

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

Return of Private Foundation

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

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

OMB No 1545-0052

	traine savies inverse in the interior in the i	те селе не селе с сору ст. инс	· · · · · · · · · · · · · · · · · · ·		<u> </u>
For cale	ndar year 2009, or tax year beginning		, and ending		
6 Chec	k all-that apply:Initial return =	Initial return of a fo	ormer public charity	Final return	ı
	Amended return	Address chan	ge L	Name change	
Use the	IRS Name of foundation			A Employer identification	number
labe	COCTOMY DOD MID DOLLD	F OF THE WID	OWS,		
Otherw	ise, C/O T. GRANGE SIMONS			57-6021772	
prin	Number and street (or P O box number if mail is not de	livered to street address)	Room/suite	B Telephone number	
or typ	ESS DEMNETT DIKEET			843-849-16	72
See Spe	City or town state and ZIP code			C If exemption application is p	
Instruct	IONS I	9464		D 1. Foreign organizations	
H Chec	k type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	eeting the 85% test,
_		Other taxable private found	ation		·
	narket value of all assets at end of year J Accounting		Accrual	E If private foundation sta under section 507(b)(1)	
	· I —	her (specify)			
▶ \$	1,479,658. (Part I, colu	mn (d) must be on cash i	basis)	F If the foundation is in a under section 507(b)(1)	
	Analysis of Revenue and Expenses				(d) Disbursements
Tart	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		1,975.			(cash basis only)
	Contributions, gifts, grants, etc., received	1,913.			-
2	Check \(\bigset \bigset \left\) if the foundation is not required to attach Sch. B interest on savings and temporary	242	242	1 242	CM 2 MTD / TD 7 M
3	cash investments	342.	342		STATEMENT 1
4	Dividends and interest from securities	60,622.	43,973	. 60,622.	STATEMENT 2
5	a Gross rents				
	Net rental income or (loss)				
<u>o</u> 6	Net gain or (loss) from sale of assets not on line 10	<1,716.	<u> </u>		
Revenue 7	Gross sales price for all assets on line 6a 205, 228.				
<u>8</u> 7	Capital gain net income (from Part IV, line 2)		0		
E 8	Net short-term capital gain	•		850.	
9	Income modifications Gross sales loss round				
10:	Gross sales loss torths				
ہ	Less Orsi organis sold				
1	Gross profit or (Igss) 2010 (a)				
11	Other incomed				
<u>⊇ 12</u>	Total Add lines 1 through 11	61,223.	44,315	. 61,814.	
13	Compensation of officers threatons, trustees, etc	0.	0	. 0.	0.
14	Other employee salaries and wages	-			
≃ 15	Pension plans, employee benefits				
>- 8 16a	a Legal fees STMT 3	2,565.	2,565	. 0.	0.
T. ⊬ I	Accounting fees STMT 4	875.	875		T
2 X	Other professional fees				
9 17	Interest	_			
Operating and Administrative Exper	Taxes STMT 5	2,283.	0	. 0.	0.
19	Depreciation and depletion			1	
E 20	Occupancy	-			
\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Travel, conferences, and meetings			<u> </u>	
Ð 2	Printing and publications		<u></u>		
E 22	• .	225		. 0.	
ED 23	Other expenses STMT 6	325.	0	• 0 •	0.
E 24		5 040	2 440		
Ğ	expenses. Add lines 13 through 23	6,048.	3,440	. 0.	0.
25	Contributions, gifts, grants paid	152,845.			152,845.
26	•	4		=	
	Add lines 24 and 25	158,893.	3,440	. 0.	152,845.
27	Subtract line 26 from line 12:	_			
1	Excess of revenue over expenses and disbursements	<u> </u>			
1	Net investment income (if negative, enter -0-)		40,875		
	Adjusted net income (if negative, enter -0-)			61,814.	
923501 02-02-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruct	tions.		Form 990-PF (2009)

SOCIETY FOR THE RELIEF OF THE WIDOWS, Form 990-PF (2009) C/O T. GRANGE SIMONS 57-6021772 Page 2 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 49.724 8,045 8,045. 2 Savings and temporary cash investments 3 Accounts receivable > - - - -Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 845,164. 778,444. 968,321. b Investments - corporate stock STMT 7 376,698. c Investments - corporate bonds STMT 8 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 9 102,533. 246,821 245,959. 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 1,374,119. 1,277,359. 1,479,658. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 22 Other liabilities (describe

				1
	23	Total liabilities (add lines 17 through 22)	0.	0.
		Foundations that follow SFAS 117, check here		
		and complete lines 24 through 26 and lines 30 and 31.		
Se	24	Unrestricted		
lan	25	Temporarily restricted		
Ba	26	Permanently restricted		
Assets or Fund Balances		Foundations that do not follow SFAS 117, check here		_
ī		and complete lines 27 through 31.		
S O	27	Capital stock, trust principal, or current funds	1,374,119.	1,277,359.
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.
Net	30	Total net assets or fund balances	1,374,119.	1,277,359.
_	21	Total liabilities and not assets/fund balances	1 374 119	1 277 359

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	1,374,119.
2	Enter amount from Part I, line 27a	2	<97,670.>
3	Other increases not included in line 2 (itemize) BASIS AJE	3	910.
4	Add lines 1, 2, and 3	4	1,277,359.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,277,359.

.031403 1,406,974. 5 <u>44,183.</u> 409. 6 44,592. 7 152,845. If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Form **990-PF** (2009)

Add lines 5 and 6

See the Part VI instructions.

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

Enter qualifying distributions from Part XII, line 4

SOCIETY FOR THE RELIEF OF THE WIDOWS, Form 990-PF (2009) C/O T. GRANGE SIMONS 57-6021772 Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 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% 409. -of-Part I,-line 27bc All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 1,560. 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 1,560. 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 1.151. 10 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? Х 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 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 X X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? X 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 6 X 7 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) SC 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 X 8b

Form **990-PF** (2009)

10

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and add

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?

923551

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

0

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		<u> </u>
310112		
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 in	formation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc.	Expenses
1 N/A		
2		
3		
4		
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.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	_ 0.
		Form 990-PF (2009)

Page 8

P	art.X Minimum Investment Return (All domestic foundations must complete this part. Foreign f	oundations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	_ _18 _	1_,428,400.
	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,428,400.
е			
	1c (attach detailed explanation)).	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,428,400.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	21,426.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,406,974.
6	Minimum investment return. Enter 5% of line 5	6	70,349.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here X and do not complete this part.)	s and certain	
1	Minimum investment return from Part X, line 6	1	
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	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	152,845.
þ	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	<u>152,845.</u>
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	409.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6_	152,436.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	on qualifies for	the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part,XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		<u> </u>		
line 7				0.
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				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from		- · · · · · · · · · · · · · · · · · · ·		
Part XII, line 4: ► \$ N/A				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior			<u> </u>	100
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	0.			0.
e Remaining amount distributed out of corpus	0.			
_ ' ' ' ' ' ' ' '	0.			0.
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			
6 Enter the net total of each column as indicated below:				
2 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	-	•		
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line		<u></u>		· · · · · · · · · · · · · · · · · · ·
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
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.			
O Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009	}			
9 EA0033 II O III E 0 0 3				Form 990-PF (2009)

NONE

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

ANY WRITTEN LETTER STATING DETAILS OF NEED AND AMOUNT REQUESTED

NONE

29 HASELL STREET, CHARLESTON, SC 29401

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

923601 02-02-10

Form **990-PF** (2009)

c Any submission deadlines:

57-6021772 Page 11

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the	Year or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	_ Amount _
Name and address (home or business)	or substantial contributor	status of recipient	· - · - · -	
a Paid during the year				
				ĺ
				1
ann am marana 10				
SEE STATEMENT 10				152 045
Total	-		▶ 3a	152,845.
b Approved for future payment				
NONE				
110112				
		}		
		ļ		
		!		
	<u> </u>			
Total			▶ _3b	0.
923611 02-02-10			Fe	orm 990-PF (2009)

Part XVI-A	Analysis 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	(c) Exclu- sion code	(<u>d)</u> _ Amount	_Related or exempt function income
a					
b					
				<u> </u>	
f					
		·			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash				240	
investments			14	342.	
4 Dividends and interest from securities			14	60,622.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property				<u> </u>	
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<1,716.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
_]				
		-			
		· · · · · ·			
<u> </u>					· ·
d					
e	-			FO 240	
12 Subtotal. Add columns (b), (d), and (e)	l	0.		59,248.	
13 Total. Add line 12, columns (b), (d), and (e)				13	59,248.
(See worksheet in line 13 instructions to verify calculations.)					<u></u>
Part XVI-B Relationship of Activities to	the Acco	mplishment of Ex	emp	t Purposes	
				<u> </u>	
Line No. Explain below how each activity for which incom			contrib	uted importantly to the accon	plishment of
the foundation's exempt purposes (other than b	y providing fur	ids for such purposes).			
					· · · · · · · · · · · · · · · · · · ·
				<u> </u>	
					
					<u> </u>
				<u> </u>	
	 				
					
					
					
				<u> </u>	
					·

Form 990-	PF (2009) C/O T	. GRANGE SIM			021772 Page 13
	Exempt Organ				
1 Did t	he organization directly or indi	rectly engage in any of the fo	llowing with any other organization	described in section 501(c) of	Yes No
		• • • •	ion 527, relating to political organiz	ations?	
	sfers from the reporting found	ation to a noncharitable exen	npt organization of:		
(1)					1a(1) X
	Other assets				1a(2) X
	r transactions:	hl			1,40
	Sales of assets to a noncharita Purchases of assets from a no		hon		1b(1) X
• •	Rental of facilities, equipment,		liUii		1b(2) X 1b(3) X
	Reimbursement arrangements				1b(4) X
	Loans or loan guarantees	•			1b(5) X
	Performance of services or me	embership or fundraising soli	citations		1b(6) X
	ing of facilities, equipment, ma	•			1c X
	• • • • • •	•	, -	ys show the fair market value of the go	
				in any transaction or sharing arrangem	
colu	nn (d) the value of the goods,	other assets, or services reci	eived.		
(a) Line no	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Description of transfers, transactions	s, and sharing arrangements
		N,	/A		
					_
					····
			<u>_</u>		
	<u> </u>				
- la 4b		Ab		<u> </u>	· · ·
ın se	e roundation directly or indirection 501(c) of the Code (othe es," complete the following sch	r than section 501(c)(3)) or i	o, one or more tax-exempt organizal n section 527?	tions described	Yes X No
	(a) Name of org		(b) Type of organization	(c) Description of rela	tionship
	N/A				
					· · · · · · · · · · · · · · · · · · ·
and co	mplete Declaration of preparer (other		g accompanying schedules and statemen sed on all information of which preparer ha	ts, and to the best of my knowledge and belies any knowledge Chair Tox Comm	4_
S	ignature of officer or trustee	- ,	Date /	Title	
Sign Here	Preparer's signature	Mo	Hood Of S.	e Check if self- employed ►	reparer's identifying number

843-884-1099

HOOD & SELANDER, CPAS, LLC

,856 LOWCOUNTRY BLVD, SUITE 100

SC 29464

EIN ▶

Phone no.

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH II	NVESTMENTS	STATEMEN	r 1
SOURCE			-			AMOUN'	r
UBS 03524							342.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMIN A				342.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMEN	r 2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN AMOUN	
UBS 03524 UBS 03524 - MUNI UBS 03524 - OTHER	•		41,513. 16,649. 2,460.		0. 0. 0.	16	,513. ,649. ,460.
TOTAL TO FM 990-PF, PART I,	LN 4		60,622.		0.	60	,622.
FORM 990-PF		LEGAL	FEES			STATEMENT	r 3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		'ABLE
LEGAL FEES		2,565.	2	,565.	-	0.	0.
TO FM 990-PF, PG 1, LN 16A		2,565.	2	,565.		0.	0.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	۲ 4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC	EST-			ABLE
TAX RETURN PREP		875.		875.		0.	0.
TO FORM 990-PF, PG 1, LN 16B		875.		875.		0.	0.

FORM 990-PF	TAXES				STATEMENT		5
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVES		(C) ADJUSTEI NET INCOM		(D) CHARITA PURPOSI	
FEDERAL TAXES	2,283.		0.		0.		0.
TO FORM 990-PF, PG 1, LN 18	2,283.		0.		0.		0.
FORM 990-PF	OTHER E	XPENSES			SI	PATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTEI NET INCOM		(D) CHARITAI PURPOSI	
MISC ADMIN EXPENSES	325.		0.		0.		0.
TO FORM 990-PF, PG 1, LN 23	325.		0.		0.		0.
FORM 990-PF	CORPORAT	E STOCK			SI	ATEMENT	7
DESCRIPTION			вос	OK VALUE	FA	AIR MARKET VALUE	ר
UBS 03524		_		778,444.		968,32	21.
TOTAL TO FORM 990-PF, PART II	, LINE 10B			778,444.		968,32	21.
FORM 990-PF	CORPORAT	E BONDS			ST	ATEMENT	8
DESCRIPTION			вос	OK VALUE	FA	IR MARKET	ŗ
UBS 03524				244,049.		257,33	33.
TOTAL TO FORM 990-PF, PART II	, LINE 10C	_		244,049.		257,33	33.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
UBS 03524	COST	246,821.	245,959.
TOTAL TO FORM 990-PF, PART I	I, LINE 13	246,821.	245,959.
	ANTS AND CONTRIBUTION PAID DURING THE YEAR	18	STATEMENT 10
RECIPIENT NAME AND ADDRESS	RECIPIENT RELA AND PURPOSE C		
DIOCESE OF SOUTH CAROLINA	NONE CHARITY	OTHER PUBLIC CHARITY	1,250.
DIOCESE OF UPPER SC	NONE CHARITY	OTHER PUBLIC CHARITY	825.
MRS CORNELIUS WHITE WASHINGTON, DC	NONE MEDICAL AND LIV EXPENSE	N/A 'ING	20,320.
MRS DOTTIE OLLIC ST STEPHENS, SC	NONE MEDICAL BILLS	N/A	13,500.
MRS MARIE MAGEE CHARLESTON, SC	NONE MEDICAL BILLS	N/A	750.
REV MARCUS KAISER	NONE MEDICAL AND LIV EXPENSE	N/A 'ING	3,500.

SOCIETY FOR THE RELIEF OF T	THE WIDOWS, C/		57-6021772
REV WILLIAM BREEDLOVE	NONE MEDICAL AND LIVING EXPENSE	N/A	3,500.
REV ROBERT KUNES NASHOTAH, WI	NONE MEDICAL AND LIVING EXPENSE	N/A	3,500.
MRS DOROTHY FERREYHAUGH REIDSVILLE, NC	NONE MEDICAL AND LIVING EXPENSE	N/A	15,000.
MR. DAGNELL FREE	NONE MEDICAL AND LIVING EXPENSE	N/A	3,500.
REV GRAIG STEPHANS AMBRIDGE, PA	NONE LIVING EXPENSE	N/A	1,000.
MRS. MARGARET SNOW ORANGEBURG, SC	NONE MEDICAL AND LIVING EXPENSE	N/A	28,200.
REV IRVIN RICHARDS CHARLESTON, SC	NONE MEDICAL AND LIVING EXPENSE	N/A	5,000.
MRS. VIRGINIA WEAVER SUMMERVILLE, SC	NONE MEDICAL AND LIVING EXPENSE	N/A	15,000.
REV TED LEWIS	NONE MEDICAL AND LIVING EXPENSE	N/A	8,000.
BISHOP GADSDEN CHARLESTON, SC	NONE LIVING EXPENSE FOR RETIRED CLERGY	N/A	30,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A			152,845.