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Form **990-EZ**

Short Form

OMB No 1545-1150

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file
Form 990 All other organizations with gross receipts less than \$500,000 and total assets
less than \$1,250,000 at the end of the year may use this form

The comparation may have to use a case of the return is stately after reporting recovered to ST \$100	Department of the Treasury Form 990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form					Open to Public				
B Creek disapleable National Section (Appleable National S	Inte	nal Revenue Service	The organization may have to use a copy of this return to satisfy state reporting requirements							
Receive Company Plant Pl	Α	For the 2009 calen	dar year, or tax year beginning Jun 1 , 2009, and en	nding May 31		, 2010				
Section State Section	В			Dε	mployer	identification number				
Transactionage mining Part		Address change use	RS Aiken Electric Trust		57-13	109736				
Termination personnel Position Positio	_	prin		m/suite E T	elephone	number				
**Section 591(CX) organizations and 4947(a/1) nonexempt charitable trusts must attack a completed Schedule A (Form 990 or 990-EZ). **Section 591(CX) organizations and 4947(a/1) nonexempt charitable trusts must attack a completed Schedule A (Form 990 or 990-EZ). **Website: ** N/A Tax-exempt tattus (cleak only one) — X 501(c) (3) = ((next no. 504(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. After (Specify) ** K Check ** If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. After 70m 990-EZ or form 990 returns not required, but if the organization chooses to file a cretipate return \$25,000. After 70m 990-EZ or form 990 returns not required, but if the organization chooses to file a cretipate return form \$25,000. After 70m 990-EZ or form 990 returns a considerable form 990 returns \$25,000. After 70m 990-EZ or form 990-E	-	Initial return type	<u>.</u>		(803)	649-6245				
**Section 501(C/X) organizations and 4947(s/X)1) nonexempt charitable trusts **Section 501(C/X) organizations and 4947(s/X)1) nonexempt charitable trusts **Section 501(C/X) organizations and 4947(s/X)1) nonexempt charitable trusts **Other (specify)	\vdash	Spe	cific City or town state or country, and ZIP + 4							
* Section 501(x(3) organizations and 4947(x(1)) nonverent charitable trusts Website: N/A Moderate Moder	-	Ition	s							
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Website: ► N/A Tax-exempt statis (check only one)			attach a completed Schedule A (Form 990 or 990-EZ).	Other (specify)						
Tax-exempt status (check only one)		144.1 .24. S 37 /76								
See Contributions Contri	١.		V 504 2 2 2 4 1 2 10474 242 507			edule B (Form 990,				
\$25,000 Å Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return and add lines \$5, 65, and 75, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990	<u></u>			i i						
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I So, 340.	K	\$25,000 A Form 9	organization is not a section 509(a)(3) supporting organization and its gr 90-EZ or Form 990 return is not required, but if the organization choose	ross receipts are nor es to file a return, be	sure to	of more than of file a complete return				
1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 3 4 50, 340.	L			orm 990	► \$	50,340.				
2 Program service revenue including government fees and contracts 3 3 3 4 4 4 4 4 4 4	Pa	ırt I Revenu	ie, Expenses, and Changes in Net Assets or Fund Balanc	es (See the inst	ructio	ns for Part I)				
## A Investment income ## Factors amount from sale of assets other than inventory ## Bess. cost or other basis and sales expenses ## Cann or (loss) from sale of assets other than inventory ## Bess. cost or other basis and sales expenses ## Cann or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) ## Cann or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) ## Cann or (loss) from sale of assets other than fundraising expenses ## Cann or (loss) from special events and activities (Subtract line 6b from line 6a) ## A Gross sales of inventory, less returns and allowances ## B Intervenue (describe ► ## Other revenue (describe ► ## Otal revenue, Add lines 1, 2, 3, 4, 50 fec. 10 feb. 10 f		1 Contributions	s, gifts, grants, and similar amounts received		1	50,340.				
4 Investment income 5a Gross amount from sale of assets other than inventory b Less, cost or other basis and sales expenses c Sam or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) a Gross revenue (not including) c C Sam or (loss) from special events and activities (complete applicable parts of Schedule 6) If any amount is fromgaming, check here a Gross revenue (not including) reported on line 1) b Less direct expenses other than fundraising expenses c Net innome or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe + 9 Total revenue. Add lines 1, 2, 3, 4, 56-66. 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employed page fits 7, 2010 13 Professional fees and other payments 16 independent contractors 12 13 Professional fees and other payments 16 independent contractors 12 14 Occupancy, rent, utilities, and maintelpance 15 Printing, publications, postage, and shipping 15 Printing, publications, postage 16 Printing, publications, postage 17 Printing, publications, postage 18 Printing, publications, postage 19 Printing, publications, postage 19 Printing, publications postage, and shipping 19 Printing, publications, pos		2 Program ser	vice revenue including government fees and contracts		2					
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

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	990-EZ(2009) Aiken			(C = 4b ==4		-110	09736 Page 2
			rvice Accomplishments	 	ons.)	(Reg	Expenses uired for section
			aritable Community		noico mannor	l 501 <i>(</i>	c)(3) and (4)
descr	ibe the services provided	d, the number of	e organization's exempt purp persons benefited, or other	relevant information for	each	4947	nizations and section (a)(1) trusts, optional
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			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		Х
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), butnot reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
i	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and proxy tax requirements?	35 a		X
1	b If 'Yes,' has it filed a tax return onForm 990-T for this year?	35 b		
	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
	a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0. b Did the organization file Form 1120-POL for this year?	37 b		Χ
38	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employeer were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		Х
ı	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b	;		
39	Section 501(c)(7) organizations Enter			
	a Initiation fees and capital contributions included on line 9	-		
	b Gross receipts, included on line 9, for public use of club facilities 39b			
40 :	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ►, section 4912 ►, section 4955 ►			
ı	b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40 b		Х
	c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		,	
	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization	_		
•	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		Х
41	List the states with which a copy of this return is filed South Carolina	1400	·	
42	a The organization's books are in care of ► Aiken Electric Cooperative, Inc. Telephone no ► (803) Located at ► P.O. Box 417 Aiken SC ZIP + 4 ► 29802	_ <u>64</u> 9	<u>-62</u> 4	15
	h At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country▶	42 b		Х
,	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S ?	42 c		Х
	If 'Yes,' enter the name of the foreign country ►			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu oForm 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		► ☐ Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44	162	Х
45				_^_
73	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		Х

Forn	n 990-EZ (2009) Aiken Electric Tru	st			57-1109	9736	F	age 4
	Section 501(c)(3) organization 501(c)(3) organizations and se 46-49b and complete the table	s and section 4947 ction 4947(a)(1) no	nexempt cha	empt ritable	charitable trusts onle trusts must answer	y. All se questic	ection	<u> </u>
46	Did the organization engage in direct or indire	ect political campaign a	ctivities on beha	If of or	in opposition to candidate		Yes	No
47	for public office? If 'Yes,' complete Schedule Did the organization engage in lobbying activ		Sabadula C. Da	~4 II		46		X
48	Is the organization a school as described in s	•	•		udula F	48		X
	Did the organization make any transfers to ar				duic L	49 a		$\frac{\lambda}{X}$
	of Yes,' was the related organization a section	· · · · · · · · · · · · · · · · · · ·	rolatou organiza	a		49 b		
	Complete this table for the organization's five employees) who each received more than \$1	highest compensated e	employees (othe from the organi	r than o zation	officers, directors, trustee If there is none, enter 'N	s and key one '		
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensal	tion	(d) Contributions to employee benefit plans and deferred compensation	àccoi	kpense int and lowance	s
Nor	ne	-		-				-
		-						
	• • • • • • • • • • • • • • • • • • •	-						
1	Total number of other employees paid over \$	100,00Q >	I		<u> </u>			
51	Complete this table for the organization's five compensation from the organization. If there	highest compensated i is none, enter 'None '	ndependent con	tractors	who each received more	e than \$10	00,000	of
	(a) Name and address of each independent con	ractor paid more than \$100,000)		(b) Type of service	(c) Com	pensatio	n
Noi	ne							
	i Total number of other independent contractor	s each receiving over ¢	100 000					
,	a rotal mamber of other macpendent contractor	5 cach receiving over \$	100,000					

d Total	number of other independent contractors each receiving over \$100,000	>	·····
Sign Here	Under penalties of perjury, I declare that I have examined his return, including accompaning strue, correct, and complete Deceration of preparer other than otherwise based on all promatitions. Signature of officer Type or print name and title	or of which preparer has a	and to the best of my knowledge and belief, it is iny knowledge 8-23-16 ate
Paid	Preparer's signature	Date	Check if self-employed Preparer's Identifying Number (See instructions)
Pre- parer's Use Only	Firm's name (or yours if self employed), address, and ZIP + 4		EIN Phone no
May the IR	S discuss this return with the preparer shown above? See instructions	-	► Yes No
BAA			Form 990-EZ (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **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 **2009**

Open to Public Inspection

Employer identification number Name of the organization 57-1109736 Aiken Electric Trust Partil 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) 1 A church, convention of churches or association of churches described insection 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described insection 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described insection 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described irsection 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 Х in section 170(b)(1)(A)(vi). (Complete Part II) ጸ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Sesection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) Sesection 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h d | Type III- Other Type III – Functionally integrated c By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) 11 g (ii) a family member of a person described in (i) above? a 35% controlled entity of a person described in (i) or (ii) above? 11 g (in) Provide the following information about the supported organizations h (iv) is the anization in col listed in your (v) Did you notify the organization in col (i) of (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (vi) Is the (vii) Amount of Support (i) Name of Supported Organization (ii) EIN organization in col (i) organized in the your support? governing document? No Yes No Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2009

Page 2

Part II 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) ► (e) 2009 (a) 2005 (b) 2006 (c) 2007 (d) 2008 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 76,551. 38,808. 31,452 27,119 50,340. 224,270. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge 76,551 38,808 31,452 27,119 50,340 224,270. 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 5 224,270. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 50,340 76,551 38,808 27,119 224,270. 7 Amounts from line 4 31,452 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form sımılar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of čapital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 224,270. Gross receipts from related activities, etc. (see instructions) 12 12 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 14 100.00% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 100.00% 16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the 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 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 top 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 andtop 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 18

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in)▶ (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the vear c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10 a Gross income from interest. dividends, payments received on securities loans, rents. rovalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, 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) 13 Total support. (add ins 9, 10c, 11, and 12) 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 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form 990 or 9	990-EZ) 2009	Aiken	Electi	ric Tru	<u>s</u> t		57-11	09736	Page 4
Par IV	Supplemen Part II, line	tal Informa 17a or 17b	ation. Col ; and Pa	nplete th rt III, line	is part to 12. Pro	provide vide any	the explanat other addition	57-11 ions required by nal information.	Part II, line 1 See instruction	0; ons
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						-				
										
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			- -	 -						

Other Assets and Liabilities

2009

Name as Shown on Return	Employer Identification No
Aiken Electric Trust	57-1109736

Line 24 - Other Assets:	Beginning of Year	End of Year
Contributions Receivable	4,247.	10,720.
Totals to Form 990-EZ, Part II, line 24	4,247.	10,720.
Line 26 - Total Liabilities:	Beginning of Year	End of Year
Totals to Form 990-EZ, Part II, line 26		

TEEW1801 SCR 02/11/10

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid

							
Purpose of Payr	ment	Charitable					
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family & Individua	l As	Business Person X Ada Toole	N/A				
				600.			
		n cash was given, the following additional in rty		provided·			
Book Value		How Book Value Determined					
FMV		How FMV Determined					
Purpose of Payr	nent	Charitable					
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family 6 Individual As		Business Person X Alice Butler	N/A	-			
				546.			
		n cash was given, the following additional in		provided			
Book Value		How Book Value	Determined				
FMV		How FMV Determined					
Purpose of Payr	nent	Charitable					
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family & Individua	l As	Business Person X Betty Oliver	N/A	-			
				325.			
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided			
Book Value		How Book Value	Determined				
FMV		How FMV Det	ermined				

Form 990-EZ, Part I, Line 10	
Grants and Similar Amounts	Paid

		Amounts i did					
Purpose of Payr	nent	Charitable					
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family & Individual As		Business Person X Beverly Gartman	N/A	-			
				1,240.			
If property other Description of P Date of Gift		n cash was given, the following additional in		provided [.]			
Book Value		How Book Value Determined					
FMV		How FMV Determined					
Purpose of Payr	nent	Chartiable					
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family & Individua	l As	Business Person X Bill Glanton	N/A	-			
				1,500.			
If property other Description of Pi Date of Gift		n cash was given, the following additional in	nformation needs to be	provided [.]			
Book Value		How Book Value	Determined				
FMV		How FMV Det	ermined				
Purpose of Payn	nent	Charıtable					
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family & Individual	l As	Business Person X Bobby Smith	N/A	-			
	_			1,017.			
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided			
Book Value		How Book Value	Determined				
FMV		How FMV Det	ermined				

		•	.,	
Grants	and	Similar	Amounts	Paid

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Purpose of Paym	ent	Charitable			
Class of Activity	y	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual	As	Business Person X Brody Johnson	N/A	-	
				500.	
If property other to Description of Pro Date of Gift		n cash was given, the following additional in rty		provided	
Book Value		How Book Value Determined			
FMV		How FMV De	termined		
Purpose of Paym	nent	Charitable			
Class of Activity	y	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual	As	Business Person X Carolyn Favers	N/A	_	
				500.	
		n cash was given, the following additional in		provided [.]	
Book Value		How Book Value	Determined		
FMV		How FMV De	termined		
Purpose of Paym	 nent	Charitable			
Class of Activit	y	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual	As	Business Person X Carolyn Williams	N/A		
				519.	
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided	
Book Value	How Book Value Determined				
FMV		How FMV Determined			

Form	990-E	ΞZ, F	Part I	, Line 1	0	
_				_	_	

Grants and Simil	ar A	amounts Paid		
Purpose of Paym	ent	Charitable		
Class of Activity	ass of Activity Grantee's Name and Address		Grantee's Relationship	Amount Given
Family & Individual	As	Business Person X Chemika Smith	N/A	1,000.
If property other to Description of Pro Date of Gift		cash was given, the following additional in	nformation needs to be	brovided.
Book Value		How Book Value	Determined	, , , , , ,
FMV		How FMV Det	ermined	
Purpose of Paym	ent	Charitable		
Class of Activity	y	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual	As	Business Person X Connie Strap	N/A	_
				349.
If property other to Description of Pro Date of Gift		n cash was given, the following additional in	nformation needs to be	provided:
Book Value		How Book Value	Determined	
FMV		How FMV De	termined	· · · · · · · · · · · · · · · · · · ·
Purpose of Paym	nent	Charitable		
Class of Activity	у	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual	As	Business Person X Crystal Campbell	N/A	
If property other to Description of Pro Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid

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Purpose of Payn	nent	Charitable				
Class of Activit	Activity Grantee's Name and Address		Grantee's Relationship	Amount Given		
Family & Individual	l As	Business Person X Cynthia Brown	N/A	145.		
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be			
Book Value	<u>.</u>	How Book Value Determined				
FMV		How FMV Det	ermined			
Purpose of Payn	nent	Charitable				
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given		
Family & Individua	l As	Business Person X David William Charley	N/A	848.		
If property other Description of P Date of Gift Book Value		n cash was given, the following additional in rty		provided [.]		
FMV		How FMV Det	ermined			
l Purpose of Payr		Charitable				
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given		
Family & Individua	l As	Business Person X Deana Roberts	N/A	_		
				500.		
If property other Description of Po Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.		
Book Value	How Book Value Determined					
FMV		How FMV Determined				

Form	990-	ΕZ,	Part	I, Lin	e 10	
_				_	_	

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Grants and Simi	lar A	Amounts Paid			
Purpose of Paym	nent	Charitable			
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual	l As	Business Person X Detria Holmes	N/A	300.	
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided	
Book Value		How Book Value	Determined		
FMV		How FMV Det	termined		
Purpose of Payn	nent	Charitable			
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual	l As	Business Person X Drew Ward	N/A	480.	
If property other Description of Pr Date of Gift		n cash was given, the following additional in		provided	
Book Value		How Book Value	Determined		
FMV		How FMV Def	termined		
Purpose of Payn	nent	Charitable			
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual As		Business Person X Elizabeth Anderson	N/A	_	
				1,279.	
If property other Description of Pi Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.	
Book Value		How Book Value Determined			
FMV		How FMV Determined			

Aiken Electric Trust	57-1109/36		
Form 990-EZ, Part I, Line	10		
Grants and Similar Amou	nts Paid		
Purpose of Payment	Charitable		
		Grantee's	_

Purpose of Payr	nent	Charitable				
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given		
Family & Individua	l As	Business Person X Eugene Anderson	N/A	450		
				450.		
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be p	rovided.		
Book Value		How Book Value Determined				
FMV		How FMV Det	ermined			
Purpose of Payr	nent	Charitable				
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given		
Family & Individua	l As	Business Person X France Anderson	N/A			
				390.		
If property other Description of P Date of Gift		n cash was given, the following additional in	•	rovided:		
		_ 	_			
Book Value		How Book Value	Determined			
FMV		How FMV Det	ermined			
Purpose of Payr	nent	Charitable				
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given		
Family & Individua	l As	Business Person X Francis Prince	N/A			
				365.		
If property other Description of P Date of Gift		n cash was given, the following additional in	oformation needs to be p	rovided.		
Book Value		How Book Value	Determined			
FMV		How FMV Determined				

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid Purpose of Payment Charitable

Purpose of Payr	nent	Charitable		
Class of Activity Grantee's Name and Address		Grantee's Name and Address	Grantee's Relationship	Amount Given
		Business Person X Harry Owens	N/A	- 572
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Ida McKelvin	N/A	_
				1,000.
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided [.]
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Payr	nent	Charitable		
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X James Michael Williamson	N/A	-
				227.
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid

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Purpose of Paym	ent	Charitable		
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X James Oliver	N/A	- 012
				812.
		cash was given, the following additional in	nformation needs to be	provided.
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Paym	ent	Charitable		
Class of Activity	у	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Janice Duckson	N/A	_
				534.
		rtyHow Book Value		provided
			····	
FMV		How FMV Det	ermined	
Purpose of Paym	nent	Charitable		
Class of Activity	у	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X John Brock	N/A	
				500.
If property other to Description of Pro Date of Gift		n cash was given, the following additional in	nformation needs to be	provided:
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Aiken Electric Trus	st 57-1109736		
Form 990-EZ, Part Grants and Simila			Continue
Purpose of Payme	nt <u>Charitable</u>		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual A	Business Person X John Edwards	N/A	
			<u>653.</u>
If property other the Description of Proposet of Gift	an cash was given, the following additional in perty	nformation needs to be p	provided
Book Value	How Book Value	Determined	
FMV	How FMV De	termined	
I_ Purpose of Payme	nt <u>Charitable</u>		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual A	Business Person X John Miller	N/A	
			500.
If property other the Description of Propate of Gift	nan cash was given, the following additional in perty	nformation needs to be ந	provided.
Book Value	How Book Value	Determined	
FMV	How FMV De	termined	
Purpose of Payme	nt <u>Charitable</u>		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual A	Business Person X Johnathan VanBuskirk	N/A	
			785.
	an cash was given, the following additional i	nformation needs to be p	orovided.
Description of Pro	perty		

If property other Description of P Date of Gift	than cash was given, the following additional information needs to be provided roperty
Book Value	How Book Value Determined

How FMV Determined

FMV

Form 990-EZ, Part I, Line 10 **Grants and Similar Amounts Paid**

Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Johnny Bonham	N/A	528.
If property other Description of Po Date of Gift		n cash was given, the following additional in		
Book Value		How Book Value	Determined	
FMV		How FMV Det	termined	
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Joyce Harrison	N/A	_
	_			500.
If property other Description of P Date of Gift		n cash was given, the following additional in rty	nformation needs to be	provided
Book Value		How Book Value	Determined	
FMV		How FMV Det	termined	
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Kristen Ergle	N/A	
				1,000.
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided
Book Value	How Book Value Determined			
FMV		How FMV Determined		

Form	990-E	EZ, F	Part I	, Line 1	10	
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Grants and Simi	lar A	Amounts Paid		
Purpose of Payn	nent	Charitable		
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Layton Clegg	N/A	520.
If property other Description of Pr Date of Gift		n cash was given, the following additional in	offormation needs to be	provided.
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Payn	nent	Charitable		
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Leon Miller	N/A	105.
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.
Book Value		How Book Value	Determined	
FMV		How FMV De	termined	
Purpose of Payn	nent	Charitable		
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Lisa Cook	N/A	500.
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Form	990-EZ	, Part I,	Line 10
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Grants and Sini	iiai /	Amounts Faid			
Purpose of Payr	nent	Charitable			
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual As		Business Person X Mae Rice	N/A	700.	
If property other Description of Pi Date of Gift		n cash was given, the following additional in	nformation needs to be		
Book Value		How Book Value	Determined		
FMV		How FMV Det	termined		
Purpose of Payr	nent	Charitable			
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual As		Business Person X Maggie Harris	N/A	500.	
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.	
Book Value		How Book Value Determined			
FMV		How FMV Det	termined		
Purpose of Payr	nent	Charitable			
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual As		Business Person X Marion Quarles	N/A		
				_ 668.	
If property other Description of P Date of Gift		n cash was given, the following additional ii rty	nformation needs to be	provided [.]	
Book Value	How Book Value Determined				
FMV	How FMV Determined				

Form 990-EZ, Pa Grants and Simi				Continu
Purpose of Paym	nent	Charitable	***	
Class of Activit	y	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Margie Grice	N/A	500.
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided
Book Value	•	How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Payn	nent	Charitable		
Class of Activity		Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Marion Woodward	N/A	_
				350.
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided:
Book Value		How Book Value	Determined	
FMV		How FMV Det	termined	
Purpose of Payn	 nent	Charitable		
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Mary Sanders	N/A	_
				182.
If property other Description of Pr Date of Gift		n cash was given, the following additional in the cash was given as th	nformation needs to be	provided
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Form 990-EZ,	Part I, Line	10
Grants and Si	milar Amou	ınts Paid

			,	
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Michael Steele	N/A	_
				500.
		n cash was given, the following additional in rty		provided [.]
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Milas Jeffery Adams	N/A	500.
		n cash was given, the following additional in rty How Book Value		provided
FMV		How FMV Dei	ermined	
	l			
Purpose of Payr	nent	<u>Charitable</u>		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Pamela Bates	N/A	_
				500.
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided:
Book Value		How Book Value	Determined	
FMV	How FMV Determined			

Aiken Electric Tr	rust	57-1109736			
Form 990-EZ, Pa				Continue	
Purpose of Payn	nent	Charitable			
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual		Business Person X Pamela Delones Lanhan	N/A		
	-			500.	
If property other Description of Pr Date of Gift		cash was given, the following additional y	information needs to be p	provided.	
Book Value		How Book Value Determined			
FMV		How FMV Determined			
Purpose of Payr	nent	Charitable			
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individua		Business Person X Patricia Self	N/A		
				690.	
If property other Description of Po Date of Gift		cash was given, the following additional y	Information needs to be p	provided	
Book Value		How Book Value Determined			
FMV		How FMV De	etermined		
Purpose of Payr	nent	Charitable			
Class of Activi	ıtv	Grantee's Name and Address	Grantee's Relationship	Amount Given	

Purpose of Payment	Charitable		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As	Business Person X Pearlean Kitchings	N/A	-
			557.

				······································
Date of Gift				
Description of Property				_
ii property other than cas	sii was giveri, the follow	viriy additional illionna	tion needs to be bi	ovided.

Book Value	How Book Value Determined	
FMV	How FMV Determined	

Form 990-EZ, Part I, Line 10	
Grants and Similar Amounts Paid	

Durage of Dave		Charitable		
Purpose of Paym	nent	Charitable		
Class of Activit	y	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual	As	Business Person X Robert Enlow	N/A	_
				1,100.
If property other Description of Pr Date of Gift		n cash was given, the following additional in		provided
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Paym	nent	Charitable		
Class of Activit	y	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Ronnie Jackson	N/A	-
				500.
If property other Description of Pr Date of Gift		n cash was given, the following additional in rty		provided.
Book Value		How Book Value	Determined	
FMV		How FMV Det	ermined	
Purpose of Paym	nent	Charitable		
Class of Activit	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual	As_	Business Person X Ruth Zimmerman	N/A	_
				300.
If property other Description of Pr Date of Gift		n cash was given, the following additional in	nformation needs to be	provided
Book Value		How Book Value	Determined	.
FMV	How FMV Determined			

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Grants and Sim	ilar <i>i</i>	Amounts Paid		
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Sara G. Reno	N/A	
				400.
If property other Description of P Date of Gift		n cash was given, the following additional in rty	nformation needs to be	provided.
Book Value		How Book Value	Determined	
FMV		How FMV De	termined	· · · · · · · · · · · · · · · · · · ·
Purpose of Payr	nent	Charitable	***	
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Sarah Martino	N/A	
				454.
If property other Description of P Date of Gift		n cash was given, the following additional in try		provided
Book Value		How Book Value	Determined	
FMV		How FMV De	termined	
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Sarah Percival	N/A	_
				254.
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.
Book Value		How Book Value	Determined	
FMV	How FMV Determined			

Aiken Electric Tru	st 57-1109736			
Form 990-EZ, Par Grants and Similar			Continue	
Purpose of Payme	ent <u>Charitable</u>			
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given	
Family & Individual	Business Person X Shevron Glover	N/A		
		-	500.	
	han cash was given, the following additional operty		provided.	
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Description of P Date of Gift	rope						
Book Value		How Book Value Determined					
FMV		How FMV Determined					
Purpose of Payr	ment	Charitable					
Class of Activi	ıty	Grantee's Name and Address	Grantee's Relationship	Amount Given			
Family & Individua	ıl As	Business Person X Stephen C. Phillips	N/A	_			
				500.			
		n cash was given, the following additional in		provided.			
Book Value		How Book Value	Determined				
FMV		How FMV Determined					
Purpose of Payı	ment	Charitable					
Class of Activ	ıtv	Grantee's Name and Address	Grantee's Relationship	Amount Given			

Turpose of Fayment	CHAIICADIC		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As	Business Person X Teresa Stover	N/A	500.

If property other than cash was given, the following additional information needs to be provided Description of Property

Date of Gift

Date of diff	
Book Value	How Book Value Determined
FMV	How FMV Determined

`. Aiken Electric Trust 57-1109736 Form 990-EZ, Part I, Line 10 Continued **Grants and Similar Amounts Paid** Purpose of Payment Charitable

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Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Thomas Morgan	N/A	500.
If property other Description of P Date of Gift		n cash was given, the following additional in	I. nformation needs to be	provided.
Book Value		How Book Value	Determined	
FMV		How FMV Det	termined	
Purpose of Payr	nent	Charitable	· · · · · · · · · · · · · · · · · · ·	
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Tiffancy Nicholson	N/A	400.
If property other Description of P Date of Gift		n cash was given, the following additional in	nformation needs to be	provided.
Book Value		How Book Value Determined		
FMV		How FMV Determined		
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual As		Business Person X Tonya Brown	N/A	300.
Description of P		n cash was given, the following additional in	I nformation needs to be	
Date of Gift	1			
Book Value		How Book Value Determined		
FMV	How FMV Determined			

. Aiken Electric Trust 57-1109736 Form 990-EZ, Part I, Line 10 Continued **Grants and Similar Amounts Paid** Purpose of Payment Charitable Grantee's Amount Given Class of Activity Grantee's Name and Address Relationship X Person Business Valeria M. Davis N/A Family & Individual As 288. If property other than cash was given, the following additional information needs to be provided. Description of Property Date of Gift Book Value How Book Value Determined **FMV** How FMV Determined Purpose of Payment Charitable

Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Venus Rowe	N/A	500
				500.
		n cash was given, the following additional in	nformation needs to be p	orovided.
Date of Gift			_	
Book Value		How Book Value Determined		
FMV		How FMV Determined		
Purpose of Payr	nent	Charitable		
Class of Activi	ty	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individua	l As	Business Person X Veronica Williams	N/A	228.
If property other Description of P		n cash was given, the following additional in rty		orovided.
Date of Gift				
Book Value	How Book Value Determined			
FMV	How FMV Determined			

Aiken Electric Trus	st 57-1109736		
Form 990-EZ, Part Grants and Simila			Continued
Purpose of Payme	nt <u>Charitable</u>		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual A	Business Person X Warren Holmes	N/A	500.
If property other th Description of Prop Date of Gift			provided.
FMV -	How Book Value Determined How FMV Determined		
Purpose of Payme	nt <u>Charitable</u>		
Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Family & Individual A	Business Person X Wayne Barr	N/A	
			500.

If property other than cash was given, the following additional information needs to be provided Description of Property		
Date of Gift		
Book Value	How Book Value Determined	

How FMV Determined

FMV

Supporting Statement of:

Form 990-EZ/Line 1

Description	Amount
Direct Public Support	50,340.
Total	50,340.

Supporting Statement of:

Form 990-EZ/Line 15

Description	Amount
General & Administrative	33.
Total	33.