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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

| | | t of the Treasury venue Service | Note The foundation ma | y be able to use a copy of this | return to satisfy state rep | orting requirements. | 2003 |
|----------------|-------|--|-------------------------------------|---------------------------------|---------------------------------------|--|--|
| | | dar year 2009, or tax yea | | , 1, 11 13 000 0 00p) or tillo | , and ending | -0 | |
| | | all that apply: | Initial return | Initial return of a fo | rmer public charity | Final return | 1 |
| , , | ICCK | all that apply. | Amended return | Address change | | Name change | |
| | 41- 1 | Name of foundation | | <u> </u> | | A Employer identification | n number |
| | the i | KS | | | | | |
| | erwis | e. GREENLEAF | FOUNDATION | , INC. | | 57-0989702 | 2 |
| | rint | ' | O box number if mail is not | | Room/suite | B Telephone number | |
| | type | 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1 | NE ST | | 250 | 864-573-73 | 341 |
| | Spec | City or town, state, a | | | | C If exemption application is p | • |
| เมรน | uctio | SPARTANBUL | | | | D 1. Foreign organization | s, check here |
| <u> </u> | heck | type of organization: | X Section 501(c)(3) | exempt private foundation | | Foreign organizations me check here and attach co | omputation |
| | Se | ction 4947(a)(1) nonexen | | Other taxable private founda | ition | E If private foundation sta | itus was terminated |
| Fa | r ma | rket value of all assets at | · | ntıng method: X Cash | Accrual | under section 507(b)(1 |)(A), check here |
| | | Part II, col (c), line 16) | | Other (specify) | | F If the foundation is in a | |
| ▶ | | - | | olumn (d) must be on cash b | pasis) | under section 507(b)(1 | |
| Pa | rt I | The total of amounts in colu | umns (b), (c), and (d) may not | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable purpose |
| | | necessarily equal the amour | nts in column (a)) | expenses per books | income | income | (cash basis only) |
| | 1 | Contributions, gifts, gran | | | | N/A | <u> </u> |
| | 2 | Check X if the foundation | on is not required to attach Sch. B | C 344 | C 241 | <u> </u> | CMV MENTERSON |
| | 3 | Interest on savings and temp cash investments | | 6,341. | 6,341 | | STATEMENT |
| | 4 | Dividends and interest fro | om securities | 35,846. | 35,846 | • | STATEMENT |
| | | Gross rents | | | | | <u> </u> |
| ļ | | Net rental income or (loss) | | 22 000 | | | |
| e | Ба | Net gain or (loss) from sale of Gross sales price for all | | -33,888. | | | 1 |
| Revenue | _b | Gross sales price for all assets on line 6a | 166,191. | | 0 | . PREC | TEIVED |
| Re | 7 | Capital gain net income (from | | | | · FE | 100 |
| _ | 8 | Net short-term capital ga | 1111 | | | 1_ | |
| | 9 | Income modifications Gross sales less returns | I | | · · · · · · · · · · · · · · · · · · · | 10 /8/ JUL | 2 1 2010 0 |
| | _ | and allowances | | | | + 101 · · | <u> </u> |
| | | Less Cost of goods sold Gross profit or (loss) | | | | 1 00 | DEN, UT |
| | | Other income | | | | UG | |
| | | Total. Add lines 1 through | nh 11 | 8,299. | 42,187 | | |
| _ | 13 | Compensation of officers, dir | | 0. | 0 | | |
| | 14 | Other employee salaries | | | | | |
| | | Pension plans, employee | • | | - | | |
| Ses | | Legal fees | STMT 3 | 5,321. | 0 | | 5,3 |
| ė | | Accounting fees | STMT 4 | 4,000. | 0 | | 4,0 |
| Expenses | | Other professional fees | STMT 5 | 6,368. | 0 | | 6,3 |
| | 17 | Interest | | | | | |
| Administrative | 18 | Taxes | STMT 6 | 177. | 0 | | |
| ist | 19 | Depreciation and depletion | | | | | |
| Ē | | Occupancy | | | | | |
| Ad | 21 | Travel, conferences, and | meetings | 33,654. | 0 | • | 33,6 |
| and | 22 | Printing and publications | | | | | |
| μĝ | 23 | Other expenses | STMT 7 | 7,617. | 3,688 | • | 3,9 |
| Operating | 24 | Total operating and adn | | | _ | | |
| bei | | expenses. Add lines 13 | through 23 | 57,137. | 3,688 | • | 53,2 |
| O | 25 | Contributions, gifts, gran | nts paid | 79,624. | | <u> </u> | 79,6 |
| | 26 | Total expenses and dist | bursements. | | | | 4000 |
| | | Add lines 24 and 25 | | 136,761. | 3,688 | • | 132,8 |
| | 27 | Subtract line 26 from line | e 12: | | | | |
| | а | Excess of revenue over exper | nses and disbursements | -128,462. | | | |
| | b | Net investment income | (if negative, enter -0-) | | 38,499 | | |
| | C | Adjusted net income of a | negative, enter -0-) | 1 | 1 | N/A | |

Form 990-PF (2009)

Form **990-PF** (2009)

| _ | (a) Base period years Calendar year (or tax year beginning in) | (a) Base period years ear (or tax year beginning in) (b) Adjusted qualifying distributions Net value of noncharitable-use assets | | (c | (d) Distribution ratio ol. (b) divided by col. (c)) |
|---|--|--|-------------------------------------|----|---|
| _ | 2008 | 475,089. | 8,721,091. | | .054476 |
| _ | 2007 | 768,471. | 10,928,176. | | .070320 |
| _ | 2006 | 194,485. | 9,669,795. | | .020113 |
| | 2005 | 425,811. | 8,654,529. | | .049201 |
| _ | 2004 | 591,601. | 8,528,095. | | .069371 |
| 5 | Total of line 1, column (d) | | | 2 | .263481 |
| 3 | Average distribution ratio for the 5-year bathe foundation has been in existence if less | • | or by the number of years | 3 | .052696 |
| , | Enter the net value of noncharitable-use as | sets for 2009 from Part X, line 5 | | 4 | 6,537,947. |
| 5 | Multiply line 4 by line 3 | | | 5 | 344,524. |
| 3 | Enter 1% of net investment income (1% of | Part I, line 27b) | | 6 | 385. |
| 7 | Add lines 5 and 6 | | | 7 | 344,909. |
| } | Enter qualifying distributions from Part XII, | , line 4 | | 8 | 132,896. |
| | If line 8 is equal to or greater than line 7, ch | neck the hox in Part VI, line 1h, and comp | lete that part using a 1% tax rate. | | |

See the Part VI instructions.

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(e) Gross sales price

(i) F.M.V. as of 12/31/69

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

166,191

Part IV

<u>1a</u>

_b C ď е

а _b

e

b

d

| orm | 1990-PF (2009) GREENLEAF FOUNDATION, INC. | <u> 57-</u> | <u>0989</u> | <u> 702</u> | | Page 4 |
|-----|--|--|-------------|--------------|------------|------------|
| Pa | irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or | <u>4948 </u> | - see ii | <u>nstru</u> | ctior | าร) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter *N/A* on line 1. | | | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | 1 | | | <u> </u> | <u>70.</u> |
| | of Part I, line 27b | | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | | ļ | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | ļ | | | <u>0.</u> |
| 3 | Add lines 1 and 2 | 3 | | | <u> </u> | <u>70.</u> |
| 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 | | | <u> 7</u> | <u>70.</u> |
| 6 | | | | | | |
| а | 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 5,840 | <u>.</u> | | | | |
| b | Exempt foreign organizations - tax withheld at source 6b | _ | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) | | | | | |
| d | Backup withholding erroneously withheld 6d | | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | | | <u>5,8</u> | <u>40.</u> |
| 8 | Enter any penalty for underpayment of estimated tax. Check here 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 | | | | <u>70.</u> |
| | Enter the amount of line 10 to be: Credited to 2010 estimated tax 800 • Refunded | 11 | | | <u>4,2</u> | <u>70.</u> |
| Pa | rt VII-A Statements Regarding Activities | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven | ie in | | | Yes | |
| | any political campaign? | | | 1a | | _X_ |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | | 1b | | _X_ |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish | ed or | | | | |
| | distributed by the foundation in connection with the activities. | | | | | |
| C | Did the foundation file Form 1120-POL for this year? | | | 1c | | X |
| đ | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | | |
| | (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 | <u>•</u> | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | | |
| | managers. ► \$0 . | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | | X |
| | If "Yes," attach a detailed description of the activities | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, | Or | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N | I/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | | |
| | By language in the governing instrument, or | | | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta | te law | | | | |
| | remain in the governing instrument? | | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | 7 | X | |
| | If "Yes," complete Part II, col (c), and Part XV. | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) NONE | | | | | |
| | | | | | | |
| 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 General Instruction G? If "No," attach explanation SEE STATE | MENT | 10 | 8b | | 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 ca | lendar | | | | |
| | year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9_ | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | 10 | | X |
| | | | Fori | ո 990 | -PF(| (2009) |

| | | 989702 | | Page 5 |
|------------|--|---------------|--------------|--|
| | rt 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 | l | ĺ | l |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before | 1 | | |
| | August 17, 2008? | 12_ | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | <u> </u> | Ļ |
| | Website address ► N/A | 41572 | | |
| 14 | The books are in care of ► ROBERT E. CALDWELL, SR. Telephone no. ► (86) | | | 1 |
| | | <u>≥29302</u> | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | • | • |
| D - | and enter the amount of tax-exempt interest received or accrued during the year | N | / <u>A</u> | |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | 15.2 | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | <u> </u> | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | No | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | I | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | I . | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 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)? | No | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | İ | | |
| | 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.) | 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 | | | 1 |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? | 'A 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| 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 2009? | 1c | | 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)): | | ł | |
| а | At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| _ | before 2009? | No | | |
| | If "Yes," list the years \ | | | |
| h | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | |
| | statement - see instructions.) | 'A 2b | | |
| | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 11 20 | | |
| · | | | | |
| 2. | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| Ja | | No | | |
| L | • • | NO | | |
| 0 | If "Yes," did it have excess business holdings in 2009 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 2009) N/ | | <u> </u> | - |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | 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 2009? | 4b | L | X |

| orm 990-PF (2009) GREENLEAF FOUNDATION, IN | C | | <u>57-09897</u> | <u>02</u> | Page 6 |
|--|------------------------------------|--|--|--------------|-----------------------|
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be F | Required (contin | ued) | | , |
| 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))? | Ye | s X No | | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | ectly, | | - 1 | 1 |
| any voter registration drive? | | | s X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | > | Ye | s X No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | - | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | Ye | s X No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | or | | | |
| the prevention of cruelty to children or animals? | | Y6 | s X No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | ler the exceptions described i | n Regulations | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check h | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | | med | | | |
| expenditure responsibility for the grant? | | /A 🔲 Ye | es 🔲 No | i | |
| If "Yes," attach the statement required by Regulations section 53 4945 | | , | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | • | | | | |
| a personal benefit contract? | ouj promuno on | | es X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal henefit contract? | | | 6b | x |
| If "Yes" to 6b, file Form 8870 | orsonal bonone bone act | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | haltar transaction? | □ v ₄ | es X No | | İ |
| b If yes, did the foundation receive any proceeds or have any net income attribute | | | | 7b | |
| Information About Officers Directors Trust | | nagers Highly | | | |
| Part VIII Paid Employees, and Contractors | 565, i Gandation ivia | inagers, riigini | | | |
| List all officers, directors, trustees, foundation managers and their | compensation. | | | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plans | (e) | Expense unt, other |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | and deferred compensation | acco | unt, other owances |
| | to position | Cinci o | Compensation | | |
| | | | | | |
| SEE STATEMENT 11 | | 6,368. | 0. | | 0. |
| DEE SIMIEMENI II | | 0,300. | | | |
| | : | | | | |
| <u> </u> | | | | ŀ | |
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| | | | | | |
| O | luded on line 4) If none | onter "NONE " | | | |
| 2 Compensation of five highest-paid employees (other than those inc | (b) Title, and average | enter NONE. | (d) Contributions to | ام) | Expense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | (d) Contributions to employee benefit plans and deferred | acco | Expense unt, other |
| | devoted to position | | compensation | alic | owances |
| NONE | | | | | |
| | - | | | | |
| | | | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | | | |
| | | | | 1 | |
| | | | | <u> </u> | |
| Total number of other employees paid over \$50,000 | | | ▶ | | 0 |

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|--|----------------|-----------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) | | |
| Five highest-paid independent contractors for professional services. 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 | • | 0 |
| 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. | E> | penses |
| CHARITABLE CONTRIBUTION OF \$10,000 TO JUST GIVE ME JESUS | | |
| UPSTATE SC. | _] | |
| | | 0. |
| CHARITABLE CONTRIBUTION OF \$10,000 TO TAYLOR UNIVERSITY. | | |
| | | 0 |
| CHARITABLE CONTRIBUTION OF \$10,000 TO REBIRTH EAST ST. | - | 0. |
| LOUIS. | _ | |
| | | 0. |
| CHARITABLE CONTRIBUTION OF \$8,000 TO RICE BOWLS, INC. | | |
| | | |
| | | 0. |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | A | mount |
| NONE. ALL ASSETS CONSISTED OF CASH DEPOSITED IN AN INTEREST- BEARING ACCOUNT, CERTIFICATES OF DEPOSITS, AND | | |
| MANAGED INVESTMENT ACCOUNTS. | _ | 0. |
| MARAGED INVESTMENT ACCOUNTS: | | |
| | _ | |
| | | |
| All other program-related investments. See instructions. | | |
| | | |
| | | |

Total. Add lines 1 through 3

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndation | s, 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 | 2,140,645. |
| | Average of monthly cash balances | 1b | 2,747,741. |
| | Fair market value of all other assets | 1c | 1,749,124. |
| | Total (add lines 1a, b, and c) | 1d | 6,637,510. |
| | 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 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 6,637,510. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 99,563. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 6,537,947. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 326,897. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | d certair | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 326,897. |
| 2a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | <u>770.</u> |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 326,127. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 326,127. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| <u>7_</u> | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 326,127. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 132,896. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 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: | | |
| а | 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 | 132,896. |
| 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 | 5 | 0. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 132,896. |
| | Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (| ualifies | for the section |

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

| | (a) | (b) | (c) | (d) |
|--|-------------|---------------------|------|-----------------|
| | Corpus | Years prior to 2008 | 2008 | 2009 |
| 1 Distributable amount for 2009 from Part XI, line 7 | | | | 326,127. |
| 2 Undistributed income, if any, as of the end of 2009 | | | | |
| a Enter amount for 2008 only | | | 0. | |
| b Total for prior years: | | | | |
| · , , | | 0. | | |
| 3 Excess distributions carryover, if any, to 2009: | | | | |
| a From 2004 | | | | |
| b From 2005 | | | | |
| c From 2006 | | | | |
| d From 2007 | | | | |
| e From 2008 29,640. | | | | |
| f Total of lines 3a through e | 29,640. | | | |
| _ | 25,040. | | | |
| 4 Qualifying distributions for 2009 from Part XII, line 4: ►\$ 132,896. | | | | |
| • | | | 0. | |
| a Applied to 2008, but not more than line 2a | | | | |
| b Applied to undistributed income of prior | | 0. | | |
| years (Election required - see instructions) | | | | - - |
| c Treated as distributions out of corpus | 0. | | | |
| (Election required - see instructions) | <u>U.</u> | | | 132,896. |
| d Applied to 2009 distributable amount | | | | 132,030 |
| e Remaining amount distributed out of corpus | 0. | | | 29,640 |
| 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).) | 29,640. | | | 29,640 |
| 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 | , | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | 0. | | |
| amount - see instructions | | | | |
| e Undistributed income for 2008. Subtract line | | | 0. | |
| 4a from line 2a. Taxable amount - see instr. | | | | |
| f Undistributed income for 2009. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | 162 501 |
| be distributed in 2010 | | | | 163,591 |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2004 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2010. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | , | | |
| a Excess from 2005 | 1 | | | |
| b Excess from 2006 | | | | |
| c Excess from 2007 | 1 | | | |

d Excess from 2008 e Excess from 2009

| Part XIV Private Operating F | Oundations (see ins | | II-A question 9) | N/A | 189/02 Page 10 |
|---|-----------------------------|----------------------------|-----------------------------|-----------------------------|---------------------|
| 1 a If the foundation has received a ruling of | | | TA, question of | N/A | |
| foundation, and the ruling is effective for | | | | | |
| b Check box to indicate whether the found | | - | in coction | 4942(j)(3) or 49 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | id ioninguou nezcunen | Prior 3 years | 1 4342())(3) 014: | 1 |
| • | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| income from Part I or the minimum | | (8) 2000 | (6) 2001 | (6)2000 | (0) 10(4) |
| investment return from Part X for | | I. | | |] |
| each year listed | | | + | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt | | | | | |
| organizations as provided in section 4942(j)(3)(B)(iii) | | | | | 1 |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundation | had \$5,000 or m | ore in assets |
| at any time during t | he year-see the i | nstructions.) | | | |
| 1 Information Regarding Foundatio | n Managers: | | | | |
| a List any managers of the foundation who | o have contributed more f | than 2% of the total cor | tributions received by the | foundation before the clo | se of any tax |
| year (but only if they have contributed in | iore than \$5,000). (See se | ection 507(d)(2).) | | | |
| NONE | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has | | | (or an equally large porti | on of the ownership of a p | artnership or |
| NONE | | | | | |
| 2 Information Regarding Contributi | on, Grant, Gift, Loan, | Scholarship, etc., P | rograms: | | - |
| | nly makes contributions t | | _ | not accept unsolicited regi | iests for funds. If |
| the foundation makes gifts, grants, etc. | | | | | |
| a The name, address, and telephone numl | | | | | |
| ROBERT E, CALDWELL, | | | , 434, 555541 | | |
| 951_S. PINE STREET, | • • | | s, SC 29302 | | |
| b The form in which applications should b | | | | | |
| WRITTEN REQUEST WITH | | _ | | L(C)(3) STAT | US. |
| c Any submission deadlines: | | | · <u></u> | | |
| d Any restrictions or limitations on awards | s, such as by geographica | l areas, charitable fields | , kinds of institutions, or | other factors; | |
| NONE | | | | | |

| 3 Grants and Contributions Paid During the Y | ear or Approved for Future | Payment | | |
|--|--|--------------------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid dunng the year | | | | |
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| SEE STATEMENT 12 | | ! | | |
| Total | | | ▶ 3a | 79,624. |
| b Approved for future payment | | | | |
| | | | | |
| | | | | |
| NONE | | | | |
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| | | | | |
| Total | | | ▶ 3b | 0. |

Enter gross amounts unless otherwise indicated.

Excluded by section 512, 513, or 514

| Part XVI-A | Analy | sis of | Income | -Producing | Activities |
|------------|-------|--------|--------|------------|------------|
| | | | | | |

| Enter gross amounts unless otherwise indicated. | Unrelate | d business income | | ded by section 512, 513, or 514 | (e) |
|---|--|---------------------------------------|------------------------|---------------------------------|---------------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| a | | | | | |
| b | | · · · · · · · · · · · · · · · · · · · | | | |
| c | | | | | |
| | | | | | |
| θ | 1 1 | | 1 | | |
| | | | 1 | | |
| Fore and contracts from a superment against | | | | | |
| g Fees and contracts from government agencies | | | - | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | 4 4 | C 241 | |
| investments | <u> </u> | | 14 | 6,341. 35,846. | |
| 4 Dividends and interest from securities | | | 14 | 35,846. | |
| 5 Net rental income or (loss) from real estate: | <u> </u> | | ļ | | |
| Debt-financed property | | | | | |
| b Not debt-financed property | | | | | · |
| 6 Net rental income or (loss) from personal | 1 | | 1 1 | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | · · · · · | | | | |
| than inventory | | | 18 | -33,888. | |
| 9 Net income or (loss) from special events | | · · · · · · · · · · · · · · · · · · | - | 30,000. | |
| 10 Gross profit or (loss) from sales of inventory | | | + | | |
| 11 Other revenue: | - | | - | | |
| | 1 | | 1 | | |
| <u>a</u> | | | | | |
| b | | | | | |
| c | | | - | - | · · · · · · · · · · · · · · · · · · · |
| d | <u> </u> | | | · | · |
| e | | | - | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | 8,299. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 8,299. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities t | o the Acco | molishment of F | vemn | t Purnoses | |
| Telationship of Activities to | the Acce | inplianment of L | vemb | | |
| Line No. Explain below how each activity for which inco | | | A contrit | outed importantly to the accom | nplishment of |
| the foundation's exempt purposes (other than | | | | | |
| 3 INTEREST INCOME FROM C | HECKING | ACCOUNTS, C | CD'S | , AND INVESTM | ENT ACCOUNTS |
| 3 INTEREST INCOME FROM CI 3 USED TO FUND GRANTS. | | | | | |
| 4 DIVIDEND INCOME FROM II | NVESTME | NT ACCOUNTS | USE | D TO FUND THE | GRANTS. |
| 8 GAINS FROM STOCK PROCE | | | | | · · · · · · · · · · · · · · · · · · · |
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Unrelated business income

| P | Part XVII Information Regarding Transfers T Exempt Organizations | o and Transactions ar | nd Relationships With Nonc | haritable | , | |
|-----------|--|--|---|-------------------|--------------|-----------------------|
| 1 | | owing with any other organization | described in section 501(c) of | | Yes | No |
| | the Code (other than section 501(c)(3) organizations) or in section | | | | | |
| ē | a Transfers from the reporting foundation to a noncharitable exemp | | | | | |
| | (1) Cash | · · | | 1a(1) | | X |
| | (2) Other assets | | | 1a(2) | | X |
| t | b Other transactions: | | | | | |
| | (1) Sales of assets to a noncharitable exempt organization | | | 1b(1) | | X |
| | (2) Purchases of assets from a noncharitable exempt organizatio | n | | 1b(2) | | |
| | (3) Rental of facilities, equipment, or other assets | | | 1b(3) | | X X X X X |
| | (4) Reimbursement arrangements | | | 1b(4) | | X |
| | (5) Loans or loan guarantees | | | 1b(5) | | X |
| | (6) Performance of services or membership or fundraising solicit | tations | | 1b(6) | | X |
| C | c Sharing of facilities, equipment, mailing lists, other assets, or paid | l employees | | 1c | | <u>X</u> |
| (| d If the answer to any of the above is "Yes," complete the following s | schedule. Column (b) should alwa | ays show the fair market value of the good | ls, other ass | ets, | |
| | or services given by the reporting foundation. If the foundation re- | ceived less than fair market value | in any transaction or sharing arrangemen | nt, show in | | |
| | column (d) the value of the goods, other assets, or services received | /ed | | | | |
| (a) |) Line no (b) Amount involved (c) Name of noncharit | table exempt organization | (d) Description of transfers, transactions, a | and sharing arr | angeme | nts |
| | N/2 | A | | | | |
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| | | | | | | |
| 28 | a Is the foundation directly or indirectly affiliated with, or related to, | | itions described | | | - |
| | in section 501(c) of the Code (other than section 501(c)(3)) or in | section 527? | | Yes | X | No |
| t | b If "Yes," complete the following schedule. | 1 | | | | |
| | (a) Name of organization | (b) Type of organization | (c) Description of relation | onship | | |
| | N/A | | | | | |
| _ | | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| _ | T | | | | | |
| | Under penalties of perjury, I declare that I have examined this return, including and complete Declaration of preparer (other than taxpayer or fiduciary) is base. | | | it is true, corre | ct, | |
| | | | | | | |
| . | 10 mus (1 'kliner | SULIS SON | | | | |
| Ę | Signature of office r or trustee | Date | Title | | | |
| Sign Here | Preparer's A | Da () | | parer's identify | nig num | in ei |
| เริ่ | signature SWAIMBROWN PA if self-employed). P.O. BOX 6404 | etum) | | | | |
| | Firm's name (or yours SWAIMBROWN PA | | EIN ► | | | |
| | if self-employed). P.O. BOX 6404 | 00004 | ,,,, | | ^ - | - |
| | address, and ZIP code SPARTANBURG, SC | 29304 | Phone no. (86 | 4)585 | | |
| | | | | Form 990 | -Ph (| 2009) |

| Part IV Capital Gains and Lo | sses for Tax on Investment Income | | | | |
|---|---|---|--|--|----------------------------------|
| (a) List and 2-story bi | describe the kind(s) of property so rick warehouse; or common stock, 2 | d, e.g., real estate, 00 shs. MLC Co. | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a 5,400 SH. FANN | IE MAE | | P | 10/03/08 | 09/02/09 |
| b 54,850 SH FANN | | | | 10/03/08 | |
| c 53,700 SH. FAN | | | P | 10/03/08 | 09/02/09 |
| d CHUNGHWA TELEC | | | | 06/30/08 | |
| e CHUNGHWA TELEC | | 77 | | 06/30/08 | |
| f CHUNGHWA TELEC | | | | 06/30/08 | |
| 9 | on chon in bib | | | 00730700 | 05/25/05 |
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| 0 | | | | | |
| | (6) Depression allowed | (a) Cost or other hasis | | Gain or (loss) | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | lus (f) minus (g) | |
| a 7,127. | (5. 5565) | 8,920. | (0) P | (6) | -1,793. |
| a 7,127. b 72,391. | | 91,051. | | | -18,660. |
| | | 99,892. | | | -13,447. |
| c 86,445. | | 216. | | | |
| d 216. | | 210. | | | <u> </u> |
| <u>e</u> 5. | | | | | 5. 7. |
| <u>f</u> 7. | | | | | |
| 9 | | | | | |
| h | | | · | | |
| <u> </u> | | | | | |
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| <u>k</u> | | | <u>-</u> | | |
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| <u>m</u> | | | | | <u>_</u> |
| n | | | | | |
| 0 | | 11. (1. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1. | | | |
| Complete only for assets snowin | ng gain in column (h) and owned by | ····· | | ses (from col. (h)) | and (k) |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | but n | of col. (h) gain over ot less than "-0-") | COI. (K), |
| a | | | | | -1,793. |
| b | | | | | -18,660. |
| C | | | | | -13,447. |
| d | | | | | 0. |
| e | | | | | 5. |
| f | | | | | 7. |
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| 0 | - | | | | |
| | | | | | |
| 2 Capital gain net income or (net ca | pital loss) { If gain, also enter -(| In Part I, line 7 | 2 | | -33, <u>888.</u> |
| • | | 5 | | | |
| Net short-term capital gain or (los if gain, also enter in Part I, line 8, | | 10 (0): | | | |
| If (loss), enter "-0-" in Part I, line 8 | | J ; | 3 | N/A | _ |
| | | | | | |

| FORM 990-PF INTEREST ON SAV | INGS A | ND TEM | PORARY C | ASH II | NVESTMENTS | STATEMENT | 1 |
|---|--------|---------------------|---|--------|-------------------------------------|----------------------|-------------|
| SOURCE | | | | | | TUOMA | |
| BB&T CD INTEREST | | | | | | 4,87 1,47 | |
| TOTAL TO FORM 990-PF, PART I | , LINE | 3, CO | LUMN A | | | 6,34 | 11. |
| FORM 990-PF DIVIDEN | DS AND | INTER | EST FROM | SECUI | RITIES | STATEMENT | 2 |
| SOURCE | | GROSS | AMOUNT | | ITAL GAINS [,] IVIDENDS | COLUMN (A) AMOUNT | ŀ |
| E*TRADE 2170 E*TRADE 2171 E*TRADE 2172 E*TRADE 5536 SANDLER O'NEIL & PARTNERS | | | 56. 38. 2,387. 3,284. 30,081. | | 0. 0. 0. 0. | | 34. |
| TOTAL TO FM 990-PF, PART I, | LN 4 | | 35,846. | | 0. | 35,84 | 16. |
| FORM 990-PF | | LEGAL | FEES | | | STATEMENT | 3 |
| DESCRIPTION | EXPE | A) NSES BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOM | | |
| LEGAL FEES | | 5,321. | | 0. | | 5,32 | 21. |
| TO FM 990-PF, PG 1, LN 16A | | 5,321. | | 0. | | 5,32 | <u>1</u> 1. |
| FORM 990-PF | AC | COUNTI | NG FEES | | | STATEMENT | 4 |
| DESCRIPTION | EXPE | A) NSES BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | | 4,000. | - | 0. | | 4,00 | 00. |
| TO FORM 990-PF, PG 1, LN 16B | | 4,000. | | 0. | | 4,00 | 0. |
| = | | | | | | | = |

| FORM 990-PF C | THER PROFES | SIONAL FEES | S' | PATEMENT | |
|--|--|--|----------|-----------------|-----|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | ADJUSTED | CHARITA | |
| CONTRACT LABOR | 6,368. | 0. | | 6,30 | 58. |
| TO FORM 990-PF, PG 1, LN 16C | 6,368. | 0. | | 6,30 | 58. |
| FORM 990-PF | TAX | ES | S | TATEMENT | 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | ADJUSTED | CHARITA | |
| INCOME TAX | 177. | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 177. | 0. | | | 0. |
| FORM 990-PF | OTHER E | XPENSES | S | TATEMENT | 7 |
| DESCRIPTION BANK SERVICE CHARGES BOOKS & TAPES MEALS & ENTERTAINMENT OFFICE SUPPLIES TELEPHONE OTHER INVESTMENT EXPENSES EARLY WITHDRAWAL PENALTIES | PER BOOKS 157. 936. 977. 945. 16. 2,609. 371. | 0. 0. 0. 0. 0. 2,609. 371. | | PURPOSI 1999 | |
| DUES & SUBSCRIPTIONS POSTAGE & DELIVERY TO FORM 990-PF, PG 1, LN 23 | 1,050. 556. 7,617. | 0. | | | 56. |

| FORM 990-PF C | CORPORATE STOCK | | STATEMENT 8 |
|---|---------------------|--|---|
| DESCRIPTION SANDLER O'NEIL & PARTNERS ACCOUNT 9,800 SH. CAROLINA ALLIANCE BANK E*TRADE 5536 E*TRADE 2172 E*TRADE 2171 TOTAL TO FORM 990-PF, PART II, LI | | BOOK VALUE 3,353,814. 98,000. 277,413. 155,510. 76,864. 3,961,601. | FAIR MARKET VALUE 1,362,308. 88,200. 247,127. 267,712. 120,976. 2,086,323. |
| FORM 990-PF OT | THER INVESTMENTS | | STATEMENT 9 |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| INVESTMENT IN MARCHLAND CORPORATI - A 501(C)(2) TITLE HOLDING CO INVESTMENT IN RODEO BEACH | ION COST | 720,000. | 720,000. |
| PROPERTIES | | 1,067,684. | 1,067,684. |
| TOTAL TO FORM 990-PF, PART II, LI | INE 13 | 1,787,684. | 1,787,684. |
| FORM 990-PF EXPLANATION CONCER | RNING PART VII-A, | LINE 8B | STATEMENT 10 |

EXPLANATION

NOT REQUIRED

| FORM 990-PF PART VIII - L TRUSTEES A | IST OF OFFICE ND FOUNDATION | | TORS | STAT | EMENT 11 |
|---|--------------------------------|----------|--------|---------------------------------|----------|
| NAME AND ADDRESS | | ND COI | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| ROBERT E. CALDWELL, SR. 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | CHAIRMAN 0.00 | | 0. | 0. | 0. |
| SYLVIA R. CALDWELL 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | VICE-CHAII 0.00 | RMAN | 0. | 0. | 0. |
| HUGH H. BRANTLEY 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | DIRECTOR 0.00 | | 0. | 0. | 0. |
| ROBERT E. CALDWELL, JR. 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | ASSOCIATE 0.00 | DIRECTOR | 0. | 0. | 0. |
| SARAH CALDWELL 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | ASSOCIATE 0.00 | DIRECTOR | 0. | 0. | 0. |
| MARK JOHNSON 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | ASSOCIATE 0.00 | DIRECTOR | 0. | 0. | 0. |
| KATHLEEN CALDWELL-JOHNSON 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | ASSOCIATE 5.00 | | 6,368. | 0. | 0. |
| T. DODD CALDWELL 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | ASSOCIATE 0.00 | DIRECTOR | 0. | 0. | 0. |
| BEN CALDWELL 951 SOUTH PINE STREET SPARTANBURG, SC 29302 | ASSOCIATE 0.00 | DIRECTOR | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE | 6, PART VIII | | 6,368. | 0. | 0. |

FORM 990-PF

STATEMENT 12

| | DURING THE YEAR | | |
|---|--|-------------------|---------|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | | |
| FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO | N/A IN-KIND CONTRIBUTIONS | PUBLIC CHARITY | 899. |
| HOPE POINT COMMUNITY CHURCH P.O. BOX 170151 SPARTANBURG, SC | N/A IN-KIND CONTRIBUTIONS | CHURCH | 102. |
| JUMP START 951 S. PINE STREET SPARTANBURG, SC 29302 | N/A IN-KIND CONTRIBUTIONS | PUBLIC CHARITY | 13,100. |
| MOBILE MEALS 419 EAST MAIN ST SPARTANBURG, SC 29302 | N/A IN-KIND CONTRIBUTIONS | PUBLIC CHARITY | 2,064. |
| RICE BOWLS, INC. 951 S. PINE STREET SPARTANBURG, SC 29302 | N/A IN-KIND CONTRIBUTIONS | PUBLIC CHARITY | 11,465. |
| RICE BOWLS, INC. 951 S. PINE STREET SPARTANBURG, SC 29302 | N/A CASH CONTRIBUTION | PUBLIC CHARITY | 8,000. |
| SOUTH CAROLINA CHRISTIAN FOUNDATION P.O. BOX 2397 SPARTANBURG, SC 29304 | N/A IN-KIND CONTRIBUTIONS | FOUNDATION | 1,792. |
| TAYLOR UNIVERSITY 236 WEST READE AVENUE UPLAND, IN 46989 | N/A CASH CONTRIBUTION | UNIVERSITY | 10,000. |

GRANTS AND CONTRIBUTIONS

| GREENLEAF FOUNDATION, INC. | | | 57-0989702 |
|--|------------------------------|-------------------|------------|
| SHEPHERD'S DOOR MINISTRIES P.O. BOX 823 SPARTANBURG, SC 29304 | N/A CASH CONTRIBUTION | PUBLIC CHARITY | 3,200. |
| JUST GIVE ME JESUS UPSTATE SC 5115 HOLLYRIDGE DRIVE RALEIGH, NC 27612 | N/A CASH CONTRIBUTION | PUBLIC CHARITY | 10,000. |
| REBIRTH EAST ST. LOUIS PO BOX 2197 EAST ST LOUIS, IL 62208 | | PUBLIC CHARITY | 10,000. |
| RESCUE CHILDREN ORPHANAGE P.O. BOX 170202 SPARTANBURG, SC 29301 | N/A CASH CONTRIBUTION | PUBLIC CHARITY | 60. |
| CAMPUS OUTREACH GREENVILLE 207 MITCHELL ROAD GREENVILLE, SC 29615 | N/A CASH CONTRIBUTION | PUBLIC CHARITY | 2,000. |
| CHRISTIAN LIFE MINISTRIES 114 DARMONDALE DRIVE MOORE, SC 29369 | N/A IN-KIND CONTRIBUTIONS | PUBLIC CHARITY | 6,932. |
| PALMETTO CHRISTIAN FOUNDATION 951 S. PINE STREET SPARTANBURG, SC 29302 | N/A IN-KIND CONTRIBUTIONS | FOUNDATION | 10. |
| TOTAL TO FORM 990-PF, PART XV, L | INE 3A | | 79,624. |

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

| | This a soperation application for sealing control | | |
|-------------------------------|---|------------|---|
| • If | you are filing for an Automatic 3-Month Extension, complete only Part I and check this box | s form) | |
| Pa | Automatic 3-Month Extension of Time. Only submit original (no copies needed). | | |
| _ | rporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and coll I only | mplete | ▶ □ |
| | ther corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a e income tax returns. | n exter | nsion of time |
| noted (not a you r | tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or composite or composite to the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic for irrespoy/efile and click on e-file for Charities & Nonprofits. | nically if | f (1) you want the additional ated Form 990-T. Instead, |
| Туре | | Emp | loyer identification number |
| print | GREENLEAF FOUNDATION, INC. | [| 7-0989702 |
| File by due da filing y | Number, street, and room or suite no. If a P.O. box, see instructions. | | 1-0909102 |
| retum Instruc | See | | |
| Chec | ck type of return to be filed (file a separate application for each return): | | |
| | Form 990 Form 990-T (corporation) Form 4 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5 Form 990-EZ Form 990-T (trust other than above) Form 6 Form 990-PF Form 1041-A Form 8 | 227 069 | |
| | ROBERT E. CALDWELL, SR. ne books are in the care of > 951 S. PINE STREET - SPARTANBURG, SC 29 | 302 | |
| • If | elephone No. (864) 573-7341 FAX No. the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If the group, check this box | is is fo | |
| 1 | I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2010 , to file the exempt organization return for the organization named | | The extension |
| | is for the organization's return for: X calendar year 2009 or | | |
| | tax year beginning, and ending | | _· |
| 2 | If this tax year is for less than 12 months, check reason: Initial return | | Change in accounting period |
| 3a | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | T | |
| | nonrefundable credits. See instructions. | 3a | \$ 848. |
| b | If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated | | E 040 |
| | tax payments made. Include any prior year overpayment allowed as a credit. | 3b_ | \$ 5,840. |
| ¢ | Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). | | |
| | See instructions. | 3c | \$ 0. |
| | ion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-FO and Form | 2072 | |

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

| • If you | are filing for an Automatic 3-Month Extension, complete only Part I and check this box are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this omplete Part II unless you have already been granted an automatic 3-month extension on a previously fi | | |
|--|--|--------------------------|---|
| Part I | Automatic 3-Month Extension of Time. Only submit original (no copies needed). | | |
| A corpora Part I onl | ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and con y | nplete | ▶ □ |
| | corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ome tax returns | n exter | nsion of time |
| noted be (not auto you must | ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or co submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file for Charities & Nonprofits | ically it insolid | f (1) you want the additional ated Form 990-T. Instead, |
| Type or | Name of Exempt Organization | Emp | loyer identification number |
| print | GREENLEAF FOUNDATION, INC. | 5 | 7-0989702 |
| File by the due date for filing your return See | Number, street, and room or suite no. If a P.O. box, see instructions. 951 S. PINE ST, NO. 250 | | |
| instructions | City, town or post office, state, and ZIP code. For a foreign address, see instructions. SPARTANBURG, SC 29302 | | |
| For X For Teleph If the co | m 990 m 990-T (corporation) m 990-BL m 990-BL m 990-F Form 990-T (sec. 401(a) or 408(a) trust) m 990-EZ m 990-PF Form 990-T (trust other than above) Form 60 Form 880 ROBERT E. CALDWELL, SR. coks are in the care of ▶ 951 S. PINE STREET - SPARTANBURG, SC 29 sone No. ▶ (864)573-7341 FAX No ▶ corganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the | 227 069 370 302 | r the whole group, check this |
| 1 re | If it is for part of the group, check this box \[\bigsim \] and attach a list with the names and EINs of all quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010, to file the exempt organization return for the organization named a or the organization's return for: \[\bigcirc \] calendar year \(\frac{2009}{2009} \) or, and ending, and ending | ıl ıbove. | The extension |
| 2 If th | nis tax year is for less than 12 months, check reason: Initial return Final return | <u></u> | Change in accounting period |
| | is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any irefundable credits. See instructions. | 3a | \$ 848. |
| | is application is for Form 990-PF or 990-T, enter any refundable credits and estimated | - Ja | |
| <u>tax</u> | payments made Include any prior year overpayment allowed as a credit. | 3ь | \$ 5,840. |
| dep | ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). | 3c | s 0. |
| | HISTIDUTO | , 50 | <u> </u> |