

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



Form 990-PF Department of the Treasury

Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2011 or tax year beginning , and ending Name of foundation A Employer identification number GREGG-GRANITEVILLE FOUNDATION, 57-0314400 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 418 (803)663-7552 City or town, state, and ZIP code C If exemption application is pending, check here SC 29829 GRANITEVILLE, G Check all that apply Initial return initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated ___ Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method X Accrual __ Cash F If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 15,224,200 . (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for chantable purposes (cash basis only) expenses per books income income Contributions, gifts, grants, etc., received 2 Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 382,628. 382,630. STATEMENT 4 Dividends and interest from securities 5a Gross rents D Net rental income or (loss) 407,996 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7,058,647. 407,996. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances D Less Cost of goods sold c Gross profit or (loss) 11 Other income 62,470.STATEMENT 61,771 9,798. ഗ് Total Add lines 1 through 11 9 2012 Ó 852,395. 800,424. 62,470. 12 55,022. 5,502. Compensation of officers, directors, trustees, etc. 0. 49,520. 13 Compensation 14 Other employee salaries and wages 185,594. Ō. 0. 185,594. 15 Pension plans, employee benefits 59,205. 271. 0 58,934. Expenses 16a Legal fees STMT 3 18,830. 9,415. **b** Accounting fees 0. 9,415. 75,467. STMT 4 75,467. 0. c Other professional fees 0. **⊘** ≥ 17 Interest 1. STMT 5 19,071 403. ō. 18,487. 18 Taxes 64,827. 0. 19 Depreciation and depletion 0. 130,358. 130,358. 0. О. Occupancy 3,742.3,742. 21 Travel, conferences, and meetings 0. 0. 22 Printing and publications 1,504. 0. О. 1,504.23 Other expenses STMT 6 160,063.6,827. 62,470. 95,120. 24 Total operating and administrative 773,683. 97,886. 62,470 552,674. expenses Add lines 13 through 23 56,500. 25 Contributions, gifts, grants paid 56,500.26 Total expenses and disbursements 97,886. 830,183. 62,470. Add lines 24 and 25 609,174. 27 Subtract line 26 from line 12 22,212. a Excess of revenue over expenses and disbursements 702,538. b Net investment income (if negative, enter -0-) 0. C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2011)

16,091,106.

967,929.

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ► UNREALIZED LOSSES

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF			ANITEVILLE I			C.			5	7-031	4400	Page 3
. attit	(a) List and descr	ibe the kin	d(s) of property sold (e g r common stock, 200 shs	, real estate,	income	` P	- Purc	nas e '	c) Date a		(d) Dat (mo , da	
12 BANK	OF AMERIC					ט	- Dona	ation	(-9, 9. /	(, 0.	-,,,,,,
	TY BANK ST			-								_
C							_		-			
d												
e			······································			L						
(e) Gi	ross sales price	(1) D	epreciation allowed (or allowable)	plus e	t or other basis xpense of sale					ain or (loss) (f) minus (g)	
a	2,887,544.				2,717,95 3,932,69	8.						,586.
b	4,171,103.			,	3,932,69	3.					238	,410.
C												
d												
Complete	 	u usin in c	l olumn (h) and owned by t	he foundation	on 12/31/69			(1)	Gaine (C	ol (h) gain	minite	
	V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (I)				k), but n	of (fi) gain oot less thar (from col (l	1 -0-) or	
а											169	,586.
b				<u>.</u>								,410.
C				•								
d												
е												
2 Capital ga	ın net income or (net ca	pital loss)		ın Part I, line ın Part I, line	7 7	}	2				407	,996.
	-term capital gain or (los so enter in Part I, line 8,		ed in sections 1222(5) an	d (6)		}				/-		
	enter -0- in Part I, line 8		ii 4040/-\ f	Daduard	Tow on Not		3	aant Ina		N/A		
Part V			ection 4940(e) for ns subject to the section 4					Herr mc	nne			
(i oi optionai	use by domestic private	roundano	ns subject to the section 4	1340(a) (ax 011	net nivestinent in	ICOIIIC	, ,					
If section 494	10(d)(2) applies, leave th	nis part bla	nk									
Was the foun	dation liable for the sec	tion 4942 t	ax on the distributable am	ount of any ye	ear in the base per	rıod?					Yes	X No
			ection 4940(e) Do not co									
1 Enter the		each colun	nn for each year, see instru	uctions before	making any entri						(d)	
A.L. L.	(a) Base period years		(b) Adjusted qualifying dist	tributions	Net value of no	(C) Incha		-lice accetc		Distrib	utión ratio	(0))
Calendary	rear (o'r tax year beginnii 2010	ng in)		2,936.	1401 44110 01110			0,491		(col (b) div		43945
	2009	1		7,239.				5,525				41253
	2008	· · · · · · · ·		4,261.				6,313				58526
	2007		78	7,924.				7,124			.0	45500
	2006		74	6,565.		16	,69	6,572	•		.0	44714
											_	
	ne 1, column (d)								2		. 2	33938
-		-	e period - divide the total o	on line 2 by 5,	or by the number	of ye	ars				0	16700
the found	ation has been in existe	nce if less	than 5 years						3		.0	46788
4 Enter the	net value of noncharitat	ole-use ass	ets for 2011 from Part X,	line 5					4	1	4,577	<u>,955</u> .
5 Multiply li	ine 4 by line 3								5		682	, 073.
6 Enter 1%	of net investment incor	ne (1% of	Part I, line 27b)						6_		7	,025.
7 Add lines	5 and 6								7		689	,098
8 Enter qua	llifying distributions fror	n Part XII.	line 4						8		623	,200
	s equal to or greater that art VI instructions	n line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usin	ng a 1	% tax	rate				

	1990-PF (2011) GREGG-GRANITEVILLE FOUNDATION, INC. 57-0314			Page 4
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ction	ns)
Ήa	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			•
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	4,0	<u>51.</u>
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2	1	4,0	<u>51.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income Subtract line 4 from line 3 if zero or less, enter -0-	1	4,0	<u>51.</u>
6	Credits/Payments Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 14,000.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d	1	<u>4,0</u>	<u>00.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			
9	Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 14 ▶ 9			51.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2012 estimated tax ► Refunded ► 11			
	ert VII-A Statements Regarding Activities	F		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			.,
	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ O. (2) On foundation managers ► \$ O.			
9	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0 •			
•	· · · · · · · · · · · · · · · · · · ·			Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
2	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		-	
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
112	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
٠	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	
Ť	If "Yes," complete Part II, col (c), and Part XV			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	SC			
h	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
-	of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 15	8b		Х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		X

<u>o</u> rm	990-PF(2011) GREGG-GRANITEVILLE FOUNDATION, INC. 57-0314	1400	1	Page 5
	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ PATTI KNIGHT Telephone no ▶ 803-60	53 – 75	552	
	Located at ►P.O. BOX 418, GRANITEVILLE, SC ZIP+4 ►29	9829		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	
	and enter the amount of tax-exempt interest received or accrued during the year	N/	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	. 1	Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
	country >	<u> </u>		
Pέ	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	L '	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
6	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2011?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))		į	
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2011? Yes X No			
	If "Yes,' list the years \		,	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		1	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	·			
t	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.) N/A	2.		[
	,, ,,, ,,, ,,, ,,, ,,, ,,, ,	3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that bad not been removed from jeopardy before the first day of the tax year beginning in 2011?	4h		y
	HAD HIS DEED TECHOVED HURLIEUDATUV DERBE DIE HISLOAV DI HIE IAA VEAF DEUHHIRII III ZUTT (1 4411 [

1 List all officers, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours get week devoted to position (c) Compensation (If not paid, enter -0-) (d) Compensation (If not paid, enter -0-) (e) Expense account, other allowances (e) Expense account, other allowances (e) Expense account, other allowances (f) Title, and average hours get week devoted to position (g) Title, and average hours get week devoted to position (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Compensation (If not paid, enter -0-) (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Expense account, other allowances (g) Compensation (If not paid, enter -0-) (g) Compensation	Form 990-PF (2011) GREGG-GRANITEVILLE FOUND			57-03144	100	Page 6
(1) Carry on propaganta, or otherwise alterange to influence legislation (section 4945(s)? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an animovalization of the state and individual for tavel, study, or other similar purposes? (3) Provide from any purpose offer than eliquous, chartable, scendific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose offer than reliquous, chartable, scendific, literary, or educational purposes, or for the prevention of cruelty to children or animals? In I shay answer is 756 105 (11)(5), daily of the transactions fall to qualify under the exceptions described in Regulations section \$3.4945 for in a cirrent notice regarding disaster assistance check here or the prevention of cruelty to children or animals? If Yes, and the statement required purposes, or for the paint? If Yes, and the statement required by Regulations section \$3.4945 - \$5(g). So but the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact? If Yes, and the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact? If Yes, and the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact? If Yes, and the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact? If Yes, and the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact? If Yes, and the foundation, during the year, year	Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (contin	ued)		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter egistation dense? Yes No	5a During the year did the foundation pay or incur any amount to			1		
any voter registration drive? (3) Provide a grant to an indendual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(3)(1), (2), or (3), or section 4940(1)(2)? (5) Provide for any purpose other than enlapsions, Candrable, soundfile, literary, or educational purposes, or for the prevention of civelty to children or animals? If any answer is 7% 155(1)(5) did any of the transactions fail to quality under the exceptions described in Regulations section 53 4945 or in a current notice regarding desaster assistance (see instructions)? Organizations religion on current notice regarding desaster assistance check here If the answer is 7% 15 to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes, 106, the Form 8870 To all any time during the year, exceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes 106, the Form 8870 To all any time during the year, was the foundation a party to a prohibited tax sheller transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly It stall officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted (c) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Rame and address of each employee paid more than \$50,000 (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation (d) Compensation (d) Compensation (e) Compensation (e) Compensation (e) Compensation (e) Compensation (e) Compensation (e) Compensation (f) Compensation (e) Compensation	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		1
(3) Provide a grant to an organization other than a charitable, etc., organization described in section 508(q(1), (2), or (3), or section 4940(q(2)) (5) Provide for any purpose other than relipious, charitable, scientific, literary, or educational purposes, or for the prevention of circlity to difference anamasis section 53.945 or in a current notice reparding disaster assistance (see instructions) Organizations relying on a current notice reparding disaster assistance (see instructions) Organizations relying on a current notice reparding disaster assistance check here of the answer is "Yes" to question 53.49, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(q). By the foundation, during the year, pay premiums, directly or indirectly, to pay paramiums on a personal benefit contract? If "Yes" to 6b, the Form 8870 34 at any time during the tax year, was the foundation a partly to a promibiled tax sheller transaction? If "Yes" to 6b, the Form 8870 34 at any time during the tax year, was the foundation a partly to a promibiled tax sheller transaction? If "Yes" to 6b, the Form 8870 34 at any time during the tax year, was the foundation a partly to a promibiled tax sheller transaction? If "Yes" to 6b, the Form 8870 34 at any time during the tax year, was the foundation a partly to a promibiled tax sheller transaction? If "Yes" to 6b, the Form 8870 35 at any time during the tax year, was the foundation a partly to a promibiled tax sheller transaction? If "Yes" to 6b, the Form 8870 35 at any time during the tax year, was the foundation apartly to a promibiled tax sheller transaction? If "Yes" to 6b, the Form 8870 36 at the foundation secretary any promises. (a) Name and address of each employees (other than those included on fine 1). If none, enter "NONE." (b) Title, and average (c) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compens	(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire				
(e) Provide a grant to an organization other than a charitable, etc., organization described in section S09(a)(1), (2), or (3), or section 4940(a)(2)? (B) Provide for any purpose other than retigious, charitable, scientific, literary, or educational purposes, or for the prevention of criefly to children or animals? If any answer is %es 150 (1)(5) dut any of the transactions fail to qualify under the exceptions described in Regulations section S3 4945 or in a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? Organizations relying on a current notice regarding diseaster assistance (see instructions)? If Yes, a struct the statement required by Regulations section 53 4945-5(q). But the foundation, during the year, section any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes, a struct the statement required by or midnetity, to pay premiums on a personal benefit contract? If Yes, a struct the foundation, during the year, was the foundation ensure any proceeds or have any net incomine attributable to the transaction? If Yes, a struct the foundation reserve any proceeds or have any net incomine attributable to the transaction? If Yes, and the foundation reserve any proceeds or have any net incomine and proceeds or have any net incomine attributable to the transaction? If Yes, and the foundation reserve any proceeds or have any net incomine and proceeds or have any net incomine any network of the transac	any voter registration drive?					
Sol(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of circlety to children or animals? bit fany answer is "Yes to \$5.(1)(5), old any of the transactions tall to qualify under the exceptions described in Regulations section \$3.494.50 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here if the answer is "Yes to question \$4.44, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$3.4945-5(d). But the foundation, during the year, receive any tunds, directly or indirectly, to pay permitures on a personal benefit contract? If "Yes to 6b, the Form 8870 But the foundation, during the year, pay premitures, directly or indirectly, on a personal benefit contract? If "Yes to 6b, the Form 8870 But the foundation control the year, pay premitures, directly or indirectly, on a personal benefit contract? If "Yes to 6b, the Form 8870 But the foundation or great any proceeds or have any net income attribubble to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly A to previous the foundation receive any proceeds on the way any entire the provided of the foundation of the provided of the foundation receive any proceeds of the provided of the foundation managers and their compensation. (a) Name and address of each employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average for the provided of the position	(3) Provide a grant to an individual for travel, study, or other similar purposes	?	X Ye	s No		
(6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? bill any answer is "Yes" to 5a(1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations religion on current notice regarding disaster assistance check here cit the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," statch the statement required by Regulations section 53 4945-5(d). Bab dite foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" So, the Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Tirustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Tirustees, Foundation Managers, Highly Information About Officers, Directors, Tirustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Tirustees, Foundation Managers, Highly Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation (e) Expense conjugation (e) Compensation (e) Expense conjugation (e) Expense conjugation (e) Compensation (e) Expense conjugation (e) Expense conjugation (e) Expense conjugation (e) Expense allowances (e) Expense allo	(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
b If any answer is "Yes" to 56 (1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding desseter assistance (see instructions)? Organizations relying on a current notice regarding desseter assistance check here If the answer is "Yes" to question 354(), does the foundation claims exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(c). But the foundation, during the year, receive any funds, directly or indirectly, to pay praniums on a personal benefit contract? If "Yes" to 68, the Form 870? The "Yes" to 69, the Form 870? The	509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
b If any answer is "Set" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Set" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Set," affact the statement required by Regulations section 53 4945-5(cf). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," affact the statement required by Regulations section 53 4945-5(cf). 8b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes to So, the Form 887.	(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
section 53 4945 or an a current notice regarding desaler assistance (see instructions)? Organizations relying on a current notice regarding desaler assistance check here C if the answer is "Yes" to question 53(4), does the foundation claim semption from the tax because it maintained expenditure responsibility for the grant? If "Yes," after the statement required by Regulations section 53 4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 65, this Form 8870 B If "Yes" did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average hours per week devoted from paid. (b) Title, and average hours per week devoted for position (c) Compensation (find paid, other sections). SEEE STATEMENT 17 555,022. O. O. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Expense account, other accounts of the highest-paid employees and Count, other account, other account, other accounts of the highest-paid employees account, other account, other accounts of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Carentwees account, other accounts of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expense hours per week devoted to position (d) Carentwees account, other accounts of the high part and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Carentweet account, other accounts of the high part account account, other accounts of the high part account account, other accounts of the high part account ac	•			s X No		
Organizations relying on a current notice regarding disaster assistance check here I If the answer is "Set 5 to question 534/3, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Ses," affact the statement required by Regulations section 53 4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Ses," 165, the Form 8870 Tax At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? The part VIIII Plant and a survey and the foundation receive any proceeds or have any net income attributable to the transaction? The part VIIII Plant and address foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devolved for position for the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expense (f) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$\$50,000 (b) Title, and average for the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Suppose the first paid of the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (f) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (g) Name and address of each employee paid more than \$\$50,000 (h) Title, and average for the first paid of the position of the position of the first paid of the position	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described i	n Regulations			ŧ
tel the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). Be Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8370 The "Yes "A did not foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8370 The "Yes "A way time during the tax year, was the foundation a party to a prohibited tax shetler transaction? Part VIII promation About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Part Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per view of the provided on time 1). If none, enter "NONE." 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation (d) Compensation (e) Expense account, other compensation (e) compensation (e) Expense account (e) E		·		,, <u> </u>	5b	X
expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, reserve any funds, directly or indirectly, to pay premiums on a personal benefit contract? By Did the foundation of the paint of the foundation of the found						-
If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? T''es' to 8. file Form 8870 Yes			. —			
See Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No			I/A Ye	ıs 🔲 No 📗		ł
a personal benefit contract? D to the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 86, the Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? D if "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted hours per week devoted hours per week devoted hours per week devoted to position NONE (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expense and the foundation aparty to a probability of the foundation and the foundation and the probability of the foundation and the foundati		· ·				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position SEEE STATEMENT 17 555,022. 0. 0. Compensation of five highest-paid employees (other than those included on line 1), If none, enter "NONE." (c) Compensation (c) C		pay premiums on				-
## "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? **Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. **(a) Name and address** **(b) Title, and average hours per week devoted to position** **(if) not paid, enter "0-) congeniation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(a) Name and address of each employee paid more than \$50,000** **NONE** **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(b) Title, and average hours per week devoted to position** **(c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." **(e) Compensation of five highest-paid employees (other than those included on line 1). If none, ent	·		Ye	s X No		١
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes, "Mo No		ersonal benefit contract?		_	6b	<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII	·					-
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours ger week devoted to position (c) Compensation (find paid, enter -0-) (d) Compensation (find paid, enter -0-) (e) Expense enter week devoted to position (a) Name and address 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Combusions to employee the employee paid more than \$50,000 (d) Combusions to employee the employee paid more than \$50,000 (e) Title, and average hours per week devoted to position (e) Compensation (f) Combusions to employee the employee paid more than \$50,000 (e) Compensation (e) Compensation (e) Compensation (e) Compensation (e) Expense account, other allowances (e) Compensation (e) Compensation (e) Compensation (e) Expense employee the employee the employee the employee the employee than employee the employee than employee the employee the employee the employee the employee than employee the employee the employee the employee than employee the			Y _E	. –		
1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Compensation (If not paid, enter -0-) (e) Expense account, other allowances (e) Expense account, other compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Compensation compensation (If not paid, enter -0-) (e) Expense account, other compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Compensation employee in the paid account, other account, other address account, other account, other address account, other account				· · · · · · · · · · · · · · · · · · ·	7b	
1 List all officers, directors, trustees, foundation managers and their compensation. (b) Title, and average hours per week devoted to position (c) Compensation (fit not paid, enter -0-) (d) Compensation (fit not paid, enter -0-) (e) Expense properties of the position of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average devoted to position (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compensation (c) Compensation (d) Compensa	Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	ınagers, Highly	/		
(a) Name and address (b) Title, and average hours per week devoted (If not paid enter 0-1). SEE STATEMENT 17 555,022. 0. 0. Compensation continues account, other allowances SEE STATEMENT 17 550,022. 0. 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation employees (c) Expense account, other allowances of expose benefit plans account allowances of expose account allowa		compensation				
SEE STATEMENT 17 55,022. 0. 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation employee the employee account, other allowances.	List an omoors, areators, trastees, tourisation managers and their		(c) Compensation	(d) Contributions to	(0)	Expense
SEE STATEMENT 17 55,022. 0. 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation employee the employee account, other allowances.	(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	acco	unt, other
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation employee benefit plans account, other allowances		to position	enter -u-)	compensation	allo	wances
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation employee benefit plans account, other allowances		-				
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation employee benefit plans account, other allowances	СЕЕ СПАПЕМЕМИ 17		55 022	n	1	Λ
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances	OBE CINIBIDAT 17		33,022.	0.	`	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances						
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances					1	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances						
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances					İ	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances					1	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutors to employee benefit plans and determed compensation allowances (e) Expense account, other allowances					+	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutors to employee benefit plans and determed compensation allowances (e) Expense account, other allowances						
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances	· · · · · · · · · · · · · · · · · · ·	ł			1	
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Commission employee benefit plans and determed and compensation allowances	2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	l	_l	
NONE Compensation allowances		(b) Title, and average		(d) Contributions to	(e)	Expense
NONE	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	and deferred	acco	unt, other wances
	NONE	dovoted to position		comparisation		11011000
Total number of other employees paid over \$50,000					1	
Total number of other employees paid over \$50,000					 -	
Total number of other employees paid over \$50,000		1				
Total number of other employees paid over \$50,000					\dagger	
Total number of other employees paid over \$50,000		1				
Total number of other employees paid over \$50,000					1	
Total number of other employees paid over \$50,000		1				
Total number of other employees paid over \$50,000		-			†	
Total number of other employees paid over \$50,000		1				
	Total number of other employees paid over \$50,000					0

Form 990-PF (2011) GREGG-GRANITEVILLE FOUNDATION, INC.		314400	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manag Paid Employees, and Contractors (continued)	ers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			-
(a) Name and address of each person paid more than \$50,000	b) Type of service	(c) Comp	ensation
NONE	-7 - 77	(3)	
Total number of others receiving over \$50,000 for professional services		>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	uch as the	Expenses	
1 MAINTENANCE OF THE GREGG PARK CIVIC CENTER RECREAT:	ONAL		
COMPLEX			
		552,	674.
2 EDUCATIONAL SCHOLARSHIPS			
		56,	<u>500.</u>
3			
4			
	-		
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount	
1 N/A			
2			
All other program-related investments. See instructions			
3			
Total. Add lines 1 through 3	▶		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	:	
а	Average monthly fair market value of securities	1a	14,699,510.
	Average of monthly cash balances	1b	14,699,510. 100,444.
C	Fair market value of all other assets	10	
đ	Total (add lines 1a, b, and c)	1d	14,799,954.
е	Reduction claimed for blockage or other factors reported on lines 1a and		· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	14,799,954.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	221,999.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	14,577,955.
6	Minimum investment return. Enter 5% of line 5	6	728,898.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	728,898.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 14, 051.		
b	Income tax for 2011 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	20	14,051.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,051. 714,847.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	714,847.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	714,847.
P	art XII Qualifying Distributions (see instructions)		•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		 -
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	609,174.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	14,026.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	623,200.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	623,200.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	uralifiae f	for the section

Form **990-PF** (2011)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

Corpus Years prior to 2010 2010 2011 1 Distributable amount for 2011 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only b Total for prior years 3 Excess distributions carryover, if any, to 2011 a From 2006 b From 2007 c From 2008 19,929 d From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 623,200 defend 2010, but not more than line 2a b Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2011 distributable amount 623,2	
2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2011 a From 2006 b From 2007 c From 2008 d From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 623,200. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2011 a From 2006 b From 2007 c From 2008 d From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 623,200. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	47.
b Total for prior years Color	
Excess distributions carryover, if any, to 2011 a From 2006 b From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \(\brace \) \$ 623,200. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
a From 2006 b From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 623,200. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
a From 2006 b From 2007 c From 2008 d From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \$ 623,200. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
b From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \(\sigma \) \(\frac{623,200}{3,200} \) a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
t From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \(\) \	
d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \(\sigma \) \(\frac{623,200}{200} \) a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
e From 2010 I Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \(\)	
f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \(\) \	
4 Qualifying distributions for 2011 from Part XII, line 4 \(\subseteq \subseteq \frac{623,200}{623,200} \) a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
Part XII, line 4 \(\) \\$ 623,200 \cdot \\ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0 \cdot \end{array}	
a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0.	
b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0 •	
years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0 •	
c Treated as distributions out of corpus (Election required - see instructions) 0.	
(Election required - see instructions) 0.	
the second secon	
A A a dividual A a A A A A A A A A A A A A A A A A A	
	00.
e Remaining amount distributed out of corpus 0.	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	29.
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income Subtract	
line 4b from line 2b	
c Enter the amount of prior years' undistributed income for which a notice of	
deficiency has been issued, or on which	
the section 4942(a) tax has been previously assessed O •	
d Subtract line 6c from line 6b Taxable	
amount - see instructions	
e Undistributed income for 2010 Subtract line	*********
4a from line 2a Taxable amount - see instr	
f Undistributed income for 2011 Subtract	
lines 4d and 5 from line 1. This amount must	
be distributed in 2012 71,7	18.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3)	
8 Excess distributions carryover from 2006	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2012.	
Subtract lines 7 and 8 from line 6a 0.	
10 Analysis of line 9	
a Excess from 2007	
b Excess from 2008	
c Excess from 2009	
d Excess from 2010	
e Excess from 2011	

			FOUNDATION			0314400 Page 10
	art XIV Private Operating F			·A, question 9)	N/A	
1 a	If the foundation has received a ruling o		· · · · · · · · · · · · · · · · · · ·			
	foundation, and the ruling is effective fo	•	· ·	▶	·	
	Check box to indicate whether the found		ng foundation described i		4942(j)(3) or	
2 8	Enter the lesser of the adjusted net	Tax year	(b) 2010	Prior 3 years	(4) 0000	(-) 7-4-1
	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	investment return from Part X for					
	each year listed		<u> </u>			
	9 85% of line 2a		1.	 	·	
C	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not		· · · · · · · · · · · · · · · · · · ·			
١	used directly for active conduct of					
	exempt activities					
F	Qualifying distributions made directly	· · · ·				
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the		-			
	alternative test relied upon 1 "Assets" alternative test - enter					
٠	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
t	"Endowment" alternative test - enter					
	2/3 of minimum investment return shown in Part X, line 6 for each year					
	listed					
C	"Support" alternative test - enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					
	an exempt organization					
D.	(4) Gross investment income		A - Al-i A l i	f al f 1 - 4:	1 05 000	<u> </u>
7	art XV Supplementary Info at any time during t			t the foundation	n nad \$5,000 or	more in assets
	····		ructions.)		·	
1	Information Regarding Foundation	•	M			
•	 List any managers of the foundation wh year (but only if they have contributed n 	o nave contributed more nore than \$5.000) (See s	than 2% of the total conti section 507(d)(2))	ibutions received by the	e toundation before the	e close of any tax
NΟ	NE		(4)(4)			
	List any managers of the foundation wh	o own 10% or more of th	us stock of a corporation /	or an equally large norts	on of the ownership o	f a nartnarahin ar
•	other entity) of which the foundation has	s a 10% or greater interes	st	or all equally large porti	on of the ownership o	i a partifership of
NO	NE					
2	Information Regarding Contributi	on, Grant, Gift, Loan	Scholarship, etc., Pr	ograms:		
	Check here ▶ ☐ If the foundation o				not accept unsolicited	requests for funds If
	the foundation makes gifts, grants, etc	(see instructions) to indiv	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c	, and d
â	The name, address, and telephone num	ber of the person to who	m applications should be	addressed		
SE	E STATEMENT 18					
	The form in which applications should b	e submitted and informa	tion and materials they sh	ould include		
-						
(: Any submission deadlines	·			<u> </u>	
	Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors	

3 Grants and Contributions Paid Duri		Payment		
Recipient Name and address (home or business	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Toopion	-	
ANGELA ARTHUR	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				3,000
LEWIS ARTHUR	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				3,000.
BLAKE BAGGOTT	NONE	N/A	SCHOLARSHIP	
PO BOX 418 GRANITEVILLE SC 29829				2 000
GRANITEVILLE, SC 29029				3,000
HANNAH BRUNSON	NONE	N/A	SCHOLARSHIP	
PO BOX 418 GRANITEVILLE, SC 29829				6 000
GRANITEVILLE, SC 23023				6,000
FANTASIA CHANDLER	NONE	N/A	SCHOLARSHIP	
PO BOX 418 GRANITEVILLE, SC 29829				6,000
Total SE	E CONTINUATION SHE	ET(S)	► 3a	56,500
b Approved for future payment				
LEWIS ARTHUR	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				21,000
BLAKE BAGGOTT	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				15,000
BREANNAH THOMAS	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829	EE CONTINUATION SHE	<u>し</u> FTT / S)	.	2,000
Total SE	THE CONTINUATION SUE	마 # [상]	▶ 3b	131,000

Form 990-PF (2011)

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion code	Amount	function income
a GREGG PARK CIVIC CENTER					62,470.
b					
C					- •
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	382,628.	
 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	<699.>	
8 Gain or (loss) from sales of assets other than inventory			18	407,996.	
9 Net income or (loss) from special events					
0 Gross profit or (loss) from sales of inventory					
1 Other revenue a					
b		<u> </u>			
C		· · · ·			
d					
e					
2 Subtotal Add columns (b), (d), and (e)			0.	789,925.	62,470. 852,395.
3 Total Add line 12, columns (b), (d), and (e)				13	852,395.
See worksheet in line 13 instructions to verify calculations)					

Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of Line No the foundation's exempt purposes (other than by providing funds for such purposes) GREGG PARK CIVIC CENTER IS A DIRECT CHARITABLE ACTIVITY OF THE GREGG GRANITEVILLE FOUNDATION. THE INCOME FROM THIS CENTER REPRESENTS GROSS FEES COLLECTED FOR THE RECREATIONAL AND ATHELETIC PROGRAMS OFFERED BY THE CENTER AND IS, THEREFORE, WITHIN THE ORGANIZATION'S EXEMPT PURPOSE.

Part XV	Information Re Exempt Organi	_	and Transactions a	nd Relationships With Nonc	haritable	•	
1 Did the		ectly engage in any of the followi	no with any other organization	n described in section 501(c) of		Yes	No
	-	(3) organizations) or in section 5		• •			
		ation to a noncharitable exempt o		Lutiono			
(1) Ca	·	ation to a nononanable exempt o	rgumzation of		1a(1)		Х
• •	her assets				1a(2)		Х
	ransactions				\\		
(1) Sa	les of assets to a noncharitat	ble exempt organization			1b(1)		Х
		ncharitable exempt organization			1b(2)		X
(3) Re	ental of facilities, equipment, o	or other assets			1b(3)		X
(4) Re	eimbursement arrangements				1b(4)		X
(5) Lo	ans or loan guarantees				1b(5)		X
(6) Pe	erformance of services or mei	mbership or fundraising solicitati	ions		1b(6)		X
	• • • • • • • • • • • • • • • • • • • •	ılıng lists, other assets, or paid er	· ·		10		X
or serv	rices given by the reporting fo		ved less than fair market value	rays show the fair market value of the goor e in any transaction or sharing arrangemen		ets,	
a) Line no	(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transactions,	and shanng ar	rangeme	ents
		N/A	, ,				
				_			
				-			
2a le tha	foundation directly or indirect	tly affiliated with, or related to, on	ne or more tay-evernat organiz	rations described			
	•	r than section 501(c)(3)) or in se		accombed	Yes	X	No
	," complete the following sch	, ,, ,,	0,000				
	(a) Name of org		(b) Type of organization	(c) Description of relati	onship		
	N/A						
Sign ar Here	nd belief, I is true, correct, and con	riplete Declaration of preparer (other the	nan taxpayer) is based on all inform	statements, and to the best of my knowledge atton of which preparer has any knowledge	May the IRS return with the shown below X Yes	e prepar (see ins	rer
	Signature of officer or trustee	,	Date	Title Check If P1	ΓIN		
	Print/Type preparer's na		signature	Date Check if P1 self- employed	1111		
Daid	DERON B. S	TANCIL, /	13 FAA		200221	710	
Paid Proper	CPA FIT	IOTT DAVIS, LL	Vm /2-////	((b' (V) Firm's EIN > 57 -	200221 -03588		·
Prepare Use On	l l	TOTT DWATE'	С\ЕППС	Firm's EIN > 5 /-	-03368	43	
Joe Off		O. BOX 2278			· · · · ·		
		GUSTA, GA 3090	3	Phone no 706	5 722	909	0
	A0	335111 GA 3090	<u> - </u>		- 122	703	<u>~</u>

FORM 990-PF DEPRECIATION OF ASSE	ETS NOT HELD FOR	RINVESTMENT	STATEMENT 11
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND LAND IMPROVEMENTS BUILDING - RECREATION CONSTRUCTION & IMPROVEMENTS EQUIPMENT FURNITURE & FIXTURES GAME EQUIPMENT OFFICE EQUIPMENT TOTAL TO FM 990-PF, PART II, LN 14	75,711. 83,635. 1,231,047. 1,217,803. 284,588. 100,183. 80,991. 1,967.	0. 70,864. 755,371. 982,071. 274,743. 97,709. 80,991. 1,967.	75,711. 12,771. 475,676. 235,732. 9,845. 2,474. 0. 0.
FORM 990-PF	OTHER ASSETS		STATEMENT 12
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DIVIDEND & INTEREST RECEIVABLE	36,982.	37,681.	37,681.
TO FORM 990-PF, PART II, LINE 15	36,982.	37,681.	37,681.
FORM 990-PF OTH	HER LIABILITIES		STATEMENT 13
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
DESCRIPTION DEFERRED TAX LIABILITY		44,041.	24,683.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B STATEMENT 15

EXPLANATION

SOUTH CAROLINA NO LONGER REQUIRES A COPY OF THE 990-PF TO BE FURNISHED TO THE ATTORNEY GENERAL.

	II - LIST OF OFFICERS, DI TEES AND FOUNDATION MANAG	LIST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
MR. IRA E. COWARD, II PO BOX 418 GRANITEVILLE, SC 29829	PRESIDENT 0.50	0.	0.	0.	
MR. J. PAUL REEVES PO BOX 418 GRANITEVILLE, SC 29829	VICE PRESIDENT 0.50	0.	0.	0.	
MR. JOHN W. CUNNINGHAM PO BOX 418 GRANITEVILLE, SC 29829	VICE PRESIDENT 0.50	0.	0.	0.	
MRS. PATRICIA H. KNIGHT PO BOX 418 GRANITEVILLE, SC 29829	SECRETARY/TREAS	SURER 55,022.	0.	0.	
MR. JERRY R. JOHNSON PO BOX 418 GRANITEVILLE, SC 29829	DIRECTOR 0.50	0.	0.	0.	

3 Grants and Contributions Paid During the	ĭ	1		<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
RICHERT A. DAVIS	NONE	N/A	SCHOLARSHIP	
PO BOX 418	NONE	N/A	SCHODARSHIP	
GRANITEVILLE, SC 29829				1,500
	-			1,500
ANDREW T. GUNTER	NONE	N/A	SCHOLARSHIP	
PO BOX 418				1
GRANITEVILLE SC 29829				3,000
				,,,,,,
KRISTA HERNDON	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				3,000
				,
KELLIE HERRON	NONE	N/A	SCHOLARSHIP	
PO BOX 418		.,		
GRANITEVILLE, SC 29829				6,000
•				,
ISAIAH M. HEYWARD	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				3,000
KENNETH W. SMITH	NONE	N/A	SCHOLARSHIP	
PO BOX 418		,		
GRANITEVILLE, SC 29829				6,000
KELSEY TAYLOR	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				6,000
BREANNAH THOMAS	NONE		SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829			,	4,000
RANDI M. TOMPKINS	NONE		SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				3,000
Total from continuation sheets				35,500

Part XV Supplementary Informati				
3 Grants and Contributions Approved for F				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
FANTASIA CHANDLER	NONE	N/A	SCHOLARSHIP	
PO BOX 418	NONE	N/A	Benobakbali	
GRANITEVILLE, SC 29829				12,000
HANNAH BRUNSON	NONE	N/A	SCHOLARSHIP	
PO BOX 418 GRANITEVILLE, SC 29829				15,000
SAIAH M. HEYWARD	NONE	N/A	SCHOLARSHIP	
PO BOX 418 GRANITEVILLE SC 29829				9,000
KELLIE HERRON	NONE	N/A	SCHOLARSHIP	
PO BOX 418				
GRANITEVILLE, SC 29829				12,000
RICHERT A. DAVIS	NONE	N/A	SCHOLARSHIP	
PO BOX 418	NONE	N/A	SCHOLARSHIP	
GRANITEVILLE, SC 29829				3,000
RANDI M. TOMPKINS PO BOX 418	NONE	N/A	SCHOLARSHIP	
GRANITEVILLE, SC 29829				2 000
ACMITER TRANSPORT				3,000
KRISTA HERNDON	NONE	N/A	SCHOLARSHIP	
PO BOX 418	•			
GRANITEVILLE, SC 29829				21,000
KELSEY TAYLOR	иоие	N/A	SCHOLARSHIP	
PO BOX 418		[,	56.102.10.51.21	
GRANITEVILLE, SC 29829	·			18,000
Total from continuation sheets				

FORM 990-PF DIVIDEND	S AND INTE	REST FROM	SEC	URITIES	STATEMENT	1
SOURCE	GROS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	•
VARIOUS		382,628.		0.	382,62	28.
TOTAL TO FM 990-PF, PART I, I	IN 4	382,628.		0.	382,62	8.
FORM 990-PF	OTHER	INCOME			STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ACCRUAL TO CASH DIVIDENDS & INTEREST OTHER INCOME FROM HEDGE FUND GREGG PARK CIVIC CENTER	_		699. 0. 470.	<699. 10,497.	•	0. 0. 70.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	61,	771.	9,798.	62,47	70.
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS					
AUDIT AND ACCOUNTING FEES	18,830	9	,415	. (9,41	5.
TO FORM 990-PF, PG 1, LN 16B	18,830	9	,415	. (9,41	5.
FORM 990-PF C	THER PROFE	SSIONAL FI	EES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI		(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
INVESTMENT MANAGEMENT FEES	75,467	75	,467	. ().	0.
TO FORM 990-PF, PG 1, LN 16C	75,467	75	,467	• (0.

FORM 990-PF	TAXE	ES	ST	STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
SALES & USE TAX	343.	0.	0.	343.	
PAYROLL TAXES	18,547.	403.	0.	18,144.	
MISCELLANEOUS TAXES	181.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	19,071.	403.	0.	18,487.	
FORM 990-PF	OTHER EX	(PENSES	ST	атемент 6	
	(A)	(B)	(C)	(D)	
DESCRIPTION	EXPÈNSES PER BOOKS	NET ÎNVEST- MENT INCOME	ADĴUSTED NET INCOME	CHARITABLE PURPOSES	
	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES	
GENERAL INSURANCE	EXPENSES PER BOOKS 35,768.	MENT INCOME 1,968.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 33,800.	
GENERAL INSURANCE SUPPLIES	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED	EXPENSES PER BOOKS 35,768.	MENT INCOME 1,968.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 33,800.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS	35,768. 14,590. 53,620. 5,050.	NET INVEST-MENT INCOME 1,968. 0. 505.	ADJUSTED NET INCOME 0. 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620. 4,545.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS EMPLOYEE RELATIONS	EXPENSES PER BOOKS 35,768. 14,590. 53,620.	NET INVEST- MENT INCOME 1,968. 0.	ADJUSTED NET INCOME 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS EMPLOYEE RELATIONS ADJUSTMENT TO CHANGE ACCRUAL	35,768. 14,590. 53,620. 5,050. 900.	NET INVEST-MENT INCOME 1,968. 0. 505. 0.	ADJUSTED NET INCOME 0. 0. 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620. 4,545. 900.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS EMPLOYEE RELATIONS ADJUSTMENT TO CHANGE ACCRUAL TO CASH BASIS	EXPENSES PER BOOKS 35,768. 14,590. 53,620. 5,050. 900.	NET INVEST- MENT INCOME 1,968. 0. 505. 0.	ADJUSTED NET INCOME 0. 0. 0. 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620. 4,545. 900. 35,810.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS EMPLOYEE RELATIONS ADJUSTMENT TO CHANGE ACCRUAL TO CASH BASIS MISCELLANEOUS	35,768. 14,590. 53,620. 5,050. 900.	NET INVEST-MENT INCOME 1,968. 0. 505. 0.	ADJUSTED NET INCOME 0. 0. 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620. 4,545. 900.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS EMPLOYEE RELATIONS ADJUSTMENT TO CHANGE ACCRUAL TO CASH BASIS MISCELLANEOUS EXPENSE OF PRODUCING CIVIC	EXPENSES PER BOOKS 35,768. 14,590. 53,620. 5,050. 900.	NET INVEST- MENT INCOME 1,968. 0. 505. 0.	ADJUSTED NET INCOME 0. 0. 0. 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620. 4,545. 900. 35,810.	
GENERAL INSURANCE SUPPLIES PROGRAMS & ORGANIZED ATHLETICS RETIREMENT PAYMENTS EMPLOYEE RELATIONS	EXPENSES PER BOOKS 35,768. 14,590. 53,620. 5,050. 900. 35,810. 14,325.	NET INVEST- MENT INCOME 1,968. 0. 505. 0. 4,354.	ADJUSTED NET INCOME 0. 0. 0. 0. 0. 0.	CHARITABLE PURPOSES 33,800. 14,590. 53,620. 4,545. 900. 35,810. 14,325.	

FORM 990-PF U.S. AND STA	TE/CITY GOVERNMENT	OBLIGATIONS	STATEMENT 7	
DESCRIPTION	U.S. OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	
BANK OF AMERICA & COUNTY BANK	x	59,047.	59,047	
TOTAL U.S. GOVERNMENT OBLIGATIO	NS	59,047.	59,047.	
TOTAL STATE AND MUNICIPAL GOVER	NMENT OBLIGATIONS			
TOTAL TO FORM 990-PF, PART II,	LINE 10A	59,047.	59,047.	
FORM 990-PF	CORPORATE STOCK		STATEMENT 8	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
BANK OF AMERICA & COUNTY BANK		6,268,390.	6,268,390.	
TOTAL TO FORM 990-PF, PART II,	LINE 10B	6,268,390.	6,268,390.	
FORM 990-PF	CORPORATE BONDS		STATEMENT 9	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
BANK OF AMERICA & COUNTY BANK		2,539,756.	2,539,756.	
TOTAL TO FORM 990-PF, PART II, LINE 10C		2,539,756.	2,539,756.	
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
PRINCIPAL GROUP ANNUITY BANK OF AMERICA & COUNTY BANK	FMV FMV	16,540. 5,382,326.	16,540. 5,382,326.	
DANK OF MIDNICH & COUNTY DANK				

GREGG-GRANITEVILLE FOUNDATION,	INC.		57-0	314400
MRS. JOAN F. PHIBBS PO BOX 418 GRANITEVILLE, SC 29829	DIRECTOR 0.50	0.	0.	0.
MR. JAMES A. RANDALL PO BOX 418 GRANITEVILLE, SC 29829	DIRECTOR 0.50	0.	0.	0.
MR. R. P. TIMMERMAN PO BOX 418 GRANITEVILLE, SC 29829	DIRECTOR 0.50	0.	0.	0.
MR. WILLIAM "SAMMIE" NAPIER PO BOX 418 GRANITEVILLE, SC 29829	DIRECTOR 0.50	0.	0.	0.
MR. GEORGE MITCHELL PO BOX 418 GRANITEVILLE, SC 29829	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	55,022.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 18 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MRS. PATTI KNIGHT, ADMINISTRATOR

P.O. BOX 418

GRANITEVILLE, SC 29829

TELEPHONE NUMBER NAME OF GRANT PROGRAM

803-663-7552

GREGG-GRANITEVILLE FOUNDATION GRANTS

FORM AND CONTENT OF APPLICATIONS

GRANTS - LETTER PROPOSAL; SCHOLARSHIPS - APPLICATION FORM

ANY SUBMISSION DEADLINES

GRANTS - NONE; SCHOLARSHIPS - JUNE 15 FOLLOWING HIGH SCHOOL GRADUATION

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS-AIKEN COUNTY SC AND RICHMOND COUNTY GA; SCHOLARSHIPS-CHILDREN OF EMPLOYEES OF AVONDALE MILLS PLANTS IN GRANITEVILLE, VAUCLUSE OR WARRENVILLE, SC OR AUGUSTA GA (THIS PLANT WAS PREVIOUSLY KNOWN AS GRANITEVILLE CO.) OR RESIDENTS OF GRANITEVILLE, WARRENVILLE AND THE VAUCLUSE SC AREAS