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PRESBYTERIA 02/09/2012 4 33 PM Pg 8 Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2011 Open to Public

	TIAI Reven	The organization may have to use a copy of this feturi to satisfy state	, topotting rodal		HISPECTON
<u>A</u>	For the	e 2011 calendar year, or tax year beginning , and ending			
В	Check if ap	oplicable C Name of organization First Presbyterian Church		D Employ	yer identification number
	Address ch	hange Foundation			
\exists	Name cha	Doing Rusiness As	_	57-	1011248
\equiv		Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
닏	Initial retur	P.O. Box 326		864	1-235-0496
	Terminated	d City or town, state or country, and ZIP + 4			
П	Amended i	retum Greenville SC 29602-0326		G Gross rece	eipts\$ 344,144
\exists		F Name and address of principal officer			
L	Application	Eddie Terrell	H(a) Isthisag	roup return for	affiliates? Yes X No
		P.O. Box 326	H(b) Are all af	filiates include	od? Yes No
		Greenville SC 29602-0326	If "No	o," attach a list	(see instructions)
$\overline{}$	Tax-exem		7		
<u>.</u>	Website		H(c) Group ex	emption numb	per 🕨
<u>-</u>			Year of formation 1		M State of legal domicile SC
*****	art I	Summary			
		Briefly describe the organization's mission or most significant activities	_		
an.		To benefit First Presbyterian Church and other churche	s in the	Greenv:	ille
2		South Carolina community and the churches' Christian m			
E		boath tartina toninarity and the three times the siling			
€\$	1 2 0	Check this box ▶ if the organization discontinued its operations or disposed of more than 2	5% of its not ass	cate	
ĘĞ	2 0	Number of voting members of the governing body (Part VI, line 1a)	J /0 OI ItS HET AS	3	4
∞ ©⊘				4	4
WActivities & Governance	* "	Number of independent voting members of the governing body (Part VI, line 1b)		5	0
点	3 1	Fotal number of individuals employed in calendar year 2011 (Part V, line 2a)		6	4
**	6	Total number of volunteers (estimate if necessary)			<u> </u>
		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
	b r	Net unrelated business taxable income from Form 990-T, line 34	Prior Yea	7b	Current Year
Revenue (III	م و ا	Contributions and grants (Part VIII, line 1h)		8,085	236,765
ē	9 F	Program service revenue (Part VIII, line 2g)		0,000	
le le	40		 ,	6,693	11,872
8	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		3,352	4,154
L 21	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,426	252,791
_	7	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,523	114,767
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)	7.7	5,525	114,707
		Benefits paid to or for members/(Pan)X, column (A), line 4)		4,848	5,093
es	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		1,010	5,033
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e) Fotal fundraising expenses (Part IX, column (D), line 25) ▶			
Expe	b⊺	Total fundralsing expenses-(Párt/IX, columni(D), line 25) ▶		- 702	6 456
ш	'' \	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,793	6,456
		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		4,164	126,316
. "	19 F	Revenue less expenses Subtract line 18 from line 12		2,738	126,475 End of Year
Net Assets or	20 -	Fatal accests (Part V. line 4C)	Beginning of Cur	8,383	2,685,323
Sse	20 1	Total assets (Part X, line 16)		4,642	1,486,546
t d	21 1	Total liabilities (Part X, line 26)		3,741	1,198,777
		Net assets or fund balances Subtract line 21 from line 20	1,00	J, / TI	1,150,111
	art II	Signature Block			and bolief it is
U tr	nder pen	nalties of perjury. I declare that I have examined this return, including accompanying schedules and statem act, and complete. Declaration of prepared (other than officer) is based on all information of which preparer	ents, and to the b has anv knowledd	estormy kr	lowledge and belief, it is
			,		-28·-12
0:-		Signature of officer		Date	. ~2612
Sig	-				
He	re	Edward Stall Treas	urer		
		Type or print name and title	Date	051	If PTIN
Da:		Print/Type preparer's name		Check	L-J"
Pai		Thomas R. Larson, CPA Thomas R. Tarson, CPA		/12 self-en	
	parer	Firm's name Renita M. Owens, CPA, LLC	F	Firm's EIN	26-4049405
USE	Only	1441 Augusta Street			064 000 4160
		Firm's address > Greenville, SC 29605	F	Phone no	864-233-4163
		S discuss this return with the preparer shown above? (see instructions)			Yes No
For		work Reduction Act Notice, see the separate instructions.			990 (2011)
~~~					

Form 990 (2011) I	First Presbyt	erian Church	57-1011248	Page <b>2</b>
	_	n Service Accomplishments contains a response to any quest	ion in this Part III	П
	be the organization's miss		, or many and a com-	
			d other churches in	the Greenville
South Ca	rolina commu	nity and the church	es' Christian minist	ry.
2 Did the organ	nization undertake any sig	nificant program services during the ye	ar which were not listed on the	
•	90 or 990-EZ?			Yes X No
	cribe these new services of			
3 Did the organ services?	nization cease conducting	, or make significant changes in how it	conducts, any program	Yes X No
If "Yes," desc	cribe these changes on So	chedule O		
4 Describe the	organization's program se	ervice accomplishments for each of its	three largest program services, as measui	ed by
expenses Se	ection 501(c)(3) and 501(c	c)(4) organizations and section 4947(a)	(1) trusts are required to report the amoun	t of
grants and all	locations to others, the to	tal expenses, and revenue, if any, for e	ach program service reported	
4a (Code	) (Expenses \$	114,767 including grants		
			ovide donor's with the	
			naries, care givers,	etc. with funds
to accom	plish their	goals.		
4b (Code	\/F:::::		-f 0 \ /Dougn	
+b (Code	) (Expenses \$	including grants	of \$ ) (Revenu	) ie 4
4c (Code	) (Expenses \$	including grants	of \$ ) (Revenu	ie \$ )
Ad Other	(Deserte: 0	Saha dula O )		
(Expenses \$	n services (Describe in S	including grants of \$	) (Revenue \$	١
	m service expenses <b>&gt;</b>	114,767	/ (1.0 tolide w	

_ P8	art iv Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			v
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		x
•	Part III	-		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
		6	$\mathbf{x}$	
7	"Yes," complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including easements to preserve open space,	<del>*</del>		
,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	•		
•	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		1	
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
		10		<b>X</b> _
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	1	ļ	!
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	l	ŀ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
		11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			7.
	- separate and analysis and an array and an array and an array and a separate and	11d		X
е		11e		X
f				v
		11f	-	X
12a		12a	İ	х
		12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12b		х
13	English and the second of the	13		X
14a		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			
		14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	•	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
		16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		}	
		17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	Tres, complete concedic c, r are m	19		X
20a	Bid the diguination operation of the property and the property of the property	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			Yes	No_
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 19 if "Yes," complete Schedule I, Parts I and II	21	_X_	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		ł	
	on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		[	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	-	ļ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		1	
	through 24d and complete Schedule K If "No," go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		ļ	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		]	
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	- 1	l	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		ĺ	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		İ	
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
þ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
86	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			-
_	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	}	J	77
_	Part VI	37		X
88	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	_	<u> </u>	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Fon	m 990	(2011)

18 Enter the number reported in Box 3 of Form 1088 Enter-0- if not applicable  19 Enter the number of Forms W-25 included in line 1s Enter-0- if not applicable  19 Enter the number of Forms W-25 included in line 1s Enter-0- if not applicable  20 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) within the Association of the State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State of State	I. C	Check if Schedule O contains a response to any question in this Part V					
be Enter the number of Forms W-2G included in line 1s Enter-0-6 not applicable   16   0						Yes	No
Country of the organization comply with backus withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return  If at least one is reported on the 2.2 and the organization file all required federal employment tax returns?  Note. If the sum of lines I is and 2 as greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines I is and 2 as greater than 250, you may be required to enter (see instructions)  3b If Yes, has if filed a Form 990-T for the year? If Yo., provide an explanation in Schedule O  3b If Yes, has if filed a Form 990-T for the year? If Yo., provide an explanation in Schedule O  3c If Yes, a finish the name of the foreign country love, a financial account in a foreign country love, a financial account in a foreign country love, a financial account in a finish growth of the provided tax schedulers and the provided tax schedulers and the provided tax scheduler framework or filing requirements for Form TD F 90-22 1. Report of Foreign Bank and Financial Accounts  5c Was the organization a party to a prohibited tax scheduler framework or filing requirements for Form TD F 90-22 1. Report of Foreign Bank and Financial Accounts  5c If Yes' to line 5a or 5b, did the organization file form 8888-7?  5c If Yes' to line 5a or 5b, did the organization file Form 8888-7?  5c If Yes' to line 5a or 5b, did the organization file form 8888-7?  5d Did any taxability contributions that were not tax deductable?  6d Did any taxability of organization and years scale party of the device of the organization organization and years are promised that the scale organization organization and years are promised to the form 889 as required to file organization organization organization organization organization organization organization organization organization organiza	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a				
reportable gaming (gambing) winnings to prize winners?  Enter the number of amployees reported on Form W-3. Transmittal of Wage and Tax Sitements, filed for the celendar year ending with or within the year covered by this return  Note. If the sum of lines is and 2 as ig greater than 250, you may be required to e-file (see instructions)  Note. If the sum of lines is and 2 as ig greater than 250, you may be required to e-file (see instructions)  If "Yes," has if filed a Form \$90-7 for this year? If "No." provide an explanation in Schedule O  If "Yes," has if filed a Form \$90-7 for this year? If "No." provide an explanation in Schedule O  If "Yes," and the organization have an interest in, or a signature or other authority over, a financial account in steepin country (such as a bank secount, securities account, or other financial account)  If "Yes," enter the name of the foreign country to the a bank secount, securities account, or other financial account in segmentation in Schedule O  If "Yes I online 6 are 05, bit of the organization that it was or is a party to a prohibited tax sheller transaction?  If "Yes," do the organization in Party and it was or is a party to a prohibited tax sheller transaction?  If "Yes," do the organization in Party and it is a party to a prohibited tax sheller transaction organization active and year and the organization in Schedule O  If "Yes," do the organization include with every solicitation an express statement that such contributions or gifts were not tax deductable?  If "Yes," do the organization include with every solicitation an express statement that such contributions or gifts were not tax deductable?  If "Yes," do the organization receive a somethy the donor of the value of the goods or services prowded?  If "Yes," include the organization receive a somethy the donor of the value of the goods or services prowded?  If "Yes," include the organization receive a contribution of organization in the party and the organization receive a contribution of organization in the organi	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	] 0			ĺ
2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2 Interest one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  A tary time derring the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  4a Tary time federing the calendar year, did the organization have an employment of the sum of the foreign country over, a financial account?  5a Was the organization a party to a prohibited tax sheller transaction of the tax year?  5b Us an year tax the sum of the foreign country be seen instructions for filing requirements for from TDF 90-22 1, Report of Foreign Bank and Financial Accounts  5a Was the organization solicit any contributions under self-transaction at any time during the tax year?  5a Did any taxobe party notify the reginarization file Form 8868-1?  5b Us if "Yes", indicat any contributions that were not tax deductible?  6c Did the organization newled any support in excess of \$75 made party as a contributions and party for goods and services provided to the payor?  7c Did the organization received a contribution on under section 170(c).  7d Did the organization received a symmetry than of the goods or services provided?  7d	С	Did the organization comply with backup withholding rules for reportable payments to vendors and					ĺ
Statements, filed for the calendar year ending with or within the year covered by this return    2a   0		reportable gaming (gambling) winnings to prize winners?			1c	ļ	
If It least one is reported on line 22, did the organization file all required feeler employment tax returns?   Note. If the sum of lines 1 and 2 as greater than 250, you may be required to e-file (see instructions)   3a   John Horizon, and the companization have unrelated business gross income of \$1,000 or more during the year?   3a   John Horizon, and the companization have unrelated business gross income of \$1,000 or more during the year?   3b   John Horizon, and the companization have unrelated business gross income of \$1,000 or more during the year?   3b   John Horizon, and the companization have unrelated business gross income of \$1,000 or more during the year?   3b   John Horizon, and the companization and the companization or the feeling of the companization and secountly over, a financial accountly over, a financial account in a foreign country   4a   John Horizon, and the companization and the companization and the companization and the seek the companization and the seek the companization and the companization and the value of the foreign country   5c   John Horizon, and the companization and the value of the pagnization file Form 8886.17   5c   5c   5c   5c   5c   5c   5c   5	2a						İ
Note. If the sum of limes 1a and 2a is greater than 250, you may be required to e-file (see instructions)  a Did the organization have unrelated business gross income of \$1.00 or more dumpt the year?  3a 2  b if Yes. *Nas it filed a Form 990-T for this year? If 'No,* provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?  b if Yes,* enter the name of the foreign country ▶  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5a Was the organization of the organization that it was or is a party to a prohibeted tax shelter transaction?  5b Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization for borganization for this december organization should with every solicitation an express statement that such contributions or gifts were not tax deductible?  b if Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  b if Yes,* did the organization microlive with every solicitation an express statement that such contributions or gifts were not tax deductible?  c organizations that may receive deductible contributions under section 170(c).  b if the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided for the payor?  7a 2  b if Yes,* did the organization notify the donor of the value of the goods or services provided?  7b if Yes,* did the organization notify the donor of the value of the goods or services provided?  7c 2  bit the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?  7c 3  bit the organization receive any funds, directly or indirectly, to a personal benefit con				0			İ
33 Did the organization have unrelated business gross income of \$1,000 or more during the year?  44 If "Yes," is at 8 fide a Form 990-71 for this year? If No." provide an explanation in Schedule O  45 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country [such as a bank account, securities account, or other financial account in a foreign country [such as a bank account, securities account, or other financial accounts See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  4a 2  5b If "Yes," enter the name of the foreign country [see Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5c Was the organization a party to a prohibited tax sheller transaction at any time during the tax year?  5c If "Yes to line Sa or Sb, did the organization filing that was or is a party to a prohibited tax shelter transaction?  5d Did any taxable party norty the organization filing that was or is a party to a prohibited tax shelter transaction?  5d Did the organization shelt may receive deductible?  6d Did the organization shelt may receive deductible contributions an express statement that such contributions or gifts were not tax deductible?  6d Did the organization that may receive deductible contributions under section 170(c).  6d Did the organization receive an apyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7d Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive an apyment the excess of \$75 made party as a contribution and party for goods and services provided?  9 Did the organization receive any tunds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization self-accordance organization and the self-accordance organization filing form 8899 as required?  10 Did the organization receive any funds, d	Ь				2b	$\vdash$	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4 At any time during the calendar year, did the organization have an interest, in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country ▶  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Was the organization a part by a prohibetid six sheller triansaction at any time during the tax year?  5 a J  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter triansaction?  5 b Did should be organization as a manual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  5 c If "Yes" to line 5 as of 50, did the organization file Form 8886-T?  5 c Does the organization have nounally gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  6 a J  7 b If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 organizations that may receive deductible contributions under section 170(c).  8 b If Yes," did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  9 b If Yes," did de organization intoly the donor of the value of the goods or services provided?  10 b The organization received a contribution of qualified intellectual property for which it was required to file Form 8282.  11 b G Form 8282.  12 c J T d  12 c J T d  13 c J T d  14 b H the organization exceeded a contribution of qualified intellectual property, did the organization file a Form 1098-C?  15 Sponsorting organizations maintaining donor advised funds and section 509(q)(3) su			ons)				v
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b ii Tes, has it flied a form 720 to report these payments in the, provide an explanation in estimates	14a	· · · · · · · · · · · · · · · · · · ·	dulo O				┼^
	<u>b</u>	ir "Yes," has it filed a Form 720 to report these payments 7 ir "No," provide an explanation in Sche	uule O				0 (2011

57-1011248 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule X O See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code ) Yes No Х 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 X 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 200 W. Washington St organization ▶ Ed Terrell

864-235-0496

SC 29601

Greenville

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if neither the orga	anization nor an	y rela	ted	orga	nıza	tions	con	pensated any current office	er, director, or trustee	
(A) Name and Title	(B) Average hours per week (describe	bo	x, unle icer at	ss pe	ition more rson i	than or s both r/truste	an e)	(D) Reportable compensation from the	(E)  Reportable  compensation from  related  organizations  (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) Eddie Terrell						Н				
Chairman	5.00	X				Ш		0	0	0
(2) Edward Stall										
Treasurer	5.00	X						0	0	0
(3) John Bearden										
Vice Chairman	5.00	X						0	0	0
(4) Mary Ann Brown		T								
Secretary	5.00	X		ļ				0	0	0
(5)										
(6)										
(7)										
(8)										
(9)										
(10)									<u></u>	
(11)								-		
(12)		ļ								
(13)					<u> </u>					
(14)	-	+-								

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	d Employees (continued)	
(A) Name and title		_ · · · · · · · · · · · ·				ition more rson i	s both	an	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(	organization and related organizations
15)									7		
6)											
7)											
8)											
19)											
20)											
21)					:						
22)											
23)	·····										
24)											
(5)											
1b c	Sub-total Total from continuation she	ets to Part VII, S	Secti	on A	١.			<b>&gt;</b>			
<u>a</u> 2	Total (add lines 1b and 1c)  Total number of individuals (in	_			thos	e lıs	ted a	bov	I e) who received more than	1 \$100,000 in	
 3	reportable compensation from								and as highest sampage		Yes
•	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organ	complete Scheen complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete complete compl	dule of re	J for porta	suci able	on one	lividu ipens	al atio	n and other compensation	from the	3
5	individual  Did any person listed on line 1 for services rendered to the or	a receive or acc	rue d	omp	ensa	atıor	n fron	n an	y unrelated organization o		5
Sec 1	ction B. Independent Contract Complete this table for your five	ors								than \$100,000 of	
_	compensation from the organi								dar year ending with or with		r (C) Compensation
	Name and	business address							Descrip	nion of services	Compensation
								<del>                                     </del>			
		-									
_	Total number of independent of	antrostoro (incli	ıdına	but	not l	ımıtı	ad ta	tha	an listed about who	*	

Pa	rt V	III Statement of Reve	enue						·
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
হ হ	10	Federated campaigns	1a			· · · · · · · ·	Tevendo		0.12, 0.10, 0.10, 1
ran Lui	h	Membership dues	1b	<del></del>					
ΘĒ		Fundraising events	1c						
ifts	٦	Related organizations	1d						
aj. Bis	u	Government grants (contributions)	1e						
Sir	•	All other contributions, gifts, grants,	Te						
i ti	'	and similar amounts not included above	1f		236,765				
O.	_			 \$	230,703				
ξĒ	g		-11 -	₽		236,765			
Program Service Revenue Contributions, Gifts, Grants	- "	Total. Add lines 1a-1f	-		Busn Code	230,703			
eun	20				Busn Code				
Şe	2a b					<del></del>			
8						·		<del> </del>	
ēΖ	d								
Š	u						<del></del>		,
grai	e	All other program conuce rove	muo		·				
P.	' '	All other program service reversed. Add lines 2a–2f	ilue				, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	
_	_ 9	Investment income (including	dıvıdar	de intere			William		
		and other similar amounts)	aividei	ius, intere	,st,	11,872			11,872
	4	Income from investment of tax	v.evem	nt bond n	roceeds •				
	5	Royalties	CACIII	pt bond p	1000000				
		(i) Real		(II) F	Personal		· · · · · · · · · · · · · · · · · · ·		
	6a		,507	,, ·					
	ь		, 353						
	c		,154		<del></del>				
	d	Net rental income or (loss)	,			4,154			4,154
		7a Gross amount from (i) Securities (ii) G		Other	- (				
		sales of assets other than inventory		<u> </u>					
	b	Less cost or other							
	_	basis & sales exps							
	c	Gain or (loss)							
	d			<u> </u>	<b>•</b>				
		Gross income from fundraising eve	ents						
ıυe		(not including \$							
, ve		of contributions reported on line 1c	a						
Other Reven		See Part IV, line 18	a						
her	h	Less direct expenses	b						
ō		Net income or (loss) from fund	(	events					
		Gross income from garning activities		,					
		See Part IV, line 19	а						
	b	Less direct expenses	b						
		Net income or (loss) from gan	ning ac	tivities	<b>•</b>				
		Gross sales of inventory, less							
		returns and allowances	а						
	b	Less cost of goods sold	b		=				
		Net income or (loss) from sale	es of in	ventory					
ĺ		Miscellaneous Revenue			Busn. Code				
	11a								
	b								
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d			<b>&gt;</b>				
	12	Total revenue. See instruction	ns		<b></b>	252,791	0	0	16,026

Form 990 (2011) First Presbyterian Church

### Statement of Functional Expenses

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

	Check if Schedule O contains a response	e to any question in this Pa	πıx		
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	S .				
	organizations in the U.S. See Part IV, line 21	114,767	114,767		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,093		5,093	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
	Legal				
	Accounting	2,655		2,655	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				·
f	Investment management fees				
g					
12	Advertising and promotion				
13	Office expenses	3,801		3,801	·
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				<u> </u>
21	Payments to affiliates				·
22	Depreciation, depletion, and amortization	<u></u>			
23	Insurance				······
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а					
b				<del> </del>	
С					<del></del>
d					
е	All other expenses		444 565	11 540	
25	Total functional expenses. Add lines 1 through 24e	126,316	114,767	11,549	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)				5 990

art )	Balance Sheet	(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest bearing	77,103	1	42,630
2	Savings and temporary cash investments	61,180	2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)		6	
7			7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	2,779	9	
10a	Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D 10a 2,010,157			
Ь	Less accumulated depreciation 10b 107,500	1,917,657	10c	1,902,657
11	Investments—publicly traded securities	569,664	11	740,036
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,628,383	16	2,685,323
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified persons			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	1,544,642	23	1,486,546
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third		ŀ	
	parties, and other liabilities not included on lines 17-24) Complete Part X			
}	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	1,544,642	26	1,486,546
	Organizations that follow SFAS 117, check here ▶X and complete			
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	91,388	27	18,278
28	Temporarily restricted net assets	644,663	28	663,890
29	Permanently restricted net assets	347,690	29	516,609
	Organizations that do not follow SFAS 117, check here ▶ and			
	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
27 28 29 30 31 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	<u></u>
33	Total net assets or fund balances	1,083,741	33	1,198,777
34	Total liabilities and net assets/fund balances	2,628,383	34	2,685,323

orm 99	0(2011) First Presbyterian Church	57-1011248			Pag	ge <b>12</b>	
Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in	this Part XI					
			1 . 1	•		701	
	tal revenue (must equal Part VIII, column (A), line 12)		1		52,		
	tal expenses (must equal Part IX, column (A), line 25)		2		126,3		
3 R	evenue less expenses Subtract line 2 from line 1		3			475	
4 No	et assets or fund balances at beginning of year (must equal Part X, line 33,	column (A))	4	1,08			
5 O	her changes in net assets or fund balances (explain in Schedule O)		5		11,4	<u>439</u>	
6 N	et assets or fund balances at end of year. Combine lines 3, 4, and 5 (must $\epsilon$	equal Part X, line 33,					
	lumn (B))		6	1,19	98,	<u>777</u>	
Part :	Kill Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in	this Part XII					
				·	Yes	No	
1 A	counting method used to prepare the Form 990 🛛 🗓 Cash 🔝 Acc	rual Other					
lf :	he organization changed its method of accounting from a prior year or chec	cked "Other," explain in					
So	hedule O						
2a W	ere the organization's financial statements compiled or reviewed by an inde	pendent accountant?		2a	X		
b W	ere the organization's financial statements audited by an independent acco	untant?		2b		_X_	
c If	Yes" to line 2a or 2b, does the organization have a committee that assume	s responsibility for oversight		1 1			
0	the audit, review, or compilation of its financial statements and selection o	f an independent accountant?		2c	X		
lf :	he organization changed either its oversight process or selection process of	luring the tax year, explain in					
Sc	hedule O						
d if	'Yes" to line 2a or 2b, check a box below to indicate whether the financial s	tatements for the year were					
ısı	sued on a separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and s	eparate basis					
3a As	a result of a federal award, was the organization required to undergo an a	udit or audits as set forth in					
th	e Single Audit Act and OMB Circular A-133?			3a		_X_	
b If	Yes," did the organization undergo the required audit or audits? If the organ	nization did not undergo the					
re	quired audit or audits, explain why in Schedule O and describe any steps ta	ken to undergo such audits		3b			
				For	m 990	(2011)	

#### SCHEDULE A (Form 990 or 990-EZ)

**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.

Quen to Public

Inspection

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

First Presbyterian Church Foundation

Employer Identification number 57 - 1011248

Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II ) 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 c | Type III-Functionally integrated Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No 11g(ı) (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) is the (vii) Amount of rganization in col the organization in in col (I) listed in your organization (described on lines 1-9 support cot (I) of your (i) organized in the above or IRC section governing document? support? US? (see Instructions)) Yes Yes No Yes No Nο (A) (B) (C)

For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2011

(D)

(E)

Total

Form 990 or 990-EZ.

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						
Caler	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")	35,470	168,987	247,633	98,085	236,765	786,940
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	35,470	168,987	247,633	98,085	236,765	786,940
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)						140,138
6	Public support. Subtract line 5 from line 4			<u></u>			646,802
	tion B. Total Support  dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4				98,085	236,765	786,940
7 8	Gross income from interest, dividends,	35,470	168,987	247,633	38,085	230,703	780,340
•	payments received on securities loans, rents, royalties and income from similar sources	13,188	14,311	80,053	95,709	107,379	310,640
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						1,097,580
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	,	, second, third, for	urth, or fifth tax yea	r as a section 501	(c)(3)	
	organization, check this box and stop her						<b>•</b>
Sec	tion C. Computation of Public Su	ipport Percent	age				
14	Public support percentage for 2011 (line 6	, column (f) divided	by line 11, colum	n (f))		14	58.93%
15	Public support percentage from 2010 Scho	edule A, Part II, line	14			15	62.98%
16a	33 1/3% support test—2011. If the organ	ization did not ched	k the box on line	13, and line 14 is 3	3 1/3% or more, c	heck this	. ==
	box and stop here. The organization qual						<b>▶ X</b>
b	33 1/3% support test—2010. If the organicheck this box and stop here. The organic				5 is 33 1/3% or mo	ore,	<b>&gt;</b> [
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meet						
	Part IV how the organization meets the "fa	icts-and-circumstar	nces" test. The org	ganization qualifies	as a publicly supp	oorted	▶ □
	organization						
b	10%-facts-and-circumstances test—201						
	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization me	eets the "facts-and-	circumstances" te	sc i ne organizatio	n quannes as a pu	ibiiCiy	▶ □
40	supported organization  Private foundation. If the organization did	d not chook a barra	un line 12 15a 15	h 17a ar 17h aha	ck this hovered se	·e	<b>-</b> L
18	<del>-</del>	u not check a DOX C	m mie 13, 10a, 10	b, 17a, 01 17b, che	CK tills DOX and Se		▶ □
	Instructions		· · · · · · · ·	<del></del>			

ς	7	_	1	0	1	1	2	4	8	

Page 3

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	quality under th	ie tests listed t	below, picase c	ompicte r art n	· <i>)</i>	
	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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)					:	
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6			ļ			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b			-			<del></del>
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						<b>.</b>
	tion C. Computation of Public St					- 1-2-	
15	Public support percentage for 2011 (line 8		•	nn (f))		15	<u>%</u>
16	Public support percentage from 2010 Sch					16	%
	tion D. Computation of Investme			2 column (f)		17	%
17 18	Investment income percentage for 2011 (Investment income percentage from 2010			5, COIUITIII (1 <i>))</i>		18	
18 19a	33 1/3% support tests—2011. If the orga			e 14, and line 15 is	more than 33 1/3		,,,
ıJa	17 is not more than 33 1/3%, check this b						▶□
b	33 1/3% support tests—2010. If the orga						L
-	line 18 is not more than 33 1/3%, check the						▶ [
20_	Private foundation. If the organization di						<b>&gt;</b>

Page 4

Schedule A (Form 990 or 990-EZ) 2011 First Presbyterian Church 57-1011248

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 D** (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

F	irst Presbyterian Church					
F	oundation	]		011248		
Pa	Organizations Maintaining Donor Advised Fundamental Organization answered "Yes" to Form 990, Part IV		lccoun	ts. Complete if the		
		(a) Donor advised funds	(1	b) Funds and other accounts		
1	Total number at end of year	1		10		
2	Aggregate contributions to (during year)	14,890		221,875		
3	Aggregate grants from (during year)	42,250		72,517		
4	Aggregate value at end of year	21,573		740,036		
5	Did the organization inform all donors and donor advisors in writing tha	t the assets held in donor advised				
	funds are the organization's property, subject to the organization's excl	usive legal control?		X Yes No		
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used				
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose					
	conferring impermissible private benefit?			X Yes No		
_ <u>P</u> a	art II Conservation Easements. Complete if the orga	nization answered "Yes" to Form	<u>990, Pa</u>	rt IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check	all that apply)				
	Preservation of land for public use (e g , recreation or education)	Preservation of an historically imp				
	Protection of natural habitat	Preservation of a certified historic	structure	•		
	Preservation of open space  Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation					
2	Complete lines 2a through 2d if the organization held a qualified conse easement on the last day of the tax year	rvation contribution in the form of a conse	rvation			
				Held at the End of the Tax Year		
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic structure incl	uded in (a)	2c			
d	Number of conservation easements included in (c) acquired after 8/17/	06, and not on a				
	historic structure listed in the National Register		2d	<u> </u>		
3	Number of conservation easements modified, transferred, released, extax year ▶	tinguished, or terminated by the organizal	tion durin	g the		
4	Number of states where property subject to conservation easement is	located ▶				
5	Does the organization have a written policy regarding the periodic mon					
_	violations, and enforcement of the conservation easements it holds?	3. 1		Yes No		
6	Violations, and chief-chieff of the conservation easierness knows					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year				
	<b>▶</b> \$					
8	Does each conservation easement reported on line 2(d) above satisfy (i) and section 170(h)(4)(B)(ii)?	the requirements of section 170(h)(4)(B)		Yes No		
9	In Part XIV, describe how the organization reports conservation easem	ents in its revenue and expense statemer	nt, and			
	balance sheet, and include, if applicable, the text of the footnote to the			the		
	organization's accounting for conservation easements					
Pi	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F	Historical Treasures, or Other Sorm 990, Part IV, line 8.	Similar	Assets.		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	ot to report in its revenue statement and I	balance s	heet		
	works of art, historical treasures, or other similar assets held for public					

- public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

b Assets included in Form 990, Part X

Schedule D (Form 990) 2011

to deginning balance displayed Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%	Yes No
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection (terms (check all that apply))  a	Yes No Part IV,  Yes No Amount  Yes No
b	Part IV,  Yes No  Amount  Yes No
C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, line 9, or reported an amount on Form 990, Part X, line 21  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIV and complete the following table  c Beginning balance	Part IV,  Yes No  Amount  Yes No
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, line 9, or reported an amount on Form 990, Part X, line 21  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIV and complete the following table  c Beginning balance  d Additions during the year  f Ending balance  2b Distributions during the year  f Ending balance  2c Did the organization include an amount on Form 990, Part X, line 21?  b If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  1a Beginning of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  c Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%	Part IV,  Yes No  Amount  Yes No
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Did the organization include an amount on Form 990, Part X, line 21?    b   If "Yes," explain the arrangement in Part XIV   C   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10   C   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back	
b If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back	(e) Four years back
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10	(e) Four years back
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back	(e) Four years back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%	
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a Board designated or quasi-endowment ► % b Permanent endowment ► % c Temporarily restricted endowment ► % The percentages in lines 2a, 2b, and 2c should equal 100%	
b Permanent endowment ► % c Temporarily restricted endowment ► % The percentages in lines 2a, 2b, and 2c should equal 100%	
c Temporarily restricted endowment ► %  The percentages in lines 2a, 2b, and 2c should equal 100%	
The percentages in lines 2a, 2b, and 2c should equal 100%	
· · · · · ·	
3a Are there endowment funds not in the possession of the organization that are held and administered for the	
organization by	Yes No
(i) unrelated organizations	3a(i)
(ii) related organizations	3a(ii)
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b
Describe in Part XIV the intended uses of the organization's endowment funds	
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10	
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated	(d) Book value
(investment) (other) depreciation	
1a Land 1,410,157	1,410,157
b Buildings	
c Leasehold improvements	
d Equipment	
e Other 600,000 107,500	492,500
otal. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )	1,902,657

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

Sche	dule D (Form 990) 2011 First Presbyterian Church	57-101124	8	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<b>Audited Financial Statem</b>	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	<del></del>
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	·
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	<u> </u>
7	Prior period adjustments		7_	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per Re	turn	····
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV )	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per F		<u>n</u>
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1	ļ	
-	Donated services and use of facilities	2a	1	
b	Prior year adjustments	2b		
С	Other losses	2c	ļ	
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV )	4b	ļ	
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Pa	rf XIV Supplemental Information			

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

Schedule D (Form 990) 2011 First Presbyterian Church
Part XIV Supplemental Information (continued)

57-1011248

Page 5

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

First Presbyterian Church

Foundation

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

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

▶ Attach to Form 990.

OMB No 1545-0047 2017

Open to Publicinspection

Employer identification number 57-1011248

Part 1 General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	e the amount of the grance?	rants or ass grant funds	istance, the grantees' in the United States	eligibility for the grant	s or assistance, an	70	X Yes
i es	Sovernments any recipient that real space is neede	id Organi eceived m	zations in the Un ore than \$5,000 C	ited States. Con theck this box if r	plete if the organo one recipient	anization answ received more	ered "Yes" than \$5,000
(a) Name and address of organization     or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) 1st Presbyterian Church/Greenville 200 W. Washington St.	[e		1				Ministry Support
	0176						
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
2 Enter total number of section 501(c)(3) and government organizations listed	int organizations liste	d in the line 1 table	1 table				T 4

Schedule I (Form 990) (2011)

Schedule I (F	Schedule I (Form 990) (2011) First Presbyterian Churcl	erian Church	5	57-1011248		Page 2.
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	Individuals in the U	nited States. Comp	lete if the organizatio	n answered "Yes" to Form	
	Part III can be duplicated if additional space is needed	nal space is needed.				
•	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
						•
-						
2						****
3						
4						
2						
		•				
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	olete this part to prov	ide the information r	equired in Part I, line	2, and any other additional	Information.

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

First Presbyterian Church Foundation

Employer Identification number 57 - 1011248

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Form 990 prepared by CPA firm, Governing body members review all Form 990 information independently

Form 990, Part VI, Line 15a - Compensation Process for Top Official Compensation reviewed annually by governing body

Form 990, Part VI, Line 15b - Compensation Process for Officers Compensation reviewed annually by governing body

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

A copy of governing documents are made available to the public upon request

Forms 990 /	990-PF	Mort	gages and Other N	lotes Payable	 	2011
<u></u> ,		For calendar year 2011, o	r tax year beginning	, and ending		<del></del>
Name	n Dwogbyr	terian Church			Employer Ident	ification Number
	dation	terran Church			57-10112	248
						<u> </u>
Form	990, Pa	rt X, Line 23 -	Additional In:	formation		
		Name of lands		Balatianahin ta d	line and the second	
(1) <b>Mor</b>	rtgage P	Name of lender ayable - Greenv	ille First	Relationship to d	lisqualified person	
(2)		274220 0200111		<del></del>		
(3)						
(4)						
(5)						
<u>(6)</u>		<del>_</del>				
<u>(7)</u>					-	
(8) (9)	··•	<del></del>		····	<del></del>	
(10)						-
	Original amoun	t	Maturity			Interest
	borrowed	Date of loan	date	Repayment terms	-	rate
(1)		<del></del>				
(2) (3)					_ <del></del>	-
(4)						-
(5)			<del>-</del>	<del></del>		
(6)						
(7)						
(8)		_			-	
<u>(9)</u>						
(10)						
<del></del>		<del>_</del>				
	S	Security provided by borrower		Purpose	of loan	
(1)						
(2)	-					
(3)						
(4)		<del></del>			···	
(5) (6)		<del></del>				
(6) (7)		<del></del>			· · · · · · · · · · · · · · · · · · ·	
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(10)						
						<u></u>
	•	and a français of the first of the s		Balance due at		nce due at
(1)	Consid	eration furnished by lender		beginning of year 1,544,642		d of year 486,546
(2)			<del>-</del>	2,021,012	<u> </u>	
(3)	·					
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(8)		<del></del>			<del> </del>	
(9) (10)			<del></del>	<del></del>	+	
Totals				1,544,642	1.	486,546

Form 4562

## **Depreciation and Amortization**

### (Including Information on Listed Property)

Department of the Treasury

See separate instructions.

Attach to your tax return.

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lame(s) shown on return	First	Presbyterian	Church

Identifying number 57-1011248

Foundation Business or activity to which this form relates Provence Property Rental Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I 500,000 1 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 11 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions) Part II 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 15,000 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property ) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2011 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (e) Convention (f) Method (a) Depreciation deduction (business/investment use (a) Classification of property placed in period only-see instructions 19a 3-year property 5-year property 7-year property C d 10-year property e 15-year property 20-year property S/L 25 yrs g 25-year property S/L h Residential rental 27 5 yrs MM property MM 27 5 vrs S/L MM 39 yrs S/L Nonresidential real property MM S/L Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L 40 yrs 40-year Part IV Summary (See instructions ) 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 15,000 and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs