					<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter			1		
a	Gross income from members or shareholders	11a				
_		114	···-	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11b				
12-	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
12a h	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	10417 12b		iza		_
	in 165, Chief the amount of tax-exempt interest received of accided during the year	120		Form	990	(2009)
						\/

Form 990 (2009) The Priester Foundation 31-1568201

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

366	tion A. Governing Body and wanagement			
1.	Enter the number of voting members of the governing body		Yes	No
1a b	Enter the number of voting members of the governing body Enter the number of voting members that are independent 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
-	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		
J	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	Ť		
, a	of the governing body?	7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ü	the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	-		
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal	<u> </u>		
	venue Code.)			
	ondo oodo.		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with those of the organization?	10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		Х
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12Ь		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13	_	X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Susan C. Priester 713 Crescent Avenue			
G:	reenville SC 29601-4349 864	<u>-23</u>	<u>5-9</u>	233
		_	000	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons

X Check this box if the organization (A) Name and Title	(B) Average hours per	Posi	ition ((C chec	C) k all t	that a	pply)	(D)	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Susan C. Priester										
Director	5.00	X	<u> </u>	Х	_			0	0	
Sarah Fletcher		ĺ.,						_		
Director	0.25	X	_		_	_		0	0	
Tami McKnew								_		
Director	0.25	X	<u> </u>			$oxed{oxed}$		0	0	
Bob Morris		1						_	_	
Director	0.25	X	ļ		<u> </u>	ļ		0	0	·
Reimer Priester								_	_	
Director	1.00	X	ļ			<u> </u>		0	0	
		_	_	_	_	₩				
-										
		-		<u> </u>		!	-			
1										
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				1						
		1	I	I	l	1	l			
		t				П				

Pa	rt VII Section A. Officers	, Directors, Trus	tees	, Ke	у Ег	nplo	yees	s, ar	nd Highest Compensated	Employees (continued)			
	(A) Name and Title	(B) Average hours per	\vdash	<u> </u>	chec		hat a	,	(D) Reportable compensation	(E) Reportable compensation		(F) stimated mount of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	com fi org an	other npensat from the ganization relate anization anization	tion e on ed
								-					
	·												
	·												
										-, -:			
45	Tahal												
1b 2	Total Total number of individuals (in				thos	e lıs	ted a	bov	e) who received more than	\$100,000 in			
	reportable compensation from	the organization	<u> </u>	<u>U</u>								TY	es No
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Sched	duie .	J for	sucl	h inc	lividu	ıal				3	X
4	For any individual listed on line the organization and related o individual											4	X
5	Did any person listed on line 1 services rendered to the organ	nization? If "Yes,"								r		5	X
1	ction B. Independent Contractor Complete this table for your fix compensation from the organi	ve highest compe	 ensa	ted :	ndep	pend	ent c	conti	ractors that received more	than \$100,000 of			
	Name and	(A) business address							Descrip	(B) tuon of services		Comp	C) ensation
			—					_					
													
								-					
								-			_		,,
2	Total number of independent of more than \$100,000 in compe	-	_				ed to	tho	se listed above) who receiv	red		0	
DAA												Form 9	90 (2009)

: :

<u>ra</u>	Ft V	in State	ient of Keve	nue			(A)	(B)	(C)	_ (D)
		b					Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
S S	10	Federated can	mpaigne	1a	•••			Tevende		012, 010, 01 014
Program Service Revenue Contributions, gifts, grants	h	Membership d		1b						
흔팀	0	Fundraising ev	1	1c						
話置	<u>د</u>	•		1d						
Pie	d	•								
Sis	e	ū		1e_						
널	f	All other contribution	ns, gifts, grants, not included above							
물히			Į.	1f						
20	g		ns included in lines 1a-	1f \$	5					
<u> </u>	h	Total. Add line	es 1a-1f							
흵						Busn. Code				
š	2a									· · · · · · · · · · · · · · · · · · ·
8	b									
.5	С					L l				
Şe	d									
E	е									
$\frac{1}{2}$	f	All other progr	am service revei	nue						
품	g	Total. Add line								
	3		come (including o	lividen	ds. intere	st and				
	_	other similar a			,	•	223,913			223,913
	4		nvestment of tax	-evemi	nt hand n	roceeds •				223,313
	5	Royalties	investment of tax	CACITI	pt bond p					
	3	rtoyanies	(ı) Real		(n) P	ersonal	······			
	6-	Cross Basts	(i) icai		(11)	CISONAI				
	6a	Gross Rents								
	þ	Less rental exps								
	C	Rental inc or (loss)								
	d 7a	Net rental inco				<u> </u>				
		sales of assets	(i) Securities		(11)	Other				
		other than inventory	1,602,	174						
	b	Less cost or other								
1		basis & sales exps	1,727,							
	С	Gain or (loss)	-125,	087						
	d	Net gain or (lo	ss)	-		•	-125,087	- 125,087		
au	8a	Gross income fro	om fundraising eve	nts						
Other Revenue		(not including \$								
eve		of contributions i	reported on line 1c)							
Ř		See Part IV, line		а						
the	b	Less direct ex		ь						
Õ			(loss) from fund	raising	events	•				
			om gaming activitie							
		See Part IV, line		a						
	h	Less direct ex		ь						
			(loss) from gam		ivities					
				ing aci	HAILIES					
	IVa		f inventory, less							
		returns and all		a						
		Less cost of g	=	p[———				
	С		(loss) from sale		entory	<u> </u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			ellaneous Revenue			Busn. Code				
	11a					├ ──				
	b					 				
	С									
	d	All other rever	nue			L		_		
	е	Total. Add line	es 11a-11d			▶ L				
	12	Total Revenu	e. See instructio	ns		<u> </u>	98,826	-125,087	0	223,913

Part IX Statement of Functional Expenses

:

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV. line 22	261,100	261,100		
3	Grants and other assistance to governments,	201,100	201,100	·····	
J	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		-		
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)			•	
	and section 403(b) employer contributions)				
9	Other employee benefits			-	
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	3,100		3,100	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology	,,,,,, <u>,,</u>		- <u>-</u>	
15	Royalties		·····	.	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				- -
20	Interest				
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization Insurance				
-7	insurance				
24	Other expenses. Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Foreign Taxes	1,843	1,843		
b	Ť				· • · · · · · · · · · · · · · · · · · ·
С					
d					
е					
f	All other expenses			·	
25	Total functional expenses. Add lines 1 through 24f	266,043	262,943	3,100	
26	Joint costs. Check here ▶ ☐ if following		ļ		
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation	i			

· :

Part :	K Balance Sheet ·	(A)		(B)
	•	Beginning of year		End of year
1	Cash—non-interest bearing		1	
2	Savings and temporary cash investments	3,811,261	2	188,864
3	Pledges and grants receivable, net	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3	
4	Accounts receivable, net		4	· · · · · · · · · · · · · · · · · · ·
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
	Part II of Schedule L		6	
Assets	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
و انخ	Prepaid expenses and deferred charges		9	· <u>-</u>
	Land, buildings, and equipment cost or			·,
	other basis Complete Part VI of Schedule D 10a			
lь	Less accumulated depreciation 10b	-	10c	
11	Investments—publicly traded securities	1,771,115	11	5,155,615
12	Investments—other securities See Part IV, line 11	27 / 17 1 2 3	12	0/-00/010
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	5,582,376	16	5,344,479
17	Accounts payable and accrued expenses	373027373	17	0/011/1/5
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities 22 22 22 22 22 22 22 22 22 22 22 22 22	Payables to current and former officers, directors, trustees, key			
ਙ∣	employees, highest compensated employees, and disqualified			
· <u>e</u>	persons Complete Part II of Schedule L		22	
_ 23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25		26	
S	Organizations that follow SFAS 117, check here ▶ X and			
End Balances 27 28 29 29	complete lines 27 through 29, and lines 33 and 34.			
[27	Unrestricted net assets	5,582,376	27	5,344,479
മ്മ് 28	Temporarily restricted net assets		28	
열 29	Permanently restricted net assets		29	
.≣	Organizations that do not follow SFAS 117, check here ▶ ☐			
두	and complete lines 30 through 34.			
Net Assets or 30 31 32 33 34			30	
31			31	
ğ 32			32	
등 33	Total net assets or fund balances	5,582,376	33	5,344,479
Ž 34	Total liabilities and net assets/fund balances		34	5,344,479

Form **990** (2009)

Pa	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		!	
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Χ	
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		Χ
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		Χ_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b_		
		Forn	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

DAA

The Priester Foundation Name of the organization c/o Susan C. Priester Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

Employer identification number 31-1568201

2	A sch	ool des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	A hos	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
		nd state										
5			on operated for the benefi b)(1)(A)(iv). (Complete Pa	t of a college or university owner rt II)	d or operat	ed by a g	overnme	ental un	ıt descri	bed in		
6	A fede	ral, sta	te, or local government or	governmental unit described in	section 17	70(b)(1)(A)(v).					
7	An org	janızatı	on that normally receives	a substantial part of its support f	from a gov	ernmenta	l unit or i	from the	e genera	al public		
	descr	bed in s	section 170(b)(1)(A)(vi). (Complete Part II)								
8	A con	munity	trust described in section	170(b)(1)(A)(vi). (Complete Pa	rt II)							
9	An org	janızatı	on that normally receives	(1) more than 33 1/3 % of its su	pport from	contribut	ions, me	embersh	np fees,	and gro	SS	
	receip	ts from	activities related to its exe	empt functions—subject to certa	ın exceptio	ns, and (2	2) no mo	re than	33 1/3	% of its		
	suppo	rt from	gross investment income	and unrelated business taxable	ıncome (le	ss section	511 tax	c) from b	ousines	ses		
	acquii	ed by ti	he organization after June	30, 1975 See section 509(a)(2). (Comple	te Part III)					
10	An org	anızatı	on organized and operated	d exclusively to test for public sa	fety See s	section 50	09(a)(4).					
11	X An org	anızatı	on organized and operated	d exclusively for the benefit of, to	perform t	he functio	ns of, o	to carr	y out the	е		
	purpo	ses of c	one or more publicly suppo	orted organizations described in	section 50	9(a)(1) or	section	509(a)(2	2) See	section		
	509(a	(3). Ch	eck the box that describes	the type of supporting organiza	ition and co	omplete lii	nes 11e	through	11h			
	a	Туре	l b Type II	c X Type III-Function	nally integi	rated	d [Тур	e III–Ot	her		
е	X By cho	ecking t	his box, I certify that the o	rganization is not controlled dire	ctly or indi	rectly by o	ne or m	ore disc	qualified			
	perso	is othe	r than foundation manager	rs and other than one or more pu	ublicly sup	ported org	janizatio	ns desc	ribed in	section		
	509(a	(1) or s	ection 509(a)(2)									
f	If the	organiz	ation received a written de	termination from the IRS that it	ıs a Type I	Type II,	or Type	III supp	orting			
	organ	zation,	check this box									
g	Since	August	17, 2006, has the organiz	zation accepted any gift or contri	bution fron	n any of th	ne					_
	follow	ing per	sons?									
	(i) A	persor	who directly or indirectly	controls, either alone or togethe	r with pers	ons descr	ibed in (u)			Yes	No
				of the supported organization?	·		,	•			11g(i)	Х
			member of a person desc	·							11g(ii)	X
				described in (i) or (ii) above?							11g(III)	X
h				t the supported organization(s)								
1 (i)	Name of sup		(iı) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	s the	(vii) Amount of	
	organizatio	ר		(described on lines 1–9	in col (i) listed in your		the organization in				support	
		1		above or IRC section (see instructions))	governing document?		col (i) of your support?		(i) organized in the US?			
				(See monaduons),	Yes	No	Yes	No	Yes	No		
Se	e att	ache	d list									
					Х			Х	İ	X		
]			L_			
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otal						1						
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or F	rivacy Act	and Pa	aperwork Reduction Act	Notice, see the Instructions for	r				Sched	ule A (Fo	rm 990 or 990-EZ)	2009
	Privacy Act 1 990 or 99		aperwork Reduction Act	Notice, see the Instructions for	7				Sched	ule A (Fo	rm 990 or 990-EZ)	2009

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support		-				
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			ļ	 		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
þ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that			1			
	exceed the greater of \$5,000 or 1% of the		į				
С	amount on line 13 for the year Add lines 7a and 7b						
8	Public support (Subtract line 7c from				<u> </u>		
Ū	line 6)						
Sec	tion B. Total Support			4	I	1	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						. =
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)			<u></u>			
14	First five years. If the Form 990 is for the	•	t, second, third, fo	urth, or fifth tax ye	ar as a section 501	(c)(3)	
	organization, check this box and stop her		4				
	tion C. Computation of Public St			(0)	-	45	9/
15	Public support percentage for 2009 (line 8		-	nn (t))		15	<u>%</u>
16 Sec	Public support percentage from 2008 Schetion D. Computation of Investme					16	%_
17	Investment income percentage for 2009 (I			S column (fl)		17	%
18	Investment income percentage for 2008 (i		· ·	o, coluitiii (1))		18	%
19a	33 1/3 % support tests—2009. If the orga			e 14, and line 15 is	s more than 33 1/3		
_	17 is not more than 33 1/3 %, check this b						▶ [
b	33 1/3 % support tests—2008. If the orga	-	-		• • • • • • • • • • • • • • • • • • • •		<u> </u>
	line 18 is not more than 33 1/3 %, check to	his box and stop h	ere. The organiza	ition qualifies as a	publicly supported	organization	▶ [
20	Drivata foundation. If the accoming ten dis		- 1 14 10	10h abaak this ba	v and ago instructi		▶ 1

Schedule A (Form 990 or 990-EZ) 2009 The Priester Foundation 31-1568201

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

OMB No 1545-0047 2009

> Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection

% ⊠ Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed (h) Purpose of grant or assistance Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 31-1568201 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisa, assistance other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (c) IRC section if applicable General Information on Grants and Assistance (p) EIN Enter total number of section 501(c)(3) and government organizations The Priester Foundation Priester the selection criteria used to award the grants or assistance? (a) Name and address of organization c/o Susan C. or government Department of the Treasury Internal Revenue Service Name of the organization Part II Parti

Schedule I (Form 990) 2009

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Enter total number of other organizations

Page 2

31-1568201

Schedule I (Form 990) 2009 The Priester Foundation

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of Use Part IV and Schedule I-1 (Form 990) if additional space is needed. 261,100 (c) Amount of cash grant (b) Number of recipients 39 (a) Type of grant or assistance See attached list Part IV Part III

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Priester Foundation c/o Susan C. Priester

Employer identification number

C/O Susan C. Pilester

<u>| 31-1568201</u>

Susan C. Priester

Reimer Priester

Director

Director

Family - Mother / Son

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request

31-1568201	Fe	deral State	ements			
<u>I</u> :	axab	ele Interest on	Investments			
Description		Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
Interest/OID		46,875	Business Code	Code 14	Code	0/30//5
Total	\$_ \$_	46,875		T.4		
Description Dividends - equities Dividend/distributions - LP's	<u>*************************************</u>	Amount 143,725 31,332	Unrelated Business Code	Exclusion Code	Postal Code	Acquired afte 6/30/75
Total	\$	175,057		₩ -		
<u>Tax</u>	-Exe	mpt Interest o	n Investments			
Description		Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired afte 6/30/75
Municipal interest	\$	1,981		14		
Total	s_	1,981				

PRIESTER FOUNDATION 2009

Form 990, Schedule A, Part I line 11(i) attachment

Name of Supported Organization	Amount of Support	Line Number
Alliance of Quality Education	\$ 5,000	9
Alzheimer's Association	2,000	9
American Red Cross	5,000	9
Boys Home of the South	1,000	9
Cape May Bird Conservatory	1,000	9
Center Stage	4,000	9
Communities In School	2,000	9
Community Foundation of Greater Greenville	127,000	9
Denison University	1,000	2
Duke University	5,000	2
Fine Arts Center	5,000	2
Furman University	9,000	2
Girl Scouts of America, Old 96	2,000	9
Governor's School	5,000	2
Greenville Chorale	1,000	9
Greenville Humane Society	1,000	9
Greenville Little Theatre	3,000	9
Greenville Museum	5,000	9
Greenville Tech College	5,000	2
Greenville Women Giving	1,100	9
Greenville Zoo	1,000	9
Greer Community Ministries	2,000	9
Greer Relief	3,000	9
Habitat for Humanity	3,000	9
Heritage Elementary	1,000	2
Meals on Wheels	5,000	9
Metropolitan Arts Council	5,000	9
Mid-Atlantic Center	7,000	9
National Multiple Sclerosis	1,000	9
Partnership for Tomorrow	6,000	9
Peace Center	5,000	9
Planned Parenthood	2,000	9
SC Children's Theatre	4,000	9
SC ETV	1,000	9
Upstate Forever	14,000	9
United Way	5,000	9
WNCW Radio	1,000	9
YMCA of Greenville	4,000	9
YWCA of Greenville	1,000	9
		_

\$ 261,100