

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



Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public

ii it Carr		100 Cd 1100					Порссион
<u> </u>	or the	2010 calendar year, or tax year beginning	and	ending			
B c	heck if oplicabl	C Name of organization			D Employer	identificat	ion number
	Addre:	TRUST U/W OF H.C. GRAH	AM				
	Name chang	22			\	57-602	29524
	Initial return	Number and street (or P.O. box if mail is not de	ivered to street address)	Room/suite	E Telephone		
	Termir		,			(843)	423-2281
	Ameno				G Gross receipts		959,587.
	Applic	MARION, SC 29571			H(a) Is this a		
	pendir	F Name and address of principal officer SAM	UEL B. WOODS	-	for affilia	• .	Yes X No
		P. O. BOX 1069, MARION			H(b) Are all affi		ed? Yes No
	ax-exe	empt status X 501(c)(3) 501(c)()		or 527	1 ' '		(see instructions)
JV	Vebsit	e: N/A			H(c) Group ex		
			sociation Other	L Year			tate of legal domicile; SC
Pa	rt I	Summary					
	1	Briefly describe the organization's mission or most	significant activities MEDIO	CAL CA	RE FOR :	INDIGE	INT
Governance		PATIENTS			J J.		
Ĕ.	2	Check this box 🕨 🔲 if the organization disco	ntinued its operations of dispos			s net asset	ts.
ŏ	3	Number of voting members of the governing body	(Part VI, line 1a)	HEGE	WED TO	1 3	2
ଞ	4	Number of independent voting members of the go	verning body (Part VI, line (b)		- 18	4	<u>2</u> 3
es	5	Total number of individuals employed in calendar	/ear 2010 (Part V, line 2a (3) ₩	iay 16	2011 3	5	
Activities &		Total number of volunteers (estimate if necessary)		<u></u>	≌	6	0
ξ	7 a	Total unrelated business revenue from Part VIII, co	olumn (C), line 12	COE	W. UT	7a	<u> </u>
_	b	Net unrelated business taxable income from Form	990-T, line 34	- insert		3 7b	<u> </u>
					Prior Year		Current Year
9		Contributions and grants (Part VIII, line 1h)			17,	800.	0.
le l		Program service revenue (Part VIII, line 2g)				0.	0.
Revenue		Investment income (Part VIII, column (A), lines 3, 4		438,		262,492.	
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8d		192,		216,803.	
		Total revenue - add lines 8 through 11 (must equa			648,		479,295.
		Grants and similar amounts paid (Part IX, column (•		115,		423,500.
		Benefits paid to or for members (Part IX, column (A	•		1.65	0.	0.
Ses		Salaries, other compensation, employee benefits (• • • • •	ļ	165,		136,215.
Expenses		Professional fundraising fees (Part IX, column (A),	*			0.	<u> </u>
찞		Total fundraising expenses (Part IX, column (D), lin		<u> </u>	02	F 4 1	26 672
_		Other expenses (Part IX, column (A), lines 11a-11d	•	-		541.	<u>26,673.</u>
		Total expenses Add lines 13-17 (must equal Part	• • •		373,		586,388.
-8	19	Revenue less expenses Subtract line 18 from line	12		275,		-107,093.
ance	200	Total assets (Part V. June 16)		Ве	ginning of Currer		End of Year 2,973,748.
Ball		Total assets (Part X, line 16) Total liabilities (Part X, line 26)				192.	1,230.
Net Assets or Fund Balances		Net as <u>sets or fund balances</u> . Subtract line 21 from	line 20	-	3,045,		2,972,518.
Pa	rt II	Signature Block	iiile 20		J, <u>U</u> L J, ·	±17.	<u> </u>
_		Ities of perjury, I declare that I have examined this return.	including accompanying schedule	s and statem	ents and to the h	est of my kr	nowledge and belief it is
		t, and complete. Declaration of preparer, (other than offic				•	iomioogo ana bollol, it io
1100,	001100	. X. //\d		non propuror	5° /	11 11	
Sign	1	Signature of officer			Date	· 	<u> </u>
Here		SAMUEL B. WOODS				·	
	-	Type or print name and title			·		
		Print/Type preparer's name	Preparer's signature		Date	Check	PTIN
Paid		CHARLES F. JONES	Charles Jones Cf	YA s	5/10/11	self-employed	P00542750
Preparer Firm's name KENNETH COBB & COMPANY P.C. Firm's EIN							<u> </u>
Use		Firm's address P.O. BOX 864			7		
) j		MULLINS, SC 2957	4		Phone	no. 84 3	3-464-9563
May	the IF	RS discuss this return with the preparer shown abo					X Yes No
	01 02-2			 ons.			Form 990 (2010)

orm	1990 (2010) TRUST U/W OF H.C. GRAHAM	<u> 57-6029524</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
	TO PROVIDE CHARITY MEDICAL CARE FOR THE SICK AND WOUNDE	ID OF MARION	·
	COUNTY, SC	_ _	
2	Did the organization undertake any significant program services during the year which were not listed on	□	₽
	the prior Form 990 or 990-EZ?	Ye	s X 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	?Ye	s X 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 e		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	π grants and	
40	allocations to others, the total expenses, and revenue, if any, for each program service reported (Code) (Expenses \$423,500 . including grants of \$)(I	Povonuo ¢	
4a	(Code) (Expenses \$ 423,500 including grants of \$) (ICONTRIBUTED PROPERTY VALUED AT \$423,500 TO HEALTH CARE	Revenue \$	
	SOUTH CAROLINA, TO FURTHER THE MEDICAL CARE FOR SICK AN		
	MARION COUNTY, SC	O GERMOOM OF	
	MARION COUNTY, SC		
			
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
			·
			
			·
		<u></u>	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
			<u> </u>
4d	Other program services. (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses ► 423,500.		

Form 990 (2010) TRUST U/W OF H.C. GRAHAM
Part IV Checklist of Required Schedules

1 Is the organization described in section SDI(x)(3) or 4947(a)(1) (other than a private foundation)? 1 If X 2 Is the organization requered to complete Schedule B, Schedule B, Schedule G Continutions? 2 Is the organization requered in organization o				Yes	No
2 Is the organization required to complete Schedule R, Schedule R, Schedule C, Continuors? Did the organization engage in direct or indirect political campagn activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(x)(3) organizations. Defined the organization engage in lobbying activities, or have a section 501(t) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization association 501(x)(4) 501(x)(5) or 501(x)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.19? If "Yes," complete Schedule C, Part II by the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II by the organization maintain collections of works of art, historical resizues, or other similar assets II "Yes," complete Schedule D, Part II by the organization report an amount in Part X, line 21; serve as a custodian for amounts in series "If "Yes," complete Schedule D, Part IV by 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 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV If the organization report an amount for land, buildings, and equipment 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 XV Did the organization report an amount for investments - other securities 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 XV Did the organization report an amount for other labiliti	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3			1	X	
public office? If "Yes," complete Schedule C, Part I 8 Section 50(R)(3) organizations. Ddt the organization engage in lobbying activities, or have a section 501(R) electron in effect dump the tax year? "I"Yes," complete Schedule C, Part II 1 Is the organization assection 501(c)(6), 5	2		2		X
4 Section 501(c)(3) organizations. Dot the organization engage in kobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes, complete Schedule (P. Part II) is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98 19? If "Yes," complete Schedule (P. Part II) is the organization meant and yolonor 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 (P. Part II) is Did the organization research or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule (P. Part II) is Did the organization report an amount in Part X, instoncal treasures, or other similar assets? If "Yes," complete Schedule (P. Part IV) is Did the organization directly or through a related organization, hold assets in term, permanent, or quas-endowments? If "Yes," complete Schedule (P. Part IV) is a spiciable. 3 bid the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII is Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part XIII is 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 15? If "Yes," complete Schedule D, Part XIII is Did the organization separate, independent audited financial statements for the tax year include a footnote that addresses the organization's learned and amount for other labilities 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 X XIII is Did the organization shallow and amount for other labilities in Pa	3				
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section Schlog(s), 501(S), or S01(S),			3		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.197 If "Yes," complete Schedule C, Part II 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 II Did the organization reason or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI II the organization report an amount for investments - organization report an amount for investments - organization assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments - organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X II Did the organization report an amount for other insbitties in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 15? If "Yes," complete Schedule D, Part X II Did the organization report an amount for other insbitties in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 15? If "Yes," complete Schedule D, Part X II Did the organization report an amount for other insbitties in Part X, line 15? If "Yes," complete Schedule D, Part X II Did the organization report an amount for other insbitties in Part X, line	4				
semilar amounts as defined in Revenue Procedure 98 19? If 'Yes,' complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part II 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 III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part IV 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 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 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VIII Did the organization report an amount for investments or 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 VIII Did the organization report an amount for or 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 or their assets 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 XIII Did the organization report an amount for or their assets in Part X, line 15 that is 5% or more of its total assets reported in Part			4		<u>X</u>
6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I 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 Did the organization and areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization and areas, or historic structures? If "Yes," complete Schedule D, Part II 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, dobt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part VI If the organization's answer to any of the following questions is: "Yes," then complete Schedule D, Part VI If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for other assets 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 VI If Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for other assets on Part X, line 15? If "Yes," compl	5				
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation essement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide corect courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part SV, IVII, VIII, IVI, or X as applicable. If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII 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 VIII Did the organization report an amount for other liabilities 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 XIII Did the organization report an amount for other liabilities 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 XIIII Did the organization report an amount for other liabilities 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 XIIIII XIIIII XIIIII XIIIIII XIIIIII XIIIIII	_		5		_
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! 8 Did the organization maintain collections of works of air, historical reasures, or other similar assets? If "Yes," complete Schedule D, Part II! 9 Did the organization of debt in 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! 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 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 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 V 11 Did the organization report an amount for other assets 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 V 11 Did the organization report an amount for other assets 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 X 11 Did the organization report an amount for other liabilities 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 X 11 Did the organization oreport an amount for other liabilities 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 X 11 Did the organization oreport an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part X 12 Did the organization report an amount for other liab	6	·			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IIV 10 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 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IV, or X as applicable. 12 Did the organization report an amount for indiducings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 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 14 Did the organization report an amount for other assets 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 VII 15 Did the organization is ability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 16 Did the organization is ability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 17 Did the organization is ability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 18 Did the organization is ability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 19 Did the organization is ability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 19 Did the organization organization answered "No" to line 12s, then c	-		6_		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI Did the organization, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI, Did the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VIII, VIII, IVI, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b 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 VIII b Did the organization report an amount for other assets 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 b Did the organization report an amount for other inabilities 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 X III b Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III b Was the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III b Was the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI, XII, and XIII is X III b Was the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and IV b Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule F, Parts III and IV b Did th	′		l _		72
Schedule D, Part III 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 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 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 13 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 VIII 14 Did the organization report an amount for investments - organizated in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization report an amount for other assets 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 16 Did the organization is ability for uncertain tax postions under FIN 46 (ASC 740)? If "Yes," complete Schedule D, Part X 17 Did the organization is ability for uncertain tax postions under FIN 46 (ASC 740)? If "Yes," complete Schedule D, Part X 18 Did the organization is ability for uncertain tax postions under FIN 46 (ASC 740)? If "Yes," complete Schedule D, Part X 19 Did the organization is ability for uncertain tax postions under FIN 46 (ASC 740)? If "Yes," complete Schedule D, Part X 19 Did the organization is ability for uncertain tax postions under FIN 46 (ASC 740)? If "Yes," complete Schedule D, Part X 19 Did the organization is ability for uncertain tax postions under FIN 46 (ASC 740)? If "Yes," complete Schedule D, Part X 19 Did the organization is separate, independent audited financial statem	0		 7		A
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 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 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V I 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V I 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V I 11 Did the organization report an amount for investments - rorgam 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 V III 12 Did the organization report an amount for other assets 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 V III 13 Did the organization report an amount for other labilities 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 X III 14 Did the organization report an amount for other labilities 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 X III 14 X 15 Did the organization report an amount for other labilities 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 X III 14 X 15 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III 14 X 15 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," or	0	- · · · · · · · · · · · · · · · · · · ·	_		
credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 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 11 If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII c 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 d Did the organization report an amount for other assets 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 VIII Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110 If X 110 If X 111 If X 111 If X 112 If X 113 If X 114 If X 115 If X 116 If X 117 If Yes, "complete Schedule D, Part VIII III III III III III III III III I	۵		8		
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 11 If the organization answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, VIII, VII, VIII, VIII, VII, VIII,	•				v
If "Yes," complete Schedule D, Part V If the organizations answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b 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 c 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 VII d Did the organization report an amount for other labilities 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 XI Did the organization or part an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d	10		9		
If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. Dot 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 VII Did the organization report an amount for other assets in Part X, line 15 line 18? If "Yes," complete Schedule D, Part VII 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 rinclude a footnote that addresses the organization's separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, III, and XIII is optional is the organization asset of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from granitaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gartes or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gartes or assistance to any organization orgonic to have states? If "Yes," complete Schedule F, Parts III and IV Did the organization report and t		·	10		v
as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - other securities 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 d Did the organization report an amount for other assets 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 VIII d Did the organization report an amount for other assets 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 X Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 110 Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization included in section 170(b)(1)(A)(i))? If "Yes," complete Schedule E, Parts XI, XII, and XIII is optional is the organization aschool described in section 170(b)(1)(A)(i))? If "Yes," complete Schedule E 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, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report more than \$15,000 of expenses for professional fundraising servi	11		10		<u> </u>
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b 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 VIII c 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 d Did the organization report an amount for other assets 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 X 11d	-				
Part VI b 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 c 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 d Did the organization report an amount for other assets 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 XV d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X 110 b Was the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional is the organization as school described in section 170(b)(1)(A)(I)? If "Yes," complete Schedule E 12a	а	• •			
b 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 VIII 11c			11a	$\mid \mathbf{x} \mid$	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c 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 d Did the organization report an amount for other assets 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 112a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12a X 12b X 12c Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12a X 12b X 12c X 12c Did the organization and office, employees, or agents outside of the United States? 12b X 12c Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants II and IV 12c 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, Parts III and IV 12c Did the organization report a total of more than \$15,000 of expenses for professional fundrai	b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
c 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 d Did the organization report an amount for other assets 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year include D, Part X 116			11b	x	
d Did the organization report an amount for other assets 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 11d	С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
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 110 bit the organization's separate or consolidated financial statements for the tax year include a flootnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13 X 14a 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, Parts I and IV 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, Parts II and IV 16 Did the organization report an actual of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report and 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 II 17 Did the organization report more than \$15,000 of grants or assistance to individuals located outside the United States?		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f 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 (ASC 740)? If "Yes," complete Schedule D, Part X 112 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X II, III AIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional is the organization a school described in section 170(b)(1)(A)(i)(i) If "Yes," complete Schedule E 13 X 14a 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, Parts I and IV 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, Parts II and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 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, Parts III and IV 17 In the organization report and 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 II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 cand 8a? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$15,000 of expenses for professional fundraising	d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
f 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 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 15 Did the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 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, Parts III and IV 15 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 16 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals		Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13			11e	X	
Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization as school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV 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, Parts III and IV 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, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV 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, Parts II and IV 15 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, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 20a X b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			11f		_X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV 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, Parts II and IV 15 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, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	12a	·			
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV 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, Parts II and IV 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, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			12a		X
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 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, Parts I and IV 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, Parts II and IV 15 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, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	b				
Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV 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, Parts II and IV 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, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	40				,
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, Parts I and IV 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, Parts II and IV 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, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			$\overline{}$		
and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 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, Parts II and IV 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, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20a X 20a X			14a		
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, Parts II and IV 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, Parts III and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	U		146		v
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 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, Parts III and IV 16 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 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	15		140		
located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			15		Y
located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	16		13		
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 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 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 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			16		x
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 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 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	17				
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 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 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			17		x
1c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	18		<u> </u>		
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 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			18		X
complete Schedule G, Part III 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	19				
Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			19		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			
	b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
			20b		

Form 990 (2010) TRUST U/W OF H.C. GRAHAM

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			7.7
	Schedule J	23		_X_
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		х
	Schedule K If "No", go to line 25	24a		Λ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
C	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<u> 27u</u>	_	
Loa	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	Lou		
-	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		Х
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	_	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		v	
~~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	_X_	X
29 22	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
•	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	<u> </u>		
_	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
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)?	35	_ <u>X</u> _	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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?		Х	
	Note, All Form 990 filers are required to complete Schedule O	38 Form	<u>_^</u>	2010
		1.01111	22U (201U)

Form 990 (2010) TRUST U/W OF H.C. GRAHAM

Part V Statements Regarding Other IRS Filings and Tax Compliance

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 10b 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		Check if Schedule O contains a response to any question in this Part V				
tale Enter the number reported in Box 3 of Form 1096. Enter -0" in ot applicable be Enter the number of Forms W30 anduded in in a 1 a Enter of 4 not applicable be 1 b					Yes	No
b Enter the number of Forms W2G encluded in line 1a Enter of 4 not applicable on Did the organization comby with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 3 If all least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 50, you may be required to e-file (see instructions) 3 If If "Yes," has filed a form 950 Tor the year? "If "No, "provide an explication of Schedule O 4 A ray 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 fluesh as a bink account, sections account, or other financial account? 4 If "Yes," and the file a form 950 Tor the year? "If "No, "provide an explination or Schedule O 5 If "Yes," or the third of the organization has the account, sections account, or other financial account? 5 If "Yes," or the sac of bit, did the organization has the was or a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5a or 5b, did the organization file Form 8886."? 8 Does the organization and party to a prohibited tax shelter transaction? 9 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 1 If "Yes," did the organization include with every solicitation and express for property for goods and services provided to the payor? 1 If "Yes," did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 1 If "Yes," did the organization include with every solicitation and express property for goods and services provided to the organization solicity and property for the value of the or	1a	Enter the number reported in Box 3 of Form 1096 Enter 0 if not applicable	la 0			
a Enter the number of enclosives reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. b If all least one is reported on line 2a, did the organization life all required federal employment tax returns? Note. If If the sum of lines 1 and 2 as greater than 250, you may be required to e-fife (see instructions) a Did the organization have unrielated business gross income of \$1,000 or more during the year? b If If Yes, 1 has a fifed a Form 9950 for fite the year If 1/40, 5 provide an explanation in Schedule O a All 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?) b If Yes, 1 enter the name of the foreign country ∞ See instructions for filing requirements for Form 10 F 90.22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form 10 F 90.22 1, Report of Foreign Bank and Financial Accounts Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization and the organization file file with the organization and the organization file of the organization file form 88667 6b Was 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? 7 organizations that may receive deductible contributions under section 170(c). a Did the organization received a contribution of undersective the property of the which it was required to file Form 88691. 7 organizations that may receive deductible contributions under section 170(c). a If Yes, 1 did the organization received a contribution of undersective to payment and	b		ıb 0			l
2a Enter the number of employees reported on Form W-3. Transmettal of Wage and Tax Statements, filled 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? About the file sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3b Dd the organization have unreliated business gross income of \$1,000 or more dump the year? 3a At any time duming the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country [see the search of the fire year? If No.} provide an explanation in Schedule O 3b If Yes, "enter the name of the foreign country Provide an explanation in Schedule O 3c Was the organization a party to a prohibered tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibered tax shelter transaction? 5b Was the organization and the organization file Form 8886-17 6c Does the organization and year growing that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible? 6c Does the organization in an unall gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that may receive deductible? 6c Did the organization in any receive deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d biff the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided? 7d biff the organization received a contribution of under section 170(c). 8d biff the organization received a contribution of under section 170(c). 9d biff the organization received a contribution of care, boats, amplanes, or other vehicles, did the organization file a form 1088-07 and 10 the organization received a contribution of party the party of the party of	С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable gaming			
the for the calendar year ending with or within the year covered by this return? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a		(gambling) winnings to prize winners?		1c		ĺ
file for the calendar year ending with or within the year covered by this return Note, if the sum of lines 1a and 2a is greater than 250, you may be required footarial employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3			2a 3			
3a	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?	2b	X	
b if "Yes," has it filled a Form 990-T for this year" if "No.", provide an explanation in Schedule 0 4 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)? 4 B If "Yes," enter the name of the foreign country ► 5 See instructions for filing requirements for Form 1D F 90-22 1, Report of Foreign Bank and Financial Accounts 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 D Id any taxable party notify the organization that twas or is a party to a prohibited tax shelter transaction? 5 D If "Yes," to line 5 a or 5b, did the organization file Form 8886-T? 6 D Ose the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductible? 6 D If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax eductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 D If the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 D If the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 If "Yes," indicate the number of Forms 88282 filed during the year. 9 D If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 1 Did the organization, during the year, pay premiums, directly or indirectly, to na personal benefit contract? 1 Did the organization make any funds, directly or indirectly, to pay premiums on a personal benefit contract? 1 Did the organization make any stable dis		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
4a A 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, erective financial account)? b if *Yes,* enter the name of the foreign country \rightarrow See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization party to a prohibited tax shelter transaction at any time during the tax year? b old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c if *Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? d if *Yes,* to line 5a or 5b, did the organization file Form 8886-17 G observed to the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a obtaine organization selve a payment in excess of 375 made party is a contribution and party for goods and services provided to the payor? 7a X b if *Yes,* if did the organization notify the donor of the value of the goods or services provided? b obtained to the organization receive a payment in excess of 375 made party is a contribution of property for which it was required to file Form 8282? d if *Yes,* if did the organization receive a payment in excess of 375 made party is a contribution of file Form 8282? d if *Yes,* if did the organization receive a payment in excess of 375 made party is a contribution of the good of the good of the payment of the good	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
financial account in a foreign country ■ If "Yes," either the name of the foreign country ■ See instructions for 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? 5b Dod any taxable party notify the organization that it was or as a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-17 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twen or tax deductible? 6a 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 bid the organization start may receive deductible contributions under section 170(c). b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization received a contribution of qualified intellectual property, did the organization file a Form 108-C? 1 File organization received a contribution of qualified intellectual property, did the organization file a Form 108-C? 1 File organization make any taxable distributions under section 598(a) Supporting organizations. Did the supporting organizations and that ing deen advised fluid and selection 598(a) Supporting organizations. Did the supporting organizations and that ing deen advised fluid and selection 598(a) Supporting organizations. Did the supporting organization and the fluid of the organization make any taxable distributions under section 4966? Did the organization make any taxable distribution to a donor, do	b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
b If "Yes," enter the name of the foreign country: See instructions for 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? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Colores 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? 5c Colores the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Colores the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Organization shall war receive deductible contributions under section 170(c). a Did the organization shall express the defendance of the value of the goods or services provided? 5d If "Yes," did the organization orceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5d If "Yes," did the organization orceive a payment in excess of \$75 made partly as a contribution of the value of the goods or services provided? 5d If "Yes," did the organization orceive a payment in excess of \$75 made partly as a contribution of the value of the goods or services provided? 5d If "Yes," did the organization services of forms 8282 filed during the year 6 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1889 as required? 7 If If the organization received a contribution of qualified intellectual property, did the organization file Form 1889 as required? 7 If the organization received a contribution of qualified intellectual property, did the o	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au	thonty over, a			
See instructions for 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? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-17 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? 6a X 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 7b Organizations that may receive deductible contributions under section 170(c). 8b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Uf the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8c If "Yes," indicate the number of Forms 8282 filed during the year 9b Of the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 8c Sponsoring organization maintaining doon advised funds and section 599(a)3 supporting organizations. Did the supporting organization maintaining doon advised funds and section 599(a)3 supporting organization file a Form 1098-C7 8c Sponsoring organization make any taxable distributions under section 4966? 9c Did the organization make any taxable distributions under section 4966? 9c Section 501(c)(7) organizations. Enter. 1a Gross recome from there sources (D not at amounts due or paul to other sources against amounts due or received from them.) 15c Section 501(c)(7) organizations. Enter. 16c Gross recome from members or shareholders 17d Section 4947(a)(1) non-exempt c		financial account in a foreign country (such as a bank account, securities account, or other financial account	count)?	4a		X
5a X b Did any taxable party to a prohibited tax shelter transaction at any time during the tax year? 5	b	If "Yes," enter the name of the foreign country: ▶				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c if "Yes," to line 5a or 5b, did the organization file Form 8886-17? d 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? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). a Did the organizations that may receive deductible contributions under section 170(c). b If "Yes," did the organization nective the donor of the value of the goods or services provided to the payor? b If "Yes," did the organization nective the donor of the value of the goods or services provided? c Did the organization neceve any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of cars, boats, anylpanes, or other vehicles, did the organization file Form 8993 as required? f If the organization received a contribution of cars, boats, anylpanes, or other vehicles, did the organization file a Form 1098-07 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make and stribution of a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Intuition fees and capital contributions included on Part VIII, line 12 a Gross recome from thems of sareholders Gross income from there sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Se		See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acceptable 1.	counts			
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6 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? 6 If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts 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 575 made parity as a contribution and parity for goods and services provided to the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 1 If "Yes," indicate the number of Forms 8282 filed during the year 2 If If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 8 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization file a Form 1098-C? 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distribution sunder section 4966? 10 Section 501(c)(7) organizations. Enter a linitation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Gross income from methers or shareholders 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 13 Section 501(c)(2) qualified nonprofit	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
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? Organizations that were not tax deductible? Organizations that may receive deductible contributions under section 170(c). In the organizations are a gayment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? In the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? In the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? In the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file a form 1096-C? Sponsoring organizations maintaining doner advised funds and section 509(3) supporting organizations. Did the supporting organizations maintaining doner advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization in the transplant of the supporting organizations. Enter: In intation fees and capital contributions included on Part VIII, line 12 Did the organization in the transplant of the transplant of the transplant	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b		X
any contributions that were not tax deductible? 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? 7 b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8828? d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 Sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. D did the organization make any taxable distributions under section 4966? b Drift the organization make any taxable distributions under section 4966? b Gross receipts, included on Form 990, Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 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 501(c)(2) qualified nonprofit health insurance issuers. 13b Section 501(c)(2) qualified nonprofit health insurance issuers. 13c Section 501(c)(2) qualified nonprofit health insurance issuers. 13c Section 501(c)(2) qualified nonprofit health insurance issuers. 13d Section 501(c)(2) qualified nonprofit health insuran	С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
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? b if "Yes," did the organization notify the donor of the value of the goods or services provided? c 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? b if "Yes," in did the organization notify the donor of the value of the goods or services provided? c Did the organization notify the donor of the value of the goods or services provided? d if "Yes," indicate the number of Forms 8282 filed during the year b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098-07. Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. Did the organization make a distribution to a donor, donor advisor, or related person? Sponsoring organizations maintaining donor advised funds. Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions uncluded on Part VIII, line 12 b Gross income from other sources (Do not net amounts due or peaued to other sources against amounts due or received from them) 11a	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	organization solicit		1	
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization selve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? g If the organization during the year, pay premiums, directly or indirectly, to nay personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of qualified intellectual property, did the organizations. Did the supporting organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organization and avised funds and section 509(s)(3) supporting organizations. Did the supporting organizations are airplaned by a sponsoring organization, between the supporting organizations. Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 5 Section 501(c)(7) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 10a Did the organization incomed to insue qualified health plans in more than one state?		•	•	6a		X
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? 7 A X 7 b If "Yes," enter the amount of reserves a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 b If "Yes," chas it filled a Form 7.20 to report these payments of the organization receive a payment in excess of \$75 manual to the organization and partly for goods or services provided? 7 b If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8 If "Yes," inside the number of Forms 8282 filed during the year 9 Did the organization receive a contribution of qualified intellectual property, did the organization form 8299 as required? 9 Sponsoring organization received a contribution of cars, boats, airplaines, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organization received a contribution of cars, boats, airplaines, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter 9 Initiation fees and capital contributions included on Part VIII, line 12 9 Gross income from members or shareholders 11 Section 501(c)(7) organizations. Enter. 12 Initiation fees and capital contributions included on Part VIII, line 12 13 Section 501(c)(7) organizations. Enter. 14 Initiation fees and capital contributions included on Part VIII, line 12 15 Section 501(c)(7) organizations. Enter. 16 Initiation fees and capital initiation fees and capital initiation fees and capi	b		ns or gifts	i		ĺ
a Did the organization receive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c				6b		<u> </u>
b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(17) 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 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization locensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is locensed to issue qualified health plans in more than one state? Note. See the instructions for additional information th	7	- · · · · · · · · · · · · · · · · · · ·				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? f Polithe organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? f Polithe organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 4966? b 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? 9b D Section 501(c)(17) 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 11a			es provided to the payor?		-	<u> </u>
to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year	b			7b		
d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Did the organization make a distribution included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Gross income from members or shareholders 11 Section 501(c)(12) organizations. Enter. 12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 501(c)(12) organizations. Enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization is licensed to issue qualified health plans in more than one state? 13 Note. See the instructions for additional information the organization must report on Schedule O. 13 Enter the amount of reserves on hand 14 Did the organization is filed a Form 72	С		required	_		v
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. b 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? Section 501(c)(7) organizations. Enter: a Intuition fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization is port these payments? If "No," provide an explanation in Schedule O]	/c		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cash, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations, 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? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization section. 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 10 Section 501(c)(12) organizations. Enter. a Gross income from embers 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.) 11a	a	-				l
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 9 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? 15 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 15 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b	-					
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Sponsoring organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distribution to a donor, donor advisor, or related person? 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 10b 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 12b 12a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b In the fire yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	-					
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? 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 10b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b						
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9		-		711		
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? 9b 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 10b Gross income from members or shareholders a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a	•			g		
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? 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 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c Light "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	9		tunio during the your			
b Did the organization make a distribution to a donor, donor advisor, or related person? 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 10b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13c 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	а			9a	ŀ	
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 10b 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.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b					
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	10	·				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	а	Initiation fees and capital contributions included on Part VIII, line 12	0a			
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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	b					
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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	11	Section 501(c)(12) organizations. Enter.				
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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	а	Gross income from members or shareholders	1a			
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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b	Gross income from other sources (Do not net amounts due or paid to other sources against				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		amounts due or received from them.)	1b		}	
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	41?	12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	2b	.		
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		Note. See the instructions for additional information the organization must report on Schedule O.				
c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		į	
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			3b			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			3c			
				14a		_X_
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule C)			

Form 990 (2010) TRUST U/W OF H.C. GRAHAM 57-6029524 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. \mathbf{x} Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Does the organization have members or stockholders? 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the X governing body? 7a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? Яh 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 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 Х 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 X 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b 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 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 X 14 Does the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 1<u>5b</u> 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 X taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed ▶SC 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

Form **990** (2010)

MARION, S.C.

S.B. WOODS - (843) 423-7622

29571

	•		
Form	990	(2010)	

TRUST U/W OF H.C. GRAHAM

57-6029524

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any. 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 neither the organization n	or any related	d organization compensation						ated any current officer, director, or trustee						
(A)	(B)			(0	C)			(D)	(E)	(F)				
Name and Title	Average	Position						Reportable	Reportable	Estimated				
	hours per	(cl	(check all that apply)				ly)	compensation	compensation	amount of				
	week	tor						from	from related	other				
	(describe	alec diec				_		the	organizations	compensation				
	hours for	, e e	ste			lage Bage		organization	(W-2/1099-MISC)	from the				
	related	trust	al tru		š	흔		(W-2/1099-MISC)		organization				
	organizations	Individual trustee or director	Institutional trustee	<u>_</u> ا	뻍	9 35	 =			and related				
	in Schedule O)	P P	ist E	Officer	Key employee	Highest compensated employee	Ротте			organizations				
S.B. WOODS	<u> </u>						-							
TRUSTEE	30.00	X						25,000.	0.	0.				
STEWART RICHARDSON														
TRUSTEE	10.00	X						0.	0.	0.				
						Ì)						
				_			_							
					-	 	_							
							<u> </u>		-					
									'					
							-							
		<u> </u>					L							
	· -		_											
						<u> </u>								
							┝							
		_					L		<u> </u>					
				-	-		-							
										_				
	L	Ц.	L	<u> </u>		ļ	L_	L						

Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Settion B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Compensation	Part VII Section A. Officers, Director	s, Trustees, Key E	mpl	oyee	s, ar	nd F	ligh	est	Compensated Employ	ees (continued)				
week (describe hours for related organizations (W2/1099MISC) (W2/1099MIS		Average	(0		Posr	tion		[S]	Reportable	Reportable		Estır	nate	
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Yes		week (describe hours for related organizations in Schedule	<u> </u>						from the organization	from related organizations		ot compe fror orgar and i	her ensat n the uzatu elate	io on
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person School B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) NONE (A) Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than														
Total from continuation sheets to Part VII, Section A d Total (add lines 1h and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Scholar B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) NONE (A) Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than														_
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Yes														
Total from continuation sheets to Part VII, Section A d Total (add lines 1h and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Scholar B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) NONE (A) Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than														
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Yes									25 000		+			_
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Sction B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Name and business address Total number of independent contractors (including but not limited to those listed above) who received more than	c Total from continuation sheets to P d Total (add lines 1b and 1c) Total number of individuals (including	but not limited to t		e liste	ed ab		> > > >	no re	0. 25,000.	0				(
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Name and business address Description of services Total number of independent contractors (including but not limited to those listed above) who received more than	line 1a? If "Yes," complete Schedule	l for such individua	1										es	2
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Compensation Name and business address Description of services Total number of independent contractors (including but not limited to those listed above) who received more than	and related organizations greater than Did any person listed on line 1a receiv	s \$150,000? If "Yes e or accrue compe	," co ensa	mpl tion 1	ete S rom	che any	<i>dule</i> unr	J fo	or such individual	-				2
the organization. NONE (A) Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than	ection B. Independent Contractors							rs th	nat received more than	\$100,000 of compe			 m	_
Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than	the organization. NONE							1		· · ·				
								_		ervices	Cor		ation	_
			_			_				_				
											_			_
		-									_			_
			not l	mıte	d to	_	_	sted	above) who received m	nore than				_

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats st	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
is, c	С	Fundraising events	1c					
gift Iar	d	Related organizations	1d					
ns, imi	е	Government grants (contribut	tions) 1e					
utio er s	f	All other contributions, gifts, gran	its, and					
rib Oth		similar amounts not included abo	ve 1f					
o d	9	Noncash contributions included in lines	s 1a-1f \$					
o a	<u>h</u>	Total. Add lines 1a-1f		•		_		
	_			Business Code				
je	2 a							
Program Service Revenue	b							
E	C			-				
P.S	d			-				
Pr	e f	All other program service reve	2010					
	-	Total. Add lines 2a-2f	ariue	—	, -			
	3	Investment income (including	dividends, intere					
	•	other similar amounts)		>	1.			1.
	4	Income from investment of ta	x-exempt bond p	· -				
	5	Royalties		•			-	
			(ı) Real	(II) Personal				
	6 a	Gross Rents	534586.					
	b	Less rental expenses	317783.					
	С	Rental income or (loss)	216803.					
	d	Net rental income or (loss)		•	216,803.	216,803.		
Ì	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		425000.				
	þ	Less cost or other basis			j			
		and sales expenses		162509.				
		Gain or (loss)		262491.	262 401	060 401		
	d	Net gain or (loss)		<u> </u>	262,491.	262,491.		
E E	8 a	Gross income from fundraising	•					
Other Reven		including \$	of					
8		contributions reported on line Part IV, line 18	•					
je.	h	Less. direct expenses	a b		İ			
ō		Net income or (loss) from fund						
		Gross income from gaming ac	-					
		Part IV, line 19	а					
1	b	Less: direct expenses	b					
ł		Net income or (loss) from gam	ing activities					
	10 a	Gross sales of inventory, less	returns				-	
		and allowances	а					
	b	Less. cost of goods sold	b					
ļ	С	Net income or (loss) from sale	s of inventory					
ļ		Miscellaneous Revenu	e	Business Code				
	11 a			<u> </u>				
	b							 .
	C			 				
	d	All other revenue						
		Total. Add lines 11a-11d			450 005	450 007		
03200	<u>12</u> 9	Total revenue See instructions.			479,295.	479,294.	0.	1.
03200 12-21-	10							Form 990 (2010)

Form 990 (2010) TRUST U/W OF I Part IX | Statement of Functional Expenses

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

ations must complete column (A) but are not required to complete columns (B), (C), and (D)

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)										
	not include amounts reported on lines 6b, 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	423,500.	423,500.							
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	25,000.		25,000.						
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	54,120.		54,120.						
8	Pension plan contributions (include section 401(k)									
	and section 403(b) employer contributions)									
9	Other employee benefits	51,756.		51,756.						
10	Payroll taxes	5,339.		5,339.						
11	Fees for services (non-employees)									
а	Management									
b	Legal	1,365.		1,365.						
С	Accounting	8,000.		8,000.						
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other									
12	Advertising and promotion									
13	Office expenses	7,515.		7,515.						
14	Information technology									
15	Royalties									
16	Occupancy									
17	Travel	6,488.		6,488.						
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance				<u> </u>					
24	Other expenses. Itemize expenses not covered									
	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)									
	amount, list line 24f expenses on Schedule 0.)									
а	MISCELLANEOUS	<u>3,305.</u>		3,305.						
þ										
С										
d										
е		-								
f	All other expenses									
<u>25</u> _	Total functional expenses Add lines 1 through 24f	<u>586,388.</u>	423,500.	162,888.	0.					
26	Joint costs. Check here I If following SOP									
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

	199Ò (rt X	2010) TRUST U/W OF E	I.C. GRAHAM		<u> </u>	6029524 Page 11
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		118,418.	1	207,092.
	2	Savings and temporary cash investments	·		2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	34,191.
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employee				
		of Schedule L	·		5	
	6	Receivables from other disqualified persons (as	defined under section			-
		4958(f)(1)), persons described in section 4958(c				
		employers and sponsoring organizations of sections				
		employees' beneficiary organizations (see instru			6	
ets	7	Notes and loans receivable, net	, i		7	
Assets	8	Inventories for sale or use	Γ		8	
	9	Prepaid expenses and deferred charges	Ī	50,000.	9	50,000.
	10a	Land, buildings, and equipment cost or other	ıı			1.5.5
		basis. Complete Part VI of Schedule D	10a 3,796,796.			
	ь	Less: accumulated depreciation	10b 1,515,921.	2,478,103.	10c	2,280,875.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line	ı ₁	400,090.	12	400,090.
	13	Investments - program-related See Part IV, line	• • •	13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		0.	15	1,500.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	3,046,611.	16	2,973,748.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
	22	Payables to current and former officers, director	s, trustees, key employees,			
Liabilities		highest compensated employees, and disqualifi	ed persons Complete Part II			
	İ	of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties	<u>.</u>	23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		1,192.	25	1,230.
	26	Total liabilities. Add lines 17 through 25		1,192.	26	1,230.
		Organizations that follow SFAS 117, check he	ere X and complete			
es		lines 27 through 29, and lines 33 and 34.				
a	27	Unrestricted net assets		3,045,419.	27	2,972,518.
Ba	28	Temporarily restricted net assets	Ļ		28	
2	29	Permanently restricted net assets			29	
2		Organizations that do not follow SFAS 117, c	heck here 🕨 📖 and			
ŏ		complete lines 30 through 34.				
šet	30	Capital stock or trust principal, or current funds	L		30	
As	31	Paid-in or capital surplus, or land, building, or ed	` ` <u> </u>		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other funds		32	
_	33	Total net assets or fund balances	L	3,045,419.	33	2,972,518.
	34	Total liabilities and net assets/fund balances		3,046,611.	34	2,973,748.

Form **990** (2010)

	n 990 (20	TRUST U/W OF H.C. GRAHAM	<u> 57-602</u>	9524	Pa	ge 12
Pa	rt XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response to any question in this Part XI				X
1	Total r	evenue (must equal Part VIII, column (A), line 12)	1	47	9,2	<u>95.</u>
2	Total e	xpenses (must equal Part IX, column (A), line 25)	2	58	6,3	<u>88.</u>
3	Reven	ue less expenses. Subtract line 2 from line 1	3	-10	7,0	<u>93.</u>
4	Net as	sets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,04	5,4	<u> 19.</u>
5	Other	changes in net assets or fund balances (explain in Schedule O)	5	3	4,1	92.
6	Net as	sets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,97	2,5	18.
Pa	rt XII	Financial Statements and Reporting				
		Check if Schedule O contains a response to any question in this Part XII				
		<u> </u>			Yes	No
1	Accou	nting method used to prepare the Form 990. X Cash Accrual Other				
	If the c	rganization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			ŀ
2a	Were t	ne organization's financial statements compiled or reviewed by an independent accountant?		2a	X	<u> </u>
b	Were t	ne organization's financial statements audited by an independent accountant?		_2b		<u>X</u>
С	If "Yes	to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review	or compilation of its financial statements and selection of an independent accountant?		_2c	X	
	If the o	rganization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes	to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separa	re basis, consolidated basis, or both				
	LX S	eparate basis Consolidated basis Both consolidated and separate basis				
За	As a re	sult of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and	OMB Circular A-133?		_3a		X
b	If "Yes,	did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audi	s, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

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

2010

Open to Public Inspection

Employer identification number

57-6029524 TRUST U/W OF H.C. GRAHAM Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 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 in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 June 30, 1975. See section 509(a)(2), (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c X Type III - Functionally integrated a Type I ____ Type II Type III - Other e X 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 509(a)(2) If the organization received a written determination from the IRS that it 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? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No X the governing body of the supported organization? 11g(i) X A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s). (iii) Type of (iv) Is the organization (v) Did you notify the (vi) is the (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) organized in the U.S.? organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 (i) of your support? governing document? above or IRC section (see instructions)) Yes No Yes No Yes No HEALTH CARE PARTNERS OF |57-0679807|3 423,500. X Х Х 423,500.

	, 4, ,	7, 1						•	`
•	•								
Schedule A	(Form 990 or 9	990-EZ) 2010							
Part II	Support S	chedule for	Organizations	s Described in	Sections 1	70(b)(1)(A)(iv) ar	nd 170(b)	(1)(A)(v	/i)
			 .				• •		•

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants.")			<u>l.</u>			
2	Tax revenues levied for the organ-						
	ızatıon'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						
5	The portion of total contributions					1	
	by each person (other than a						
	governmental unit or publicly			1			
	supported organization) included	i.					
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)			 			
	Public support. Subtract line 5 from line 4						<u> </u>
	ction B. Total Support	4 3 0000	T #1000=	1	1	1 .:	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
_	Amounts from line 4			-	-		
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				 		
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on			1		<u> </u>	
10	Other income. Do not include gain						
	or loss from the sale of capital						
44	assets (Explain in Part IV)	_					
	Total support. Add lines 7 through 10					1.5	
12	Gross receipts from related activities,	•	•			12	
13	First five years. If the Form 990 is for		s first, second, thi	ra, tourth, or titth t	ax year as a section	on 501(c)(3)	. □
Sec	organization, check this box and stop ction C. Computation of Publ		rcentage				
	Public support percentage for 2010 (I			column (f))		14	%
	Public support percentage from 2009			ν,,		15	%
	33 1/3% support test - 2010. If the o			n line 13, and line	14 is 33 1/3% or r	nore, check this bo	
	stop here. The organization qualifies						ightharpoons
b	33 1/3% support test - 2009. If the or	rganization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization quali	fies as a publicly	supported organiz	zation			
17a	10% -facts-and-circumstances test	t - 2010. If the org	anization did not o	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"				= -	J	ightharpoons
b	10% -facts-and-circumstances test	t - 2009. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circi	umstances" test, c	check this box and	stop here. Explai	n in Part IV how the	•
	organization meets the "facts-and-circ						ightharpoons
18	Private foundation. If the organization	n did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box	and see instruction	s ▶ □
						edule A (Form 990	

Schedule A (Form 990 or 990 EZ) 2010 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 or if the organization failed to qualify under Part II If the organization fails to

Section A. Public Support	low, please com	piete Fait II)				
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and		1				
membership fees received (Do not						
include any "unusual grants.")			1			
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 t	he organization'	s first, second, thi	d. fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	ration.
check this box and stop here	g	.,,	-, ····, ·-······			▶□
Section C. Computation of Public	Support Pe	rcentage	<u> </u>			
15 Public support percentage for 2010 (lin	e 8, column (f) d	ivided by line 13,	column (f))		15	%
16 Public support percentage from 2009 S	Schedule A, Part	III, line 15			16	%
Section D. Computation of Invest	ment Incom	e Percentage				
17 Investment income percentage for 201	0 (line 10c, colur	nn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from 20	009 Schedule A,	Part III, line 17	- "		18	%
19a 33 1/3% support tests - 2010. If the o			on line 14, and line	e 15 is more than	33 1/3%, and line 1	
more than 33 1/3%, check this box and						▶□
b 33 1/3% support tests - 2009. If the o						and
line 18 is not more than 33 1/3%, chec	=					ightharpoons
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in	structions	

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 Inspection

Name of the organization Employer identification number TRUST U/W OF H.C. GRAHAM 57-6029524 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 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? 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? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a 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 2h c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 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 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

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- Revenues included in Form 990, Part VIII, line 1
- Assets included in Form 990, Part X

conservation easements

	\$			
provi	de			

_		<u>/W OF H.C.</u>							<u> 29524</u>	
Pa	rt III Organizations Maintaining C	Collections of A	rt, His	<u>torical Tr</u>	easures,	or Othe	<u>r Simil</u>	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following that	at are a sig	gnificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	c	ı 🗀	Loan or exc	hange progr	ams				
b	Scholarly research	•		Other	Ŧ · -					
С	Preservation for future generations			_						
4	Provide a description of the organization's co	ollections and expla	in how th	nev further t	he organizat	on's exen	anua fan	ose in Par	t XIV.	
5	During the year, did the organization solicit of			-	=					
•	to be sold to raise funds rather than to be m						400010		Yes	☐ No
Pa	rt IV Escrow and Custodial Arran					"Yes" to F	Orm 990	Part IV		1 110
	reported an amount on Form 990, Pa		0.0 11 1.10	o garnzanc	,,, anoworou	100 101	01111 000	,,,,		
12	Is the organization an agent, trustee, custod		diany for	contribution	ne or other as	seate not	ncluded			
ıa	on Form 990, Part X?	ian or other intermet	Jiery 101	CONTINUE	is or other as	3563 1101 1	nciadea	_	Yes	□ No
L	•	and complete the fe	lloume	table.				<u> </u>	_ res	NO
D	If "Yes," explain the arrangement in Part XIV	and complete the it	lowing	table:						
	December halones						+		Amount	
C	Beginning balance						1c			
a	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			T-1.:-
	Did the organization include an amount on F		21?					<u> </u>	」 Yes	U No
	If "Yes," explain the arrangement in Part XIV									
Pa	t V Endowment Funds. Complete	f the organization ar			T					
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance								 _	
b	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships			*					<u></u>	~
е	Other expenditures for facilities									
	and programs		<u> </u>				_	_		
f	Administrative expenses									
g	End of year balance		[
2	Provide the estimated percentage of the year	r end balance held a	 as:					-	•	_
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%	_							
c		 -								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ind administe	ered for th	e organiz	ation		
	by.						J		Γ¥	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Scher	dule B?					3b	+
4	Describe in Part XIV the intended uses of the	•							<u> </u>	
	t VI Land, Buildings, and Equipm									
	Description of investment				or other	(a) Ac	oumulate	<u>, d</u>	(d) Book	
	pescription or investment	(a) Cost or of basis (investi			or other (other)		cumulate reciation	,u	(u) BOOK	vaiu€
	land	2430 (11146311			1,330.	чер	· JOIAHOIT	-	171	220
	Land					1 4	67 5	1 /		<u>,330.</u>
b	Buildings				0,907.	1,4	67,5			<u>,393.</u>
C	Leasehold improvements				0,145.		<u>5,7</u>			<u>,359.</u>
d	Equipment				8,024.	<u> </u>	$\frac{33,4}{2}$			<u>,608.</u>
	Other				<u>6,390.</u>	L	9,2	<u>U5.</u>		<u>,185.</u>
<u>Tota</u>	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	10(c).)				2,280	<u>,875.</u>

Schedule D (Form 990) 2010

TRUST U/W OF H.C. GRAHAM

Schedule D (Form 990) 2010

57-6029524 Page 3

	dule D (Form 990) 2010 TRUST U/W OF H.C. GRAHAM		57-6029524 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Stat	ements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	. 4	
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	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per I	Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	_
d	Other (Describe in Part XIV.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_j
b	Other (Describe in Part XIV)	4b	
C	Add lines 4a and 4b		4c
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe	r Return
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1	
а	Donated services and use of facilities	2a	_
b	Prior year adjustments	2b	
C	Other losses .	2c	_
d	Other (Describe in Part XIV)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_
b	Other (Describe in Part XIV)	4b	_
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
Pa	t XIV Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a and 4; Part IV, lines	1b and 2b, Part V, line 4; Part
X, line	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp	lete this part to provide any ac	dditional information

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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

1545-0047	10
OMB No	06

Open to Public Inspection . 01 07

Name of the	Name of the organization	1 1 1	26.11.4.00					Employer identification number
Part I	General Information on Grants and Assistance	ind Assistance	GNADAM					57-6029524
1 Doe:	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?	to substantiate th	ne amount of the grant	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the select	tion X Yes
2 Desc	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for mon	itoring the use of grani	t funds in the United	d States]
Part	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	Governments an	nd Organizations in th	ne United States. C	complete if the organization	anization answered "\	es" to Form 990, Part	IV, line 21, for any
1 (a) N	1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of organization (e) EIN (f) Method of organization (f) EIN (f) Method of organization (f) Organization (f) EIN (f) Method of organization (f) Description of organization (f) Method organization (f) Description of organization (f) Method organization (f) Description of organization (f) Description (f) Descri	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash	can be duplicated if (f) Method of valuation (book, EM) appraisal	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTH CARE	HEALTH CARE PARTNERS OF SOUTH CAROLINA - 1608 N MAIN ST -				assistance	other)	VACANT TAND LITTE	TO PROVIDE MEDICAL
CONWAY	sc 29526	57-0679807	501 (C) (3)	0.	423,500, FMV	FMV	ALL UTILITIES	DE MARION COUNTY, SC
								Į
į								
į								
2 Enter	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nd government or	rganizations					
LHA For	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2010)

57-6029524 (Form 990) (2010) TRUST U/W OF H.C. GRAHAM Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2010) Part III

Page 2

(f) Description of non-cash assistance (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) (2010)

SCHEDULĖ L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

2010

Open To Public Inspection

Name of the organization								Employer	dentif	ication n	umber
TRI	UST U/W	OF H	C. GI	AHAM				57-6029524			
Part I Excess Benefit	Transacti	ons (secti	on 501(c)(3) and section	n 501(c)(4) organizatio	ns only)		<u> </u>			
Complete if the orga	990, Part IV,	line 25a or 25b, or Fo	rm 990-E	Z, Par	t V, line 40)b	,				
1 (a) Name of dis	saualified ner	eon			(b) Description of transaction					(c) Corr	ected?
					(5) 50001 pilot of transaction					Yes	<u>No</u>
											
										 	
				<u> </u>						+	
				<u> </u>						+	
			-							+	
2 Enter the amount of tax imp	osed on the	organization	manager	s or disqualifi	ad pareone during the	. vear up	dor				
section 4958	osed on the t	ngar iizatioi	i managen	o or disqualin	ed persons during the	year an	ue:	▶ \$			
3 Enter the amount of tax, if a	inv. on line 2.	above, reim	bursed by	v the organiza	ition			S			
	_		-	_				, ,			
Part II Loans to and/o	r From Int	erested	Persons	S.							
Complete if the orga	anization ansv	vered "Yes	on Form	990, Part IV,	line 26, or Form 990-E	Z, Part V	/, line (
(a) Name of interested				(d) Balance due	(e) In default?		(f) Approved by board or		(g) Written agreement?		
person and purpose	the orga	nization?	ar	mount		deta	ault?	cómn	uttee?	agreer	nent?
	То	From	-				No.	Yes	No	Yes	<u>No</u>
	 		<u> </u>			<u> </u>	ļ	-	 	 	
_ _	 		 			 	<u> </u>	_		-	
	-		 	_		 		<u> </u>		++	
	 		 		, 	 		-		+	
			<u> </u>			 	 	 		 	
	 		 					+ -		† †	
			 			-			 -		
				···				1			
					-						
Total				▶ \$							
Part III Grants or Assis	stance Ber	nefiting l	ntereste	ed Persons	S.						
Complete if the orga	anization ansv	vered "Yes									
(a) Name of interested person (b) Relati			Relationship between interested person and the organization (c) Amount and type of assistance							f	
							\mathbb{T}				
								<u> </u>			
							<u> </u>				
											
							+				

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

Schedule L (Form 990 or 990-EZ) 2010

Schedule L (Form 990 or 990 EZ) 2010 Page 2 Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (e) Sharing of organization's (b) Relationship between interested (a) Name of interested person (c) Amount of (d) Description of person and the organization transaction transaction revenues? Yes No STEWART RICHARDSON OFFICER/DIRECTOR WI 400,090.INVESTMENTS X Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: STEWART RICHARDSON (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: OFFICER/DIRECTOR WITH THE BANK WHICH HC GRAHAM INVESTS ITS CASH

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Department of the Treasury Internal Revenue Service

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Attach to Form 990 or 990-EZ.

Employer identification number

TRUST U/W OF H.C. GRAHAM	57-6029524
FORM 990, PART VI, SECTION B, LINE 11: COPIES OF THE FORM	990 ARE PROVIDED
TO TRUSTEES FOR THEIR REVIEW AND FOLLOWUP QUESTIONS BEFOR	E IT IS SIGNED.
FORM 990, PART VI, SECTION B, LINE 12C: THE TRUSTEES DISC	LOSED ANNUALLY
AND IN TRUST MEETINGS ON ANY MEETING AGENDA ITEM FOR WHICH	H A PARTICULAR
TRUSTEE HAD A CONFLICT OF INTEREST.	
	<u> </u>
FORM 990, PART VI, SECTION B, LINE 15A: THERE WERE NO OFF	CICERS, CEO, KEY
EMPLOYEES, ETC. IF THESE POSITIONS ARE CREATED AND FILLED	IN THE FUTURE,
THE TRUSTEES WILL ANNUALLY REVIEW AND APPROVE COMPENSATION	N BASED ON THE
RESPONSIBILITY, PROBLEM SOLVING AND ACCOUNTABILITY OF EAC	H
POSITION. (COMPENSATION TO THE THREE TRUSTEES IS REPORTED	ANNUALLY TO THE
MARION COUNTY PROBATE COURT WHICH REVIEWS AND APPROVES TH	E COMPENSATION OF
ALL TRUSTEES AS REQUIRED UNDER SOUTH CAROLINA LAW.	
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS WILL BE	MADE AVAILABLE
FOR INSPECTION AT THE OFFICE UPON REQUEST	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
12/31/10 ACCOUNTS RECEIVABLE - ACCRUAL BASIS FOR BOOKS	34,192.
	-