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Form **990** Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except for a trust or private foundation)
 Department of the Treasury Internal Revenue Service
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No. 1545-0047
2009
 Open to Public Inspection

A For the 2009 calendar year, or tax year beginning **10/01/09**, and ending **09/30/10**

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

C Name of organization **THE CHILDREN'S TRUST FUND OF SC**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. BOX 11644
 City or town, state or country, and ZIP + 4
COLUMBIA SC 29211

D Employer identification number
57-0785431

E Telephone number
803-733-5430

G Gross receipts \$ **2,357,881**

F Name and address of principal officer:
JUSTIN STRICKLAND
1634 MAIN STREET
COLUMBIA SC 29211

H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) Are all affiliates included? ☐ Yes ☒ No
 If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c) (**3**) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: **SCCHILDREN.ORG**

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation **1984**

M State of legal domicile **SC**

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO PREVENT CHILD ABUSE, NEGLECT AND UNINTENTIONAL INJURIES BY PROMOTING HEALTHY, NURTURING RELATIONSHIPS BETWEEN CHILDREN AND ADULTS.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3** **16**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** **16**

5 Total number of employees (Part V, line 2a) **5** **12**

6 Total number of volunteers (estimate if necessary) **6** **93**

7a Total gross unrelated business revenue from Part VIII, column (C), line 12 **7a**

b Net unrelated business taxable income from Form 990-T, line 34 **7b** **0**

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,645,895	2,296,813
9 Program service revenue (Part VIII, line 2g)	16,814	13,796
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-164,430	21,751
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-9,659	-7,337
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,488,620	2,325,023
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	720,129	895,251
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	364,151	702,331
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 246,289		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	627,826	749,504
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,712,106	2,347,086
19 Revenue less expenses. Subtract line 18 from line 12	-223,486	-22,063
20 Total assets (Part X, line 16)	1,226,879	1,347,863
21 Total liabilities (Part X, line 26)	112,080	192,511
22 Net assets or fund balances. Subtract line 21 from line 20	1,114,799	1,155,352

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer **JUSTIN STRICKLAND** Date
 Type or print name and title **CHAIRMAN**

Paid Preparer's Use Only

Preparer's signature **BURKETT BURKETT & BURKETT CPAS PA** Date **01/18/11** Check if self-employed ☐ Preparer's identifying number (see instructions) **P00905863**

Firm's name (or yours if self-employed), address, and ZIP + 4 **PO BOX 2044 WEST COLUMBIA, SC 29171** EIN ▶ **57-0692602** Phone no ▶ **803-794-3712**

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2009)

NOV 07 2011 SCANNED NOV 14 2011

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

TO PREVENT CHILD ABUSE, NEGLECT AND UNINTENTIONAL INJURIES BY PROMOTING HEALTHY, NURTURING RELATIONSHIPS BETWEEN CHILDREN AND ADULTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☒ Yes ☐ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code.) (Expenses \$ **1,104,922** including grants of \$ **693,231**) (Revenue \$)
ENHANCED PUBLIC AWARENESS ABOUT THE PREVENTION OF CHILD ABUSE AND NEGLECT AND BUILT MOMENTUM FOR EFFECTIVE PARENT INVOLVEMENT AND DEVELOPMENT; PROVIDED POLICYMAKERS AND COMMUNITY STAKEHOLDERS WITH BENCHMARK INFORMATION REGARDING THE EDUCATIONAL, SOCIAL, ECONOMIC AND PHYSICAL WELL-BEING OF SOUTH CAROLINA'S CHILDREN. PROVIDED CBCAP GRANT FUNDING TO NINE ORGANIZATIONS TO SUPPORT PREVENTION PROGRAMS IN THE FOLLOWING AREAS: PARENTING EDUCATION AND SUPPORT; HOME VISITATION; CHILD FOCUSED SCHOOL BASED/NON SCHOOL BASED; COMMUNITY AWARENESS; MENTORING; FATHERHOOD; AND TRAINING. REGULARLY DISTRIBUTED INFORMATION REGARDING CHILD ABUSE PREVENTION INITIATIVES, ACTIVITIES AND LEGISLATION TO COMMUNITY STAKEHOLDERS STATEWIDE. PROVIDED PIRC GRANT FUNDING TO ORGANIZATIONS FOR

4b (Code.) (Expenses \$ **886,053** including grants of \$ **202,020**) (Revenue \$)
CAPACITY BUILDING, EDUCATION AND TRAINING. SUPPORTED AND EXPANDED A STATEWIDE NETWORK OF MORE THAN 50 ORGANIZATIONS AND AGENCIES DEDICATED TO PREVENTING CHILD ABUSE AND NEGLECT BY PROVIDING TECHNICAL ASSISTANCE AND QUARTERLY TRAININGS, I.E. GOVERNANCE, THE NEW "990," MARKETING, DEVELOPMENT, AND ADVOCACY TRAINING. PROVIDED SAFETY INFORMATION TO MORE THAN 10,000 FAMILIES AND CHILDREN THROUGH A SAFETY CALENDAR ABOUT WAYS TO PREVENT UNINTENTIONAL INJURIES. PARTNERED WITH THE DUKE ENDOWMENT, SC DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL (DHEC), THE BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA FOUNDATION, SOUTH CAROLINA FIRST STEPS TO SCHOOL READINESS, AND THE NURSE-FAMILY PARTNERSHIP NATIONAL SERVICE OFFICE TO SUPPORT THE STATEWIDE IMPLEMENTATION OF THE NURSE FAMILY PARTNERSHIP

4c (Code.) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **1,990,975**

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38 X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	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)?		X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	1a	16
b Enter the number of voting members that are independent	1b	16
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11a Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
☒ Own website ☐ Another's website ☐ Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ► **DEBRA WERDUNN** P O BOX 11644

COLUMBIA

SC 29211

803-744-4061

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JUSTIN STRICKLAND CHAIR	1.00	X		X				0	0	0
DAVID YEZBAK VICE CHAIR	1.00	X		X				0	0	0
AMY PUCHALSKI, M.D. MEMBER	1.00	X						0	0	0
CHESTER D. PALMER MEMBER	1.00	X						0	0	0
TOM MURPHY MEMBER	1.00	X						0	0	0
PATRICIA S. LAWTER MEMBER	1.00	X						0	0	0
MARY ANNE JACOBS MEMBER	1.00	X						0	0	0
KIM HUTZELL MEMBER	1.00	X						0	0	0
KARREN HILL GORDON MEMBER	1.00	X						0	0	0
JAMES FOWLES, III MEMBER	1.00	X						0	0	0
JANE FARRELL MEMBER	1.00	X						0	0	0
DEBORAH DUBOSE MEMBER	1.00	X						0	0	0
TERESA COLES MEMBER	1.00	X						0	0	0
JIM CLECKLER MEMBER	1.00	X						0	0	0
COLLEEN BOZARD MEMBER	1.00	X						0	0	0
JOE BOUKNIGHT MEMBER	1.00	X						0	0	0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c 91,877				
	d Related organizations	1d				
	e Government grants (contributions)	1e 1,950,662				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 254,274				
	g Noncash contributions included in lines 1a-1f \$	2,079				
	h Total. Add lines 1a-1f		2,296,813			
Program Service Revenue	2a CONFERENCES AND TRAINING	Busn. Code	12,296	12,296		
	b MEMBERSHIP DUES		1,500	1,500		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		13,796			
	3 Investment income (including dividends, interest, and other similar amounts)		20,518			20,518
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
Other Revenue	6a Gross Rents	(i) Real (ii) Personal				
	b Less: rental exps.					
	c Rental inc. or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets	(i) Securities (ii) Other				
	other than inventory	1,989				
	b Less: cost or other					
	basis & sales exps.	756				
	c Gain or (loss)	1,233				
	d Net gain or (loss)		1,233	1,233		
	8a Gross income from fundraising events (not including \$ 91,877 of contributions reported on line 1c) See Part IV, line 18	a	17,710			
	b Less: direct expenses	b	32,102			
	c Net income or (loss) from fundraising events		-14,392	-14,392		
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11a OTHER INCOME	Busn. Code	4,579	4,579		
	b REFUNDS OF TRAVEL EXPENSE		2,476	2,476		
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		7,055			
	12 Total Revenue. See instructions		2,325,023	7,692	0	20,518

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	895,251	895,251		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	651,056	518,916	42,424	89,716
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	51,275	40,672	3,404	7,199
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	25,495	24,820	675	
d Lobbying	1,875		1,875	
e Professional fundraising services. See Part IV, line 7				
f Investment management fees	8,650		8,650	
g Other	119,693	103,994	6,502	9,197
12 Advertising and promotion	120,672	10,254		110,418
13 Office expenses	61,630	45,198	3,979	12,453
14 Information technology	47,106	42,098	4,888	120
15 Royalties				
16 Occupancy	72,634	58,182	7,821	6,631
17 Travel	15,318	10,453	2,923	1,942
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24,472	21,561	2,453	458
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,533		2,533	
23 Insurance	56,219	41,172	10,670	4,377
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a MATERIALS FOR CONTRACT/ENVIRONMENTAL AWARENESS	90,508	88,101		2,407
b CAP AWARENESS	39,577	39,577		
c TRAINING	19,638	16,250	3,388	
d TELEPHONE	13,906	11,470	2,331	105
e DUES AND SUBSCRIPTIONS	11,756	6,083	4,758	915
f All other expenses	17,822	16,923	548	351
25 Total functional expenses. Add lines 1 through 24f	2,347,086	1,990,975	109,822	246,289
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form 990 (2009) **THE CHILDREN'S TRUST FUND OF SC** 57-0785431Page **11****Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	76,750	1	113,303
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	203,542	3	230,689
	4 Accounts receivable, net	112,616	4	99,209
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	17,724	8	19,350
	9 Prepaid expenses and deferred charges	15,302	9	15,046
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 7,500		
	b Less: accumulated depreciation	10b 6,180		
		3,850	10c	1,320
	11 Investments—publicly traded securities	797,095	11	868,946
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34).	1,226,879	16	1,347,863	
Liabilities	17 Accounts payable and accrued expenses	85,698	17	184,723
	18 Grants payable		18	
	19 Deferred revenue	26,382	19	7,788
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	112,080	26	192,511
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds	1,114,799	32	1,155,352
33 Total net assets or fund balances	1,114,799	33	1,155,352	
34 Total liabilities and net assets/fund balances	1,226,879	34	1,347,863	

Form **990** (2009)

Part XI Financial Statements and Reporting1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
1		
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2009)

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) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	41,354	484,935	1,033,083	1,645,895	2,296,813	5,502,080
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	41,354	484,935	1,033,083	1,645,895	2,296,813	5,502,080
5 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)						2,183
6 Public support. Subtract line 5 from line 4						5,499,897

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	41,354	484,935	1,033,083	1,645,895	2,296,813	5,502,080
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	47,750	47,233	61,662	12,281	20,518	189,444
9 Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			2,230	-9,659	6,738	-691
11 Total support. Add lines 7 through 10						5,690,833
12 Gross receipts from related activities, etc. (see instructions)					12	38,561
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	96.64 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	94.32 %
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>		

Part III 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 year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 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 ▶ <input type="checkbox"/>						

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 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

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 line 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 ▶ ☐

20 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 990-EZ) 2009 **THE CHILDREN'S TRUST FUND OF SC** **57-0785431** Page 4**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.**PART II, LINE 10 - OTHER INCOME DETAIL**

\$ -691

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities**

OMB No 1545-0047

2009**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

THE CHILDREN'S TRUST FUND OF SC

Employer identification number

57-0785431**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group.**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)	1,875													
c Total lobbying expenditures (add lines 1a and 1b)	1,875													
d Other exempt purpose expenditures	2,377,313													
e Total exempt purpose expenditures (add lines 1c and 1d)	2,379,188													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	268,959													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
g Grassroots nontaxable amount (enter 25% of line 1f)	67,240													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount			235,605	268,959	504,564
b Lobbying ceiling amount (150% of line 2a, column(e))					756,846
c Total lobbying expenditures			5,000	1,875	6,875
d Grassroots nontaxable amount			58,901	67,240	126,141
e Grassroots ceiling amount (150% of line 2d, column (e))					189,212
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

SCHEDULE C, PART II-A, EXPLANATION OF FOUR YEAR AVERAGING

THE ORGANIZATION HAD NO LOBBYING EXPENDITURES PRIOR TO CALENDAR YEAR 2008.

Part IV **Supplemental Information (continued)**

Schedule C (Form 990 or 990-EZ) 2009

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009**Open to Public
Inspection**

Name of the organization

Employer identification number

THE CHILDREN'S TRUST FUND OF SC**57-0785431****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area

☐ Protection of natural habitat ☐ Preservation of certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ _____ %
 b Permanent endowment ▶ _____ %
 c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		7,500	6,180	1,320
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,320

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,325,023
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,347,086
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-22,063
4	Net unrealized gains (losses) on investments	4	62,616
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	62,616
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	40,553

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	2,411,091
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	62,616
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	32,102
e	Add lines 2a through 2d	2e	94,718
3	Subtract line 2e from line 1	3	2,316,373
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	8,650
c	Add lines 4a and 4b	4c	8,650
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,325,023

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	2,370,538
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	32,102
e	Add lines 2a through 2d	2e	32,102
3	Subtract line 2e from line 1	3	2,338,436
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	8,650
c	Add lines 4a and 4b	4c	8,650
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,347,086

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - RECONCILIATION OF CHANGES - OTHER

AUDITED FINANCIALS INCLUDE FUNDRAISING COST AS EXPENSE	\$	32,102
INVESTMENT FEE SHOWN AS EXPENSE ON FORM 990	\$	-8,650
AUDITED FINANCIALS INCLUDE FUNDRAISING COST AS EXPENSE	\$	-32,102
INVESTMENT FEE SHOWN AS EXPENSE ON FORM 990	\$	8,650

PART XII, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

Part XIV Supplemental Information (continued)

AUDITED FINANCIALS INCLUDE FUNDRAISING COST AS EXPENSE \$ 32,102

PART XII, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER

INVESTMENT FEE SHOWN AS EXPENSE ON FORM 990 \$ 8,650

PART XIII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

AUDITED FINANCIALS INCLUDE FUNDRAISING COST AS EXPENSE \$ 32,102

PART XIII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

INVESTMENT FEE SHOWN AS EXPENSE ON FORM 990 \$ 8,650

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		PICASSO PROJECT (event type)		NONE (total number)	
Revenue	1 Gross receipts	109,587			109,587
	2 Less: Charitable contributions	91,877			91,877
	3 Gross revenue (line 1 minus line 2)	17,710			17,710
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	32,102			32,102
	10 Direct expense summary. Add lines 4 through 9 in column (d)				32,102
11 Net income summary. Combine line 3, column (d), and line 10				-14,392	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Combine line 1, column d, and line 7					

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities:		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain.		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain.		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in**a** The organization's facility**13a**

%

b An outside facility**13b**

%

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?**15a****b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$**c** If "Yes," enter name and address of the third party.

Name ▶

Address ▶

16 Gaming manager information.

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐

Director/officer

☐

Employee

☐

Independent contractor

17 Mandatory distributions:**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?**17a****b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

**SCHEDULE I
(Form 990)**Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2009**Open to Public
Inspection**

Name of the organization

Employer identification number

57-0785431**THE CHILDREN'S TRUST FUND OF SC****Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	COMMUNITIES IN SCHOOLS							
	1090 E MONTAGUE AVE							
	NORTH CHARLESTON SC 29405	57-0915384	3	35,848				
	FOOTHILLS ALLIANCE							
	216 E CALHOUN ST							
	ANDERSON SC 29621	57-0902073	3	10,473				
	GREENVILLE RAPE CRISIS &							
	2905 WHITE HORSE ROAD							
	GREENVILLE SC 29611	57-0655611	3	16,718				
	GREENVILLE COMMUNITY							
	113 LINER DRIVE							
	GREEDWOOD SC 29646	57-1049977	3	19,500				
	GREENVILLE COMMUNITY							
	113 LINER DRIVE							
	GREEDWOOD SC 29646	57-1049977	3	39,592				
	LIGHTHOUSE MINISTRIES							
	201 E ELM ST							
	FLORENCE SC 29506	57-1053700	3	31,061				
	PEE DEE COALITION AGAINST							
	P O BOX 1351							
	FLORENCE SC 29053	57-0830844	3	23,898				
	PREVENT CHILD ABUSE PICKENS COUNTY							
	1899 GENTRY MEMORIAL HWY							
	EASLEY SC 29640	57-0943670	3	40,129				
	PARENTS ANONYMOUS OF SC INC							
	1285 AVENUE G							
	NORTH CHARLESTON SC 29405	57-0672766	3	10,295				
2	Enter total number of section 501(c)(3) and government organizations							
3	Enter total number of other organizations							
								22

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

DAA

Schedule I (Form 990) 2009

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
REQUIRED AND REVIEWED BY THE CBCAP, PIRC AND EBHV PROGRAM OFFICERS.
REQUIRED AND REVIEWED BY THE CBCAP, PIRC AND EBHV EVALUATORS. WHEN
APPROPRIATE, THE CHILDREN'S TRUST FUND OF SOUTH CAROLINA'S FINANCE MANAGER
JOINED PROGRAM OFFICER ON SITE VISITS. FINAL REPORTS ARE SUBMITTED TO THE
FEDERAL/STATE ENTITY BY THE CHILDREN'S TRUST FUND OF SOUTH CAROLINA TO THE
SOUTH CAROLINA GENERAL ASSEMBLY.

**SCHEDULE I-1
(Form 990)**

 Department of the Treasury
Internal Revenue Service

Name of the organization

Continuation Sheet for Schedule I (Form 990)

 ▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

2009

 Open to Public
Inspection

Employer identification number

57-0785431
THE CHILDREN'S TRUST FUND OF SC
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH CAROLINA FIRST STEPS 1300 SUMTER ST SUITE 100 COLUMBIA SC 29201	57-1087576	3	202,020				
BEAUFORT COUNTY UNITED WAY P O BOX 202 BEAUFORT SC 29901	57-0405847	3	64,800				
GREENVILLE COUNTY SCHOOLS 111 LAURENS RD GREENVILLE SC 29607	57-6000234	GOV	64,800				
LEXINGTON SCHOOL DISTRICT ONE 100 TARRAR SPRINGS ROAD LEXINGTON SC 29072	57-0405847	GOV	64,257				
FLORENCE SCHOOL DISTRICT ONE 319 SOUTH DARGAN ST FLORENCE SC 29506	57-6000231	GOV	64,601				
CHARLESTON COUNTY SCHOOL DISTRICT 75 CALHOUN STREET CHARLESTON SC 29401	57-6000322	GOV	44,000				
CLEMSON UNIVERSITY G-06 SIKES HALL CLEMSON SC 29634	57-6000254	GOV	37,076				
CLOVER SCHOOL DISTRICT 2 604 BETHEL STREET CLOVER SC 29710	57-6003568	GOV	13,732				
FORT MILL SCHOOL DISTRICT 4 120 EAST ELLIOTT STREET FORT MILL SC 29715	57-6001032	GOV	16,198				
YORK SCHOOL DISTRICT ONE 1475 E. LIBERTY STREET YORK SC 29745	57-6003571	GOV	16,200				
ROCK HILL SCHOOL DISTRICT 3 660 N. ANDERSON ROAD ROCK HILL SC 29731	57-6000842	GOV	16,160				

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

Schedule I-1 (Form 990) 2009

DAA

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047

2009

Open to Public Inspection

► **Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.**

Name of the organization

Employer identification number

THE CHILDREN'S TRUST FUND OF SC

[illegible]

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

Schedule I-1 (Form 990) 2009

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

THE CHILDREN'S TRUST FUND OF SC

Employer identification number

57-0785431

FORM 990, PART III, LINE 2

THE ADDITION OF SAFE KIDS SOUTH CAROLINA AS A PROGRAM OF THE CHILDREN'S
TRUST.

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT

PROGRAMS AND ACTIVITIES THAT LEAD TO IMPROVEMENTS IN STUDENT ACADEMIC
ACHIEVEMENT AND THAT STRENGTHEN PARTNERSHIP AMONG PARENTS, TEACHERS AND
OTHER SCHOOL ADMINISTRATORS IN MEETING THE EDUCATION NEEDS OF CHILDREN.

FORM 990, PART III, LINE 4B - SECOND ACHIEVEMENT

INFRASTRUCTURE. A NURSE HOME VISITATION PROGRAM, NFP WORKS TO IMPROVE THE
HEALTH AND WELL-BEING OF FIRST-TIME, LOW-INCOME MOTHERS AND THEIR BABIES.
ASSISTED THE IMMUNIZATION DIVISION OF SC DHEC WITH THE STATEWIDE
DISSEMINATION AND PUBLIC AWARENESS OF THE IMPORTANCE OF IMMUNIZATION FOR
CHILDREN, BIRTH TO 18 YEARS.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990

FORM 990 DISTRIBUTED TO MEMBERS OF BOARD FOR REVIEW AND APPROVAL PRIOR TO
ELECTRONICALLY FILING WITH THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE WRITTEN CONFLICT OF INTEREST POLICY IS REVIEWED AND SIGNED OFF ANNUALLY
BY ALL BOARD MEMBERS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

Schedule O (Form 990) 2009

Page 2

Name of the organization

THE CHILDREN'S TRUST FUND OF SC

Employer identification number

57-0785431

HUMAN RESOURCES COMMITTEE RECEIVED COMPENSATION SURVEYS FROM GUIDESTAR, THE NONPROFIT TIMES, AND THE SC ASSOCIATION OF NONPROFIT ORGANIZATIONS TO COMPARE SALARY RANGES AND THEN SUBMITS SALARY RECOMMENDATION TO THE EXECUTIVE COMMITTEE FOR FINAL DECISION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
OFFICERS OF THE ORGANIZATION RECEIVE NO COMPENSATION. THE ORGANIZATION HAS NO KEY EMPLOYEES AS DEFINED BY THE INSTRUCTIONS FOR FORM 990. HOWEVER, THE HUMAN RESOURCES COMMITTEE RECEIVED COMPENSATION SURVEYS FROM GUIDESTAR, THE NONPROFIT TIMES, AND THE SC ASSOCIATION OF NONPROFIT ORGANIZATIONS TO COMPARE SALARY RANGES AND THEN SUBMITS SALARY RECOMMENDATION TO THE CEO FOR FINAL DECISION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
ALL DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE CHILDREN'S TRUST FUND EXPECTS TO POST ALL OF THESE DOCUMENTS ON ITS WEBSITE.

SCHEDULE O - ADDITIONAL INFORMATION

THE PRIOR YEAR'S TAX RETURN REFLECTED ONLY THE NINE MONTH PERIOD FROM JANUARY 1, 2009 TO SEPTEMBER 30, 2009, AS THE ORGANIZATION'S YEAR-END CHANGED FROM A CALENDAR YEAR END TO ITS NEW FISCAL YEAR END OF SEPTEMBER 30.

Form **4562**
Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009Attachment
Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

THE CHILDREN'S TRUST FUND OF SC

Identifying number

57-0785431

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	2,533

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	2,533
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2009)

DAA

THERE ARE NO AMOUNTS FOR PAGE 2

Federal Asset Report**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
13	Other Equipment	6/01/06	412			412	3 MO S/L	172	137
14	Computer Equipment	3/28/03	200			200	2 MO S/L	125	75
28	Raiser's Edge 7 Software	8/31/05	1,000			1,000	2 MO S/L	625	375
29	Dell Optiplex GX620	6/05/06	250			250	3 MO S/L	104	84
30	Dell Work Station	10/11/05	225			225	2 MO S/L	141	84
31	Xerox Phaser	10/11/05	500			500	2 MO S/L	313	187
32	Notebook PC w/Dock	9/26/05	200			200	2 MO S/L	125	75
33	Dell Latitude D510	8/08/06	200			200	3 MO S/L	83	67
34	Dell Latitude D520	11/16/06	200			200	3 MO S/L	83	67
35	Copier on Capital Lease	6/01/04	500			500	2 MO S/L	313	187
52	Dell Laptop	12/13/04	50			50	2 MO S/L	31	19
53	Dell Laptop	12/13/04	50			50	2 MO S/L	31	19
54	Projector	12/13/04	200			200	2 MO S/L	125	75
55	Projector	12/13/04	200			200	2 MO S/L	125	75
57	Dell Network Server	6/13/05	200			200	3 MO S/L	83	67
58	Dell Inspiron 6000	2/25/06	200			200	3 MO S/L	83	67
59	Dell Optiplex GX620	2/25/06	200			200	3 MO S/L	83	67
60	Dell Optiplex GX620	2/25/06	200			200	3 MO S/L	83	67
63	HP Laserjet 3800	2/25/06	25			25	3 MO S/L	10	9
64	Dell Laptop	2/10/06	200			200	3 MO S/L	83	67
65	Dell Optiplex w/19" monitor	6/15/06	200			200	3 MO S/L	83	67
73	Guest Desk CSR Insurance	5/23/07	150			150	5 MO S/L	38	30
74	2 U Desks from CSR Ins	5/23/07	400			400	5 MO S/L	100	80
75	Hutch for U desk CSR Ins	5/23/07	100			100	5 MO S/L	25	20
76	Misc chairs/hutch CSR Ins	5/23/07	100			100	5 MO S/L	25	20
77	Projector	6/30/08	1,338			1,338	3 MO S/L	558	446
Total Other Depreciation			<u>7,500</u>			<u>7,500</u>		<u>3,650</u>	<u>2,533</u>
Total ACRS and Other Depreciation			<u>7,500</u>			<u>7,500</u>		<u>3,650</u>	<u>2,533</u>
Grand Totals			7,500			7,500		3,650	2,533
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>7,500</u>			<u>7,500</u>		<u>3,650</u>	<u>2,533</u>