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### Form 990-EZ

Department of the Treasury

Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

2011

OMB No 1545-1150

Open to Public Inspection

AI	For the	e 2011 calend	r year, or tax year beginning	, zuit, and e	naing	, 20
В	Check if a	pplicable	C Name of organization			D Employer identification number
	Addre	ss change				
	_	change	DREHER HIGH SCHOOL FOUNDATION			57-0830872
	Initial		Number and street (or P O box, if mail is not delivered to street address	ss) Room/s	uite	E Telephone number
	Termu		3319 MILLWOOD AVENUE			(803 ) 253-7000
	Amend	ded return	City or town, state or country, and ZIP + 4		<u>-</u>	F Group Exemption
	7	ation pending	COLUMBIA, SC 29205-1828			Number >
G			Cash Accrual Other (specify) ▶		H Check	X If the organization is not
	Nebsi	_			require	ed to attach Schedule B
, 1	ax-exem	pt status	501(c)(3) 501(c)( ) ◀ (insert no ) 4947(	a)(1) or 527	(Form	990, 990-EZ, or 990-PF)
	Check I	/- <del></del>	anization is not a section 509(a)(3) supporting organization		<del></del>	
			A Form 990-EZ or Form 990 return is not required though			
		•	to file a return, be sure to file a complete return	om ooo n (e poste	uru, muy t	se required (see metrotions) Ber
	_		p line 9 to determine gross receipts. If gross receipts are \$200,000 or	more or if total assets (F	Part II	
						s 15,355.
			are \$500,000 or more, file Form 990 instead of Form 990-EZ			
F	art	Check if the	kpenses, and Changes in Net Assets or Furorganization used Schedule O to respond to any	question in this F	ee me in Part I	X
	<del></del>					
	1		gifts, grants, and similar amounts received		r-	
	2		e revenue including government fees and contracts			2
	3		les and assessments			3
	4		ome		-	4
	5 a	Gross amoun	from sale of assets other than inventory 5a			
	b	Less cost or	her basis and sales expenses			
	С	Gain or (loss)	rom sale of assets other than inventory (Subtract line 5b from	line 5a)	崖	5c
	6	Gaming and f	ndraising events			
_	а	Gross income	from gaming (attach Schedule G if greater than			
Ĭ	l	\$15,000)	6a			
Revenue	b	Gross income		contributions		
æ		from fundrais	g events reported on line 1) (attach Schedule G if the			
		sum of such	oss income and contributions exceeds \$15,000) 6b	5,	134.	
	c	Loop direct o	6c	1,	800.	
	d	Net income	(loss) from gaming and sundraising events (add lines	6a and 6b and si	ubtract	
		line 6c).		ATCH 1		6d 3,334.
	7 a	Gross sales	Inventory, less returns and allowances			
	b	Less cost of	7b			
	6	Gross profit of	tross) from sales of inventory (Subtract line 7b from line 7a)			7c
	8		describe in Schedule O) ATCH 2			8 339.
	9		Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8.			9 13,555.
	10	Grants and a	ullar amounts paid (list in Schedule O) ATC	TH 7	··	23,309.
	11					11
rn.	1	Selents paid	or for members		· · · · <del> -</del>	12
Se	12		compensation, and employee benefits		· · · · ⊢	13
Expenses	13		es and other payments to independent contractors		-	
×	14	Occupancy, r	nt, utilities, and maintenance		–	14
	15	Printing, publ	ations, postage, and shipping		· · · ·	15 1,664.
	16	Other expens	s (describe in Schedule O)	۲ <sup>.</sup> ۲	$\cdots \vdash$	
	17	Total expen	es. Add lines 10 through 16	<u> <u></u></u>	▶	24,973.
ţ	18		cit) for the year (Subtract line 17 from line 9)		$\cdots \vdash$	18 -11,418.
Assets	19		fund balances at beginning of year (from line 27, colui		I	
Ä			ure reported on prior year's return)			19 66,910.
Net	20	Other change	in net assets or fund balances (explain in Schedule O)		نــا ك	20
~	21	Net assets or	und balances at end of year Combine lines 18 through 20 .		▶ :	55,512.

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2011)

_	•
≥aa	

Part			,	
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in	this P		T
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
33	detailed description of each activity in Schedule O	33		x
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	34		x
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			x
<b>.</b>	activities (such as those reported on lines 2, 6a, and 7a, among others)?  If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35a 35b		
b c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	330		<del> </del> -
·	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	100		
	during the year? If "Yes," complete applicable parts of Schedule N	36		Х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		45	1.7.1
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	- 6,5 %	, 4 1	`
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	<u>}</u> , `	34	13
39	Section 501(c)(7) organizations Enter		, ţţ	
a h	Initiation fees and capital contributions included on line 9	1 11	\$ 1 2	, · .
b 40a	Gross receipts, included on line 9, for public use of club facilities	¥;; ),		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶, section 4912 ▶, section 4955 ▶	1, 2	ž.	and .
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit	- *	* * * .	100
-	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been	ئسسد		ي شدقت
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		Х
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	13. 13. 13.	4 2 3 3 X	*
	organization managers or disqualified persons during the year under sections 4912,	* 1 , 1 ,	1	3*
	4955, and 4958	* , ' -	2	
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c	اً الله		100
	reimbursed by the organization			17.13
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes " complete Form 8886-T	400	- 222	x
41	transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed  SOUTH CAROLINA NO LONGER REQUIRES FI	LING		
42 a	The organization's books are in care of ►HARRY D. DELOACH  Telephone no. ► 803-77	1-88	55	
	The organization's books are in care of ▶HARRY D. DELOACH  Located at ▶1401 MAIN ST., SUITE 660 COLUMBIA, SC  ZIP+4 ▶ 29201			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	er	Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country ▶	7	,	, .,
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	18 ,	, ,	
С	and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside the U.S?	42c		X
·	If "Yes," enter the name of the foreign country	426		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b		X
C C	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	~ ;	}-
45a	explanation in Schedule O  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	440 45a		X
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	750		
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		x
	E	.m. 99	0 E Z	(2011)

Form 991	DREHER HIGH SCHOOL FOUNDATION 5	7-0830872		Page 4
01111 33	10-22 (20 11)		Yes	No
	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opport to candidates for public office? If "Yes," complete Schedule C, Part I.		,,,,	X
Part \		only. All se	ection	
	501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer			)
	and 52, and complete the tables for lines 50 and 51	•		
	Check if the organization used Schedule O to respond to any question in this Part VI			
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax	x	Yes	No
	year? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		<u>X</u>
	Did the organization make any transfers to an exempt non-charitable related organization?	49a		<u>X</u>
	If "Yes," was the related organization a section 527 organization?	49b		
	Complete this table for the organization's five highest compensated employees (other than officers, directly and the organization) of the organization of the organiza			d key
	employees) who each received more than \$100,000 of compensation from the organization if there is no (b) Title and average (c) Reportable (d) Health benefit		one "	
	(a) Name and address of each employee hours per week devoted to position paid more than \$100,000 (d) Health benefit contributions to employee hours per week devoted to position (Forms W-2/1099-MISC)	ployee (e) Estima eferred other co		
NO	NE			
f	Total number of other employees paid over \$100,000 ▶			
51	Complete this table for the organization's five highest compensated independent contractors who ex \$100,000 of compensation from the organization if there is none, enter "None"	ach received	more	than
		(a) Composite		
(a)	Name and address of each independent contractor paid more than \$100,000 (b) Type of service	(c) Compensation	UII	
NON				
NON				
		<del></del>		
d	Total number of other independent contractors each receiving over \$100,000 ▶			
52	Did the organization complete Schedule A? <b>Note</b> : All section 501(c)(3) organizations and 4947(a)(1)	_		
	nonexempt charitable trusts must attach a completed Schedule A	<b>▶</b> Ye		No
	enalties of perjury, I declare that I have examined this retum, including accompanying schedules and statements, and to the best of my rect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	knowledge and	belief, i	t IS
	7/ 20//			
Cian	May O Ochul	30	<u> 20</u>	17
Sign Here	Signature of officer Date			
	HARRY D. DELOACH Type or print name and title			
		T :/ PTIN		
Paid	Print/Type preparer's name Preparer's signature Date 04/30/2012   Self-empli		2698	1
Prepar	rer DELOACH & WILLIAMSON LIP	57-096481		
Use O	/niv	303-771-8		
	COLUMBIA, SC 29201			
May the	e IRS discuss this return with the preparer shown above? See instructions	► X Ye	s T	No
		Form 99		

## SCHEDULE A

Department of the Treasury

Internal Revenue Service

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number DREHER HIGH SCHOOL FOUNDATION 57-0830872 Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described 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, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 X An organization that normally receives (1) more than 331/3% 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 331/3% 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). 10 11 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 Type Type II c Type III - Functionally integrated d | Type ill - Other 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 II, Type III, or Type III supporting f organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? X 11g(i) (ii) A family member of a person described in (i) above? . . . . . . X 11g(ii) X (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (i) Name of supported (iii) Type of organization (ii) EIN (IV) Is the (v) Did you notify (vi) is the (vii) Amount of organization (described on lines 1-9 organization in support the organization col (I) listed in above or IRC section col (i) organized in col (i) of your governing (see instructions)) your support? in the U.S.? document? Yes Nο Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2011

Total

Page 2

	<u> </u>
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	,					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			4			
6	Public support. Subtract line 5 from line 4	-			,		
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	3001003						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						_
11	Total support. Add lines 7 through 10	Markey Sire of the Co		` { } - } . * * * *	ર કે જે દેવી જો તેવ	Red to the Bury of I	
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here	or the organizat	tion's first, secor	id, third, fourth,	or fifth tax ye	ar as a section	
<u>Sec</u>	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2011 (li	ne 6, column (f	) divided by line	11, column (f))		14	%
15	Public support percentage from 2010						%
16a	331/3% support test - 2011. If the o						
	this box and stop here. The organization	on qualifies as a	a publicly suppo	rted organizatio	on		▶ 🗀
b	331/3% support test - 2010. If the c	-					
	check this box and stop here. The orga	anızatıon qualıfı	es as a publicly	supported orga	ınızatıon		▶ 📖
17a	10%-facts-and-circumstances test - 2	_	•				
	10% or more, and if the organization					•	•
	Part IV how the organization meets t			•	•	•	upported
	organization						▶ 📖
b	10%-facts-and-circumstances test - 2		•				
	15 is 10% or more, and if the orga	anızatıon meets	s the "facts-and	d-circumstances	" test, check t	his box and sto	op here.
	Explain in Part IV how the organization				_	*	
	supported organization						▶ 📙
18	Private foundation. If the organization				•		<del></del>
	instructions	<u></u>	<i></i> .	<u></u>		<u></u> <u></u>	<u> ▶                             </u>

Schedule A (Form 990 or 990-EZ) 2011

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 qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees					1	
	received (Do not include any "unusual grants ")	2,356.	11,250.	7,570.	11,583.	9,882.	42,641
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	58,462.	8,830.	2,603.	6,886	5,473.	82,254.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the		-				
	organization's benefit and either paid					İ	
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge			ŀ		}	
6	Total. Add lines 1 through 5	60,818.	20,080.	10,173.	18,469.	15,355.	124,895.
7 a	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			ľ		Ì	
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
-	line 6)			-		1	124,895.
Sec	tion B. Total Support		<del></del>				
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	60,818.	20,080.	10,173.	18,469.	15,355.	124,895.
10a	Gross income from interest, dividends,						
	payments received on securities loans,			i			
	rents, royalties and income from similar sources	1,693.	876.	42.		135.	2,746.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		1	ľ		1	
	acquired after June 30, 1975						
С	Add lines 10a and 10b	1,693.	876.	42.		135.	2,746.
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly			1			
12	Other income Do not include gain or						
	loss from the sale of capital assets		}				
	(Explain in Part IV)			ļ		ļ	
13	Total support (Add lines 9, 10c, 11,						
	and 12 )	62,511.	20,956.	10,215.	18,469.	15,490.	127,641.
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year as	a section 501(	c)(3)
	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2011 (line 8	, column (f) divide	ed by line 13, colum	nn (f))		15	97.85%
16	Public support percentage from 2010 Sche					16	96.79%
Sec	tion D. Computation of Investmen	nt Income Per	centage				
17	Investment income percentage for 2011 (lin			3, column (f))		17	2.15%
18	Investment income percentage from 2010				To the second se	18	3.21%
19a	331/3% support tests - 2011. If the org						nd line
	17 is not more than 331/3%, check th						. [7.7]
b	331/3% support tests - 2010 If the orga	•	_		•	•	
	line 18 is not more than 331/3%, check				•		
20	Private foundation if the organization			•		• • • •	-

Schedule A (Form 990 or 990-EZ) 2011

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information. (See instructions).

### SCHEDULE O

(Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

Employer identification number

Name of the organization DREHER HIGH SCHOOL FOUNDATION			ntification number 330872
FORM 990EZ, PART I - FUNDRAISING EVENTS	AND ACTIVITIES	ATTACHME	NT 1
DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
DREHER'S GOT TALENT / DRAMA	1,250.		1,250.
BARBEQUE FUNDRAISER	3,884.	1,800.	2,084.
TOTALS	5,134.	1,800.	3,334.
FORM OODER DARM TO OWNER DEVENUE		ATTACHME	NT 2
FORM 990EZ, PART I - OTHER REVENUE			
BRICK PAVERS			150.
SCHOOL MEMORABELIA			89.
ORCHESTRA CAMPAIGN			100.
TOTALS			339.
		ATTACHME	VT 3
FORM 990EZ, PART I - OTHER EXPENSES			
INSURANCE			750.
LICENSES & PERMITS			50.
BANK CHARGES			135.
PRINTING			729.
TOTAL		- -	1,664.
		ATTACHMEI	ν <b>τ</b> Δ
FORM 990EZ, PART II - CASH, SAVINGS AND I	NVESTMENTS	ATTACHIBI	
DESCRIPTION	В	EGINNING OF YEAR	END OF YEAR
CASH		66,910.	55,512.
TOTALS		66,910.	55,512.

Schedule O (Form 990 or 990-EZ) 2010	Page
Name of the organization DREHER HIGH SCHOOL FOUNDATION	Employer identification number 57-0830872
FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMP	ATTACHMENT 5
PROMOTE ACADEMIC PROGRAMS AND SCHOLARSHIPS	
	ATTACHMENT 6
FORM 990EZ, PART III - OTHER PROGRAM SERVICES	CDANIEC AND
DESCRIPTION	GRANTS AND ALLOCATIONS EXPENSES

OTHER OPERATINAL EXPENSES

TOTALS

1,664.

1,664.

	AMOUNT		5,500.			16,809.			22,309.
ATTACHMENT 7	PURPOSE OF GRANT OR CONTRIBUTION		PROVIDE TEN TO TWELVE SCHOLARSHIPS TO GRADUATING	SENIORS FROM DREHER HIGH SCHOOL.		SUPPORT SCHOOL NEEDS			TOTAL CONTRIBUTIONS PAID
S AND SIMILAR AMOUNTS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT		NONE			EDN CREATED TO SUPPORT THE SCHOOL	SECTION 115		
FORM 990EZ, PART I - GRANTS AND SIMILAR AMOUN'	N EXCESS OF \$5000 RECIPIENT NAME AND ADDRESS	GRANTS PAID	SCHOLARSHIPS - 11 STUDENTS	DREHER HIGH SCHOOL	COLUMBIA, SC	DREHER HIGH SCHOOL	3319 MILLWOOD AVENUE	COLUMBIA, SC 29205	

EMPLOYEES	
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AND	
TRUSTEES	
DIRECTORS,	
OFFICERS,	
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FORM	

NAME AND TITLE	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	REPORTABLE COMPENSATION (FORM W-2/ 1099-MISC)	HEALTH BENEFITS, CONTRIBUTION TO EMPLOYEE BENEFIT PLANS AND DEFFERED COMPENSATION	ESTIMATED AMOUNT OF OTHER COMPENSATION
CHARLES AUSTIN, JR. 3319 MILLWOOD AVENUE COLUMBIA,	BOARD MEMBER 1.00 , SC 29205-1828	0	0	0
HARRY D. DELOACH 3319 MILLWOOD AVENUE COLUMBIA,	TREASURER 5.00 , SC 29205-1828	0	0	0
DEBBRA KINDER 3319 MILLWOOD AVENUE COLUMBIA,	CO-PRESIDENT 10.00 , SC 29205-1828	0	0	0
SALLIE HOOK BOGGS 3319 MILLWOOD AVENUE COLUMBIA,	CO-PRESIDENT 5.00 , SC 29205-1828	0	0	0
JO ANN CAMPBELL 3319 MILLWOOD AVENUE COLUMBIA,	BOARD MEMBER 1.00 , SC 29205-1828	0	0	0
JANIE LANGLEY 3319 MILLWOOD AVENUE COLUMBIA,	BOARD MEMBER 1.00 , SC 29205-1828	0	0	0
BETH HOOK BOLTON	BOARD MEMBER			

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND TITLE	TITLE AND AVERAGE HOURS PER WEEK DEVOTED ( TO POSITION	COMPENSATION (FORM W-2/	HEALTH BENEFITS, CONTRIBUTION TO EMPLOYEE BENEFIT PLANS AND DEFFERED COMPENSATION	ESTIMATED AMOUNT OF OTHER COMPENSATION
3319 MILLWOOD AVENUE	1.00 COLUMBIA, SC 29205-1828	0	0	0
DIANNE BOYD 3319 MILLWOOD AVENUE	BOARD MEMBER 1.00 COLUMBIA, SC 29205-1828	0	0	0
LUCIA PIRISI-CREEK 3319 MILLWOOD AVENUE	VICE-PRESIDENT 3.00 COLUMBIA, SC 29205-1828	0	0	0
HERB CROW 3319 MILLWOOD AVENUE	BOARD MEMBER 1.00 COLUMBIA, SC 29205-1828	0	0	0
NOLA BURNETTE 3319 MILLWOOD AVENUE	BOARD MEMBER 1.00 COLUMBIA, SC 29205-1828	0	0	0
LARRY MCKEOWN 3319 MILLWOOD AVENUE	BOARD MEMBER 1.00 COLUMBIA, SC 29205-1828	0	0	0
LORI OUTEN	BOARD MEMBER 1.00	0	0	0

ATTACHMENT 8

57-0830872 ATTACHMENT 8 (CONT'D)

KEY EMPLOYEES
AND
TRUSTEES
, DIRECTORS,
)FFICERS
OF
LIST
IV
PART
990EZ,
FORM

ESTIMATED AMOUNT OF OTHER COMPENSATION		0		0
HEALTH BENEFITS, CONTRIBUTION TO EMPLOYEE BENEFIT PLANS AND DEFFERED COMPENSATION		0		0
S COMPENSATION OTED (FORM W-2/		EX OFFICIO MEMBER  1.00 0		0
TITLE AND AVERAGE HOUF PER WEEK DEV TO POSITION	COLUMBIA, SC 29205-1828	EX O	COLUMBIA, SC 29205-1828	GRAND TOTALS
NAME AND TITLE	3319 MILLWOOD AVENUE	JEANNE STIGLBAUER	3319 MILLWOOD AVENUE	

ATTACHMENT 8