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CISMKRSXZ8 4

Form '990-PF

201212

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. Department of the Treasury Internal Revenue Service

For calendar year 2012 or tax year beginning		, and ending		
Name of foundation			A Employer identificatio	n number
WATEREE FLOODLANDS MEMORIA	L FOREST, INC	2.	57-074145	L
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P O BOX 129			803-432-53	312
City or town, state, and ZIP code			C If exemption application is	pending, check here
CAMDEN, SC 29021				
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
Final return	Amended return		2 Foreign grannizations m	eating the B504 test
Address change	Name change		Foreign organizations m check here and attach or	omputation Last.
H Check type of organization: X Section 501(c)(3) ex			E If private foundation st	
	Other taxable private founda		under section 507(b)(1)(A), check here
I Fair market value of all assets at end of year J Accounting	=	Accrual	F If the foundation is in a	
	her (specify)	2000 1	under section 507(b)(1)(B), check here
				(4) = .
Part 1 Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		<u>-</u>	N/A	
2 Check \(\) If the foundation is not required to attach Sch. 8 Interest on savings and temporary		<u> </u>		
3 cash investments	3,267.	3,267.		STATEMENT 1
4 Dividends and interest from securities,	1,000.	1,000.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)			<u> </u>	
68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line,0a 7 Capital gain het income (from Part IV; line 2)—				
7 Capital gain het income (from Part IV: line 2)— 8 Net short-term capital gain CIVCD		0.		
8 Net Short-term capital gain				
9 Income modifications 10e and allowances APR 0 4 2014				
b Less Cost of goods soils c Gross profit or (1055)				
11 Other income OGDEN, UT	29,400.	29,400.		STATEMENT 3
	33,667.	33,667.		STATEMENT 3
12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
4.4 Other employee calcuse and wages	7.			.
15 Pension plans, employee benefits			· · · · · · · · · · · · · · · · · · ·	
2 % 16a Legal fees				
15 Pension plans, employee benefits 16a Legal fees b Accounting fees STMT 4 c Other professional fees STMT 5 17 Interest	600.	0.		0.
c Other professional fees STMT 5	650.	0.		0.
த் <u>\$</u> 17 Interest				
Taxes STMT 6	4,596.	0.		4,110.
19 Depreciation and depletion	2,122.	0.		
E 20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 7 24 Total operating and administrative expenses Add lines 13 through 23	51,019.	0.	· · · - · · · · · · · · · · · · · · · ·	51,019.
24 Total operating and administrative	50 005	_		
expenses Add lines 13 through 23	58,987.	0.		55,129.
25 Contributions, girts, grants paid	0.			0.
26 Total expenses and disbursements	E0 007	^		
Add lines 24 and 25	58,987.	<u> </u>		55,129.
8 Excess of revenue over expenses and disbursements	-25,320.			1
b Net investment income (if negative, enter -0-)		33,667.		
C Adjusted net income (if negative, enter -0-)		33,007.	N/A	
223501 12-05-12 LHA For Paperwork Reduction Act Notice, see i	netructions			Corr. 000 DE (0040)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of) 741451 Page year
Part II Datance, Steets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	1,187,652.	1,314,121.	1,314,321
2 Savings and temporary cash investments			
3 Accounts receivable ▶			
Less: allowance for doubtful accounts			•
4 Pledges receivable ▶			
Less; allowance for doubtful accounts		j	
5 Grants receivable			<u></u>
6 Receivables due from officers, directors, trustees, and other			
disqualified persons		Ĭ	
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
8 Inventories for sale or use			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 Investments - U.S. and state government obligations.			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock .			
c Investments - corporate bonds .			
11 Investments - land, buildings, and equipment basis 654,372.			
Less accomutated deprecation	654,372.	654,372.	654,372
12 Investments - mortgage loans			
13 Investments other STMT 8	200,000.	50,333.	50,333
14 Land, buildings, and equipment basis ► 409,028.			
Less accumulated depreciation STMT 9 > 40,737.	370,413.	368,291.	1,455,031
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers)	2,412,437.	2,387,117.	<u>3,474,057</u>
17 Accounts payable and accrued expenses			
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
22 Other liabilities (describe >)			
	_	_	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.	054 385	054 055	
27 Capital stock, trust principal, or current funds	854,375.	854,375.	
26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
,	1,558,062.	1,532,742.	
30 Total net assets or fund balances	2,412,437.	2,387,117.	
	2 412 427	2 200 440	
31 Total liabilities and net assets/fund balances	2,412,437.	2,387,117.	
Part III Analysis of Changes in Net Assets or Fund Bal	ances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
(must agree with end-of-year figure reported on prior year's return)		1.1	2 412 427
6.4	• •		2,412,437
Other increases not included in line 2 (itemize)	• • •		-25,320
			2 397 117
Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)		4	2,387,117
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (h) line 30	- 5	0 2,387,117
Town not gasets of fund galerices at end of your time a timids time of all II, COID	To 1/2 mile 30		Form 990-PF (201)

	EREE FLOODLANDS and Losses for Tax on I			T, INC.	57-074	1451 Page 3
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				D - Donation		
b NO	NE					
c d						
e		··				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	<u> </u>	(h) Gain or (loss (e) plus (f) minus	
<u>a</u> b						
C		 				
d		 - · 			·	
e		 				
	ig gain in column (h) and owned by	the foundation	on 12/31/69		(I) Gains (Col. (h) gair	minus
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (i) col. (j), if any		col. (k), but not less that Losses (from col.	ın -0-) or
<u>a</u>						
b						
С						
d						
e						
2 Capital gain net income or (net ca	ipital loss) { If gain, also enter-	er in Part I, line 0- in Part I, line	7 7 .	} 2		
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		and (6).				
Part V Qualification U	Inder Section 4940(e) fo	r Reduced	Tay on Not	Investment I	ncome	
·					TICOING	
(For optional use by domestic private	e roundations subject to the section	14940(a) tax or	ret investment ir	icome.)		
If section 4940(d)(2) applies, leave the	his part blank.					
Was the foundation liable for the sec	lify under section 4940(e). Do not o	omplete this pa	art			X Yes No
	each column for each year; see the	instructions be	fore making any e	ntries.		
(a) Base period years Calendar year (or tax year beginni	(b) ng in) Adjusted qualifying di	istributions	Net value of no	(c) incharitable-use ass	ets (col. (b) di	(d) bution ratio vided by col. (c))
2011						<u> </u>
2010						
2009						
2008		0.				.000000
2007		0.		····		.000000
2 Total of line 1, column (d)					2	
3 Average distribution ratio for the		on line 2 by 5,	or by the number	of years		
the foundation has been in existe	nce if less than 5 years		•		3	
4 Enter the net value of noncharitab	ele-use assets for 2012 from Part X,	, line 5			4	
5 Multiply line 4 by line 3					. 5	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)				6	
7 Add lines 5 and 6 , .	· · · ·				7	
8 Enter qualifying distributions from	n Part XII, line 4				8	
	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	g a 1% tax rate.		
223521 12-05-12		-			F	orm 990-PF (2012)

	1990-PF (2012) WATEREE FLOODLANDS MEMORIAL FOREST, INC. 5	<u>7-0</u>	<u>7414</u>	<u>51</u>		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18 - s	see ins	stru	ctior	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b		1			6	73.
	of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
		2				0.
	i de la companya de	3			6	73.
4		4				0.
5		5			6	73.
	Credits/Payments;					<u> </u>
	2012 estimated tax payments and 2011 overpayment credited to 2012					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)	1				
	Backup withholding erroneously withheld 6d	1				
		7				n
,		8				$\frac{5.}{15.}$
0						88.
	The state of the s	9			- 6	00.
	· · · · · · · · · · · · · · · · · · ·	10		-		
	Enter the amount of line 10 to be: Credited to 2013 estimated tax Refunded It VII-A Statements Regarding Activities	11				
_			—т	- 1	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		 -		165	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or	}	}		1
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?		-	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ (2) On foundation managers ► \$ 0.		1	- 1		ļ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1	- [
	managers. ► \$0.			- 1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		1	- 1		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		L	4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	A L	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		L	5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		l	ı		
	By language in the governing instrument, or			l		1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	w				
	remain in the governing instrument?		1	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			$\neg \uparrow$		
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	SC					1
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					1
•	of each state as required by General instruction G? If "No," attach explanation		İ	8b	X	l
Q	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	iar	·			
3	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		Ī	9		х
10	The state of the s		\vdash	10		X
	DO BUT PATAGO AND				PF /	(2012)
			. 01111		- • (, 20 12]

Part VIII-A Statements-Regarding Activities (continued)		1990-PF(2012) WATEREE FLOODLANDS MEMORIAL FOREST, INC. 57-074	<u>1451</u>		Page 5
section 512(b) (13)* If Yes, affacts schedule (see instructions) 11	Pi	art VII-A Statements-Regarding Activities (continued)			
12 Dut the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 13 Dud the foundation comply with the gubbic inspection requirements for its annual returns and exemption application? 14 The books are in case of ▶ JAMES L GUY TI Telephone no. ▶ 80.3 - 4.32 - 5.312 15 Section 4974(31) monerating the training form 990.9° in lieu of form 1041 - Check here and enter the amount of lax-exempt interest received or accrued forming the year 15 A any time during calendary sear 2012, dut the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 A any time during calendary sear 2012, dut the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 18 No. Section 4974(31) monerating 10212, dut the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 18 Port VII-B Statements Regarding Activities for Which Form 4720 May Be Required 19 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required 10 During the year of the foundation (either directly or indirectly); 11 Engage in the sale or exchange, or lessing of property with a disqualified person? 12 Section 4974 (1) Financial in the sale or exchange, or lessing of property with a disqualified person? 13 Firmish goods, services, or facilities to (or accept them from) a disqualified person? 14 Pay compensation to, or pay or reimburss the expenses of, a disqualified person? 15 Port of the foundation of year of the property with a complete person? 16 Port of the foundation of property of the pro	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
12 Dut the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 41 The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of ▶ JAMES L GUY II The books are in care of the book		section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
If Yes,* attach statement (see instructions) 12 X	12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
13 Dut the foundation comply with the public respection requirements for its annual returns and exemption application? Website addities ≥ N/A 14 The books are in care of ▶ JAMES I. GUY. I.I. Telephone no. ▶80.3 – 4.3.2 – 5.3.1.2 Located at ▶ P.O. BOX. 1.2.9, CAMDEN, SC. 15 Section 4947(a)(1) nonexempt charitable trusts timp form 950.47 m leve of form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 16 A any time during clearing year 2012, dut the foundation have an interest in or a signature or other authority over a bank, securities, or other interaction and finding requirements for Form TDF 90-22.1. If Yes, enter the name of the foreign country. See the instructions for exceptions and finding requirements for Form TDF 90-22.1. If Yes, enter the name of the foreign country. Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any tiem is checked in the "Yes" column, unless an exception applies. File Form 4720 if any tiem is checked in the "Yes" column, unless an exception applies. 10 Bournap the year did the foundation (lather directly or indirectly): 11 Engage in the sale or exchange, or lessing of property with a disqualified person? 12 Borrow money from, lend money to, or otherwise extend credit to (or accept them from) a disqualified person? 13 Furrishin goods, services, or facilities to (or accept them from) a disqualified person? 14 Person Propersistion to, or pay or reimburs the expenses of, a disqualified person? 15 Furrishin goods, services, or facilities to (or accept them from) a disqualified person? 16 Person Propersistion to, or pay or reimburs the expenses of, a disqualified person? 17 Furrishing goods, services, or facilities to (or accept them from) a disqualified person? 18 Furrishing goods, services, or facilities to (or accept them from) a disqualified person? 19 Furrishing goods, services, or facilities to (or accept them from) a disqualified person? 19 Furrishing goods, servic		If "Yes," attach statement (see instructions)	12		X
Website address > N/A I har books are increated JAMES L GUY II Tetephone no. 803-432-5312 Located at P O BOX 129 CAMDEN SC IP-14 29020 Section 4347(a)(1) nonexempt chalitable trusts filing form 990-PF in fleet of Form 1041 - Check here and enter the manunot of tax-exempt interest received or accrued during they year and enter the manunot of tax-exempt interest received or accrued during they are an enter the manunot of tax-exempt interest received or accrued during they are an enter the manunot of tax-exempt interest received or accrued during the year of other national second in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If Yes, enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 18 During the year did the foundation leither directly or indirectly: (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 19 Yes No 20 Borrow money from, leid money lo, or otherwise extend credit to (or accept if from) a disqualified person? 19 Fursh poods, services, or facilities to (or accept them from) a disqualified person? 19 Fursh poods, services, or facilities to (or accept them from) a disqualified person? 19 Yes X No 20 Fursh poods, services, or facilities to (or accept them from) a disqualified person? 20 Fursh poods, services, or facilities to (or accept them from) a disqualified person? 21 Fursh poods, services, or facilities to (or accept them from) a disqualified person? 22 Fursh poods poods, services to adequalified person (or make any of either available for the benefit or use of a disqualited person? 23 Fursh poods, services to adequalified person (or make any of either available for the benefit or use of a disqualited person? 24 If unish poods, pood property to a government official? (Exception, Check Not if the toundation or	13			X	
Located all P.P.O. BOX. 129. CANDEN. SC Section 4947(s(1) monesternot haritable trusts ling form 909-ff in Neu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the year 16. All any time during calendary year 2012, did the foundation have an interest in or a signature or other authority over a bank, seempt interest received or accrued during the year 16. All any time during calendary year 2012, did the foundation have an interest in or a signature or other authority over a bank, seempt interest received or accrued during the year of the financial second in a foreign country? See the instructions for exceptions and filing requirements for form TD F 90-22.1. If "Yes," enter the name of the foreign country. Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a. During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 1a. During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 1b. Tengage in the sale or exchange, or leasing of property with a disqualified person? 1c. Section of the control of the property of the property of them to accept them from) a disqualified person? 1c. Section of the section of the property of the property of them to accept them from) a disqualified person? 1c. Section of the property of the property of them from a disqualified person? 1c. Section of the property of them from the property of them from a disqualified person? 1c. Section of the property of the property of the property of them from a disqualified person? 1c. Section of the property of the property of the property of them from a disqualified person? 1c. Section of the property of					
Located all P.P.O. BOX. 129. CANDEN. SC Section 4947(s(1) monesternot haritable trusts ling form 909-ff in Neu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the year 16. All any time during calendary year 2012, did the foundation have an interest in or a signature or other authority over a bank, seempt interest received or accrued during the year 16. All any time during calendary year 2012, did the foundation have an interest in or a signature or other authority over a bank, seempt interest received or accrued during the year of the financial second in a foreign country? See the instructions for exceptions and filing requirements for form TD F 90-22.1. If "Yes," enter the name of the foreign country. Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a. During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 1a. During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 1b. Tengage in the sale or exchange, or leasing of property with a disqualified person? 1c. Section of the control of the property of the property of them to accept them from) a disqualified person? 1c. Section of the section of the property of the property of them to accept them from) a disqualified person? 1c. Section of the property of the property of them from a disqualified person? 1c. Section of the property of them from the property of them from a disqualified person? 1c. Section of the property of the property of the property of them from a disqualified person? 1c. Section of the property of the property of the property of them from a disqualified person? 1c. Section of the property of	14	The books are in care of ▶ JAMES L GUY II Telephone no. ▶803-4	32-5	312	
15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in teu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other instinated account in a foreign country. See the instinctions for exceptions and filing requirements for Form TDF 90-22.1. If Yes, enter the name of the foreign country. Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year of the foundation (either directly or indirectly). 15 Engage in the sale or exchange, or lessing to properly with a disqualited person? (2) Borrow money from, lend money (a, or otherwise extend credit to (or accept if from) a disqualitied person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualitied person? (4) Pay compensation to, or pay or remitives the expenses of, a disqualitied person? (5) Fransfer any income or assets to a disqualited person (or make any of either available for the benefit or use of a disqualited person)? (6) Agree to bey money fromey to a powerment official? (Exception, Check No of the foundation agreed to make a grant to or to employ the official for a period after termination of government serve, if terminating within 90 days. 1b If any answer is Yes 1 to 14(1)-(6), did any of the acts fail to quality under the exceptions described in Regulations section 53.494 (1)(3) or in a current notice regarding disaster assistance check here 1b If the foundation engage in a prior year in any of the acts faceribed in 1a, other than excepted acts, that were not corrected before the first skip of the axy set splanning in 2012? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation delined in section 4942(1)					
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b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.494 (1d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(1)(3) or 4942(1)(5): At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If 'Yes,' list the years 2011					
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had not been removed from jeopardy before the first day of the tax year beginning in 2012?	t		~7		
			4b_]	X
		Fai	m 990	PF (2012)

Part VII-B Statements Regarding Activities for Which	TAL FOREST, I	NC.	57-07414	<u>51 Page 6</u>	
	Form 4/20 May Be F	required (contin	ued)		
5a During the year did the foundation pay or incur any amount to.	- 4045/-110				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			8 X No		
(2) Influence the outcome of any specific public election (see section 4955); o	is to carry on, directly or indire	· —	তি ।		
any voter registration drive?			8 X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No					
(4) Provide a grant to an organization other than a charitable, etc., organization described in section					
509(a)(1), (2), or (3), or section 4940(d)(2)?					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or r				
the prevention of cruelty to children or animals?	4		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni		n Regulations	37/3	. \	
section 53.4945 or in a current notice regarding disaster assistance (see instru	*	•	. N/A	5 b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				1 1	
expenditure responsibility for the grant?	· ·	I/A ∟ Y€	8 L_ No		
If "Yes," attach the statement required by Regulations section 53.494			1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	hay hieriiiniii2 Au		s X No		
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal during the year.	serennal hanefit enotraet?	T E		Sb X	
If "Yes" to 6b, file Form 8870.	ier sonar benent contract?		··· 	···	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribute				7b	
Information About Officers Directors Trust		nagers Highly			
Part VIII Paid Employees, and Contractors			•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances	
JAMES L GUY II	PRESIDENT				
P O BOX 129]			
CAMDEN, SC 29020	5.00	0.	0.	0.	
LESLIE G COPLIN	VICE PRESIDEN	r T	j		
P O BOX 129					
CAMDEN, SC 29020	0.00	0.	0.	<u>0.</u>	
JAMES L GUY III	SECT-TREAS	1			
P O BOX 129			ľ		
CAMDEN, SC 29020	5.00	0.	0.	0.	
		1			
2 Compensation of five highest-paid employees (other than those inc	hudad on line 4). If name	ATAC SMORIE B	<u></u>		
2 Compensation of five highest-paid employees (other than those fix	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	(d) Contributions to	(e) Expense	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other allowances	
NOME	devoted to position	 	compensation	allowances	
NONE		ĺ			
	1	1			
		 	 		
	1				
		 			
	1	}			
			 	 -	
	1	1			
Total number of other employees paid over \$50,000				0	
			Form	990-PF (2012)	

Part VIII Information About Officers, Directors, Trustees, Foundation Management Project Services and Contractors (Automotion Management Project Services)		074145	1 Page 7
Part VIII Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
	b) Type of service	(c)	Compensation
NONE	b) Type of Service	(6)	Compensation
210412			
		ļ	
Total number of others receiving over \$50,000 for professional services		•	
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information's number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	uch as the	Ехр	enses
1 N/A			
		_	
2			
			
3			
			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Am	ount
1 N/A			
2			
			
All other program-related investments. See instructions.	-		
3			
Total. Add lines 1 through 3	<u>, , , , , , , , , , , , , , , , , , , </u>		0.
		Form 9 9	90-PF (2012

<u>For</u>	m 990-PF (2012) WATEREE FLOODLANDS MEMORIAL FOREST, INC.	<u>57-0741451</u>	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations, see instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities		322.
b	Average of monthly cash balances	1b 2,298,	097.
C	Fair market value of all other assets	1c 654,	372.
đ	Total (add lines 1a, b, and c)	10 3,054,	791.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 3,054,	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 45,	822.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 3,008,	
6_	Minimum investment return. Enter 5% of line 5	6 150,	448.
P	Tart XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1 150,	448.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	673.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 149,	775.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 149,	775.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7 149	775.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a _ 55,	129.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4 55,	,129.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6 55,	,129.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies for the section	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
Distributable amount for 2012 from Part XI,		· <u></u>		
line 7				149,775.
2 Undistributed income, if any, as of the end of 2012.				
a Enter amount for 2011 only ,			81,035.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2012:		<u></u>		
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 55, 129.			[
a Applied to 2011, but not more than line 2a			55,129.	
b Applied to undistributed income of prior			1	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount			- · · · · · · · · · · · · · · · · · · ·	0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012	0.			0.
(if an amount appears in column (d), the same amount must be shown in column (a).)				<u> </u>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract tine 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	······································	0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			25,906.	U
f Undistributed income for 2012, Subtract				_
lines 4d and 5 from line 1. This amount must				
be distributed in 2013	·- <u>-</u>			149,775.
7 Amounts treated as distributions out of				-
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	· · · · · · · · · · · · · · · · · · ·		
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012			L <u></u>	

Part XIV Private Operating Fo			-A. question 9)	N/A	741451 Page
1 a If the foundation has received a ruling or			ŀ		
foundation, and the ruling is effective for		•	▶└┌─	T	
b Check box to indicate whether the founda		ng foundation described i		4942(j)(3) or4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0011	Prior 3 years	1	
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not		\			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)		,			
b "Endowment" alternative test - enter				1	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross		1			
investment income (interest,		1			
dividends, rents, payments on					
securities loans (section				•	
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt		1			
organizations as provided in					
section 4942(j)(3)(B)(iii)				 	
(3) Largest amount of support from					
an exempt organization					
Part XV Supplementary Infor	nation (Comple	to this part only	if the foundation	- had 65 000	1
at any time during the	niation (Comple	netions)	ir uie ioungatior	n nau \$5,000 or m	ore in assets
		detions.j			
Information Regarding Foundation		Aban 00/ alaba asasi sa sa	h		
a List any managers of the foundation who year (but only if they have contributed mo	nave contributed more ove than \$5 000). (See s	than 2% of the total cont ection 507(d)(2))	ributions received by thi	e foundation before the clo	ise of any tax
	ore man 40,000). (000 3	oction 507(0)(2).)			
ONE					
b List any managers of the foundation who other entity) of which the foundation has	a 10% or more of the a 10% or greater interes	ie stock of a corporation (st.	or an equally large port	ion of the ownership of a p	partnership or
ONE					
2 Information Regarding Contribution	n, Grant, Gift. Loan	Scholarship, etc., Pr	ograms:		
Check here > if the foundation on				not accept upsplicited regi	upets for funde. If
the foundation makes gifts, grants, etc. (s	see instructions) to indiv	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	d d.
a The name, address, and telephone numb		·- ·- ·- ·- ·- ·-			
AMES L GUY II, 803-4		m to milom applications s	110010 00 000103300.		
O BOX 129, CAMDEN,					
b The form in which applications should be		tion and materials they at			
RITTEN APPLICATION S				אמעם עמח שר	IDM ORNATO
	STATING FOR	LUSE OF CHA	VIII PROOF	OF THA BARM	IPT STATUS
c Any submission deadlines:					
ONE	auch on his sacra and	-la-ak		- 	
d Any restrictions or limitations on awards,	such as by geographic	ai areas, charitable fields,	kinds of institutions, or	other factors:	
ONE					-
3801 12-05-12					Form 990-PF (201

Grants and Contributions Paid During the	Teal or Approved for Future P	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CORE IDUS[0])	
Paid during the year				_
NONE				
				······································
Tatal				
Total Approved for future payment			▶ 3a	
, , , , , , , , , , , , , , , , , , ,				
NONE				
				·
Total			26	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513 or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
•			10000	·	
			-		
b	<u> </u>	<u> </u>	-		
¢	ļ		 		
d	<u> </u>		ļ		
e	ļ		<u> </u>		
g Fees and contracts from government agencies			ļ	<u> </u>	
2 Membership dues and assessments					
3 Interest on savings and temporary cash	ł				
investments			14		
4 Dividends and interest from securities			14	1,000.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			Ţ		
b Not debt-financed property	i				
6 Net rental income or (loss) from personal			1		
property			ł		
7 Other investment income			 		29,400.
8 Gain or (loss) from sales of assets other					23/100.
41	ł	i	ł		
	 		 	 	
9 Net income or (loss) from special events			 	-	
10 Gross profit or (loss) from sales of inventory			├ ─		
11 Other revenue:	1	i		1	
å		<u></u>	├	 	
b			 	ļ i	
¢			├		 ., <u>_</u>
d			ļ		<u></u>
e			┼		
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.	<u> </u>	4,267.	
13 Total. Add line 12, columns (b), (d), and (e)				. 13	33,667.
(See worksheet in line 13 instructions to verify calculations.)	··			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	æmp	t Purposes	
Line No. Explain below how each activity for which incor	ne is reported	in column (a) of Part V/I-A	contril	huted importantly to the accom	nlichment of
the foundation's exempt purposes (other than t	ov otovidina fil	inds for such nurnoses)	COMBI	boted importantly to the accom	plistimeth of
97 INTEREST INCOME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	nico ici cocii parpocasji			
102 DIVIDENDS ON INVESTMENT	10			- <u></u>	
102 DIVIDENDS ON INVESTMENT					
				· · · · · · · · · · · · · · · · · · ·	
					
				 	
		 			
	· · · · · · · · · · · · · · · · · · ·				
					
	- · · · · · · · · · · · · · · · · · · ·				
					
		-			
223621					Form 990-PF (2012)
12-05-12					

Form 990-PF (2				EMORIAL FOR			<u>41451 Pag</u>	ge 13
Part XVII	Information Re Exempt Organ		nsfers To a	and Transactions	and Relation	enships With Nonch	aritable	
1 Did the or	ganization directly or indi		v of the following	o with any other organiza	tion described in	section 501(c) of	Yes	No
	(other than section 501(c)					500.00. 50 (0) 01		
	from the reporting found:			• • •	a literation of			
(1) Cash	•		-2010 UNDINET OF	ganzation of			1a(1)	<u>x</u>
(2) Other		•						X
b Other tran		•		• ••			18(2)	
	s of assets to a noncharita	ble sysmet organia	nt.on					3.7
				• • • • • • • • • • • • • • • • • • • •			16(1)	<u>X</u>
	hases of assets from a no		corganization		•	•	1b(2)	<u>X</u>
	al of facilities, equipment,						16(3)	<u>X</u>
, ,	bursement arrangements	•	••	•			1b(4)	<u> X</u>
	s or loan guarantees						15(5)	X
	ormance of services or me	=	-	•			16(6)	X
-	if facilities, equipment, ma			• •			1c	X
d If the ans	wer to any of the above is	"Yes," complete the	e following sche	dule. Column (b) should	always show the f	air market value of the good	s, other assets,	
					alue in any transai	ction or sharing arrangemen	, show in	
column (e	t) the value of the goods,							
(a) Line no	(b) Amount involved	(c) Name	of noncharitable	e exempt organization	(d) Descr	ption of transfers, transactions, a	nd sharing arrangemen	nis
			N/A					
						, <u>,</u>		
								
i								
					-			
			- ·· · · · · · · · · · · · · · · · · ·					
			-	***		 ·		
		 				······································	-	
					 [
								
								
	ndation directly or indirect				inizations describe	ed		1
	501(c) of the Code (other		c)(3)) or in sect	tion 527?	•		Yes X	No
b If Yes, c	omplete the following sch			I				
	(a) Name of org	anization		(b) Type of organization	<u> </u>	(c) Description of relatio	nship	
	N/A							
	penalties of perjury. I declare t	that I have examined th	his return, includin	g accompanying schedules a	nd statements, and to	the best of my knowledge	May the IRS discuss th	
Sigit	elief, it is true, correct, and con	iplete Declaration of p	oveparer (other than	n taxpayer) is based on all info	mation of which pre	parer has any knowledge	eturn with the preparer	r .
Here	Lames J.	/ huy .	oxdot	1	PRES	IDENT	Nown below (see instr]″No
Sigr	ature of officer or trustee			Date	Title	L		
	Print/Type preparer's na	me	Preparer's s		Date	Check If PTII	<u> </u>	
			Thom	mole	/	self- employed		
Paid	TERRY M HA	NCOCK	TERRY	M HANCOCK	11/08/1	_1	00106176	
Preparer	Firm's name ► SHE		NCOCK &				00186176	
Use Only	The Strains - STE	rangel, UMI	HOUCK &	GODWIN, LL	C, CPA	Firm's EIN ► 57-	1542539	
	Firm's address - D	O DDAGED	120		 			
	Firm's address P		428					
	L CA	MDEN, SC	29020				<u>-432-1424</u>	
							Form 990-PF (2	012)

FORM 990-PF INTEREST ON SAVIN	GS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
MERRILL LYNCH			•	3,2	67.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	-	3,20	67.
FORM 990-PF DIVIDENDS	AND INTER	EST FROM SEC	URITIES	STATEMENT	2
SOURCE	GROSS		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
MERRILL LYNCH	 -	1,000.	0.	1,0	00.
TOTAL TO FM 990-PF, PART I, LN	4	1,000.	0.	1,0	00.
FORM 990-PF	OTHER I	NCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	_	
USDA GRANT-ENVIRONMENTAL		29,400.	29,400	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11	29,400.	29,400	•	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	4
	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
		- — — —			
ACCOUNTING	600.	. 0			0.

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES		
PROFESSIONAL FEES	650.	0.		0		
TO FORM 990-PF, PG 1, LN 16C	650.	0.		0		
FORM 990-PF	TAX	ES	STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES		
PROPERTY TAXES EXCISE TAXES	4,110. 486.			4,110		
TO FORM 990-PF, PG 1, LN 18	4,596.	0.		4,110		
FORM 990-PF	OTHER EXPENSES		STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES		
INSURANCE REPAIRS SMALL EQUIP & SUPPLIES ENVIRO. EXPSEE GRANT FROM	2,018. 14,832. 4,769.	0.		2,018 14,832 4,769		
USDA	29,400.	0.		29,400		
TO FORM 990-PF, PG 1, LN 23	51,019.	0.		51,019		

FORM 990-PF OTE	HER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
M LYNCH CD'S	COST	50,333.	50,333.
TOTAL TO FORM 990-PF, PART II, LIE	VE 13	50,333.	50,333
FORM 990-PF DEPRECIATION OF ASSI	ETS NOT HELD FOR	RINVESTMENT	STATEMENT S
FORM 990-PF DEPRECIATION OF ASSI	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	STATEMENT S
	COST OR	ACCUMULATED	

				•		ORM 990-PF PAG Description of			990-PF
Asset umber		Date placed	Method/ IRC sec.	Life or rate	Line	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
		in service			No.		reduction	depreciation/amortization	deduction
1) 6 3 0 0 5	6405 200DB	TRACT	-R. 17	D MNT EQUIP 34,525.		32,984.	1,54
2	EQU	JIP &	SHED						
) 6 ₁ 3 0 ₁ 0 6	200DB		17 1 D	6,502.		5,631.	58:
		OTAL	990-P	P PG	ר ד	41,027.	0.	38,615.	2,12
				r					
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	F		<u> </u>	<u> </u>			····		
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Department of the Treasury

Taxpayer name and address

Power of Attorney and Declaration of Representative

Type or print See the separate instructions

OMB No 1545-0150

Far	IRS	Use	Only	
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Telephone

celved	pà.	
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		P 13 po or princ P	ouc are ecparate monactions.	
Dő# II	Power of Attorney			
-r. at C. (1)	Cartias: A consents Form 2848 should	d ha completed for and	h taypayas Farm 2040 will an	ha handend for

WATEREE	FLOODLANDS	MEMORIAL	FOREST,	INC.
P O BOX	129		•	

Taxpayer identification number(s)

57-0741451

purpose other than representation before the IRS. Taxpayer Information. Taxpayer must sign and date this form on page 2, line 7.

CAMPEN, SC 29021			Daytime telephone number	Plan number (if a	ppiicable)
haraby apparents the following apparents in (a) as attacase (a)	in facts		803-432-5312	<u> </u>	
hereby appoints the following representative(s) as attorney(s)- 2 Representative(s) must sign and date this form on page 2,					
Name and address			CAF No.	6500-73623	R
TERRY M. HANCOCK			PTIN	P00186176	
PO BOX 428			Telephone No.		124
CAMDEN, SC 29021-0	0428		Fax No.	803-432-18	
Check if to be sent notices and communications			Check if new: Address		ax No.
Name and address			CAF No.		
			PTIN		••
			Telephone No.		••
ត	RECEIVED O	SC 217	Fax No.		•
Check if to be sent notices and communications	RECEIVED		II OHERK II HOW. MUGICOS L.	Telephone No. F.	ax No.
Name and address		14	CAF No.		
	APR 0 8 20	川富	PTIN		
	OP's 1 Dept	الم	Telephone No.		
	ARS OGDEN,	LITAH TO	Fax No		
		THE	Check if new: Address	Telephone No. F	ax No.
to represent the taxpayer before the Internal Revenue Service f	or the following matters: /		Ň		
3 Matters		ر حالے	त्वील		
Description of Matter (Income, Employment, Payroll, Excise, I	Estate, Gift, Whisteblower,		Tax Form Number	Year(s) or Period(s) (f	applicable)
Practitioner Discipline, PLR, FOIA, Civil Penalty, etc.) (see	instructions for line 3)	(1040, 9	41, 720, etc.) (if applicable)	(see instructions fo	r line 3)
EXCISE		4720	·	2009;2010;2	<u> 11101</u>
EXCISE		4700		2010	
BACISB		4720		2012	
				ļ	
Specific use not recorded on Centralized Authorization Fil	le (CAF). If the nower of at	torney is for a	specific use not recorded on t	CAF check	
this box. See the instructions for Line 4. Specific Uses Not	· · ·	torney is tor a	Specific use not recorded on t	Drs , Olicon	▶□
Acts authorized. Unless otherwise provided below, the repr		thorized to rec	reive and inspect confidential	tax information and to be	rform any
and all acts that I can perform with respect to the tax matter	's described on line 3, for ex	cample, the au	thority to sign any agreements	s, consents, or other doc	uments.
The representative(s), however, is (are) not authorized to re	ceive or negotiate any amoi	unts paid to th	e client in connection with this	representation (includin	g refunds

by either electronic means or paper checks). Additionally, unless the appropriate box(es) below are checked, the representative(s) is (are) not authorized to execute a request for disclosure of tax returns or return information to a third party, substitute another representative or add additional representatives, or sign certain tax returns. Substitute or add representative(s); Disclosure to third parties; Signing a return; Other acts authorized: (see instructions for more information) Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. An enrolled actuary may

only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan agent may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. A registered tax return preparer may only represent taxpayers to the extent provided in section 10.3(f) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (level k) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific deletions to the acts otherwise authorized in this power of attorney:

APR 10-4-2814

213081 11-29-12 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 2848 (Re	ev. \$-2012)							Page 2
6 Reten	tion/revocation of prior pov	wer(s) of attorney. The filing	of this power of attorney aut	omatically revokes	all earlier			
power	(s) of attorney on file with the	he Internal Revenue Service	for the same matters and year	rs or periods covere	ed by this			
		evoke a prior power of attorr						
			YOU WANT TO REMAIN IN EF					
			h a joint return was filed, the l					
			by a corporate officer, partner rity to execute this form on be			ior, receiver, aurminis	u ator, o	J
nasie	Oli Densa or the texpayer,	cermy mat i mave me aumo	nty to execute this form on be	citati Of the taxpaye	l•			
▶ IF i	NOT SIGNED AND DATED, 1	THIS POWER OF ATTORNEY	WILL BE RETURNED TO THE	TAXPAYER.				
/	1 0 7	P 91		1-11-				
\.\S	ame &	· / ruy	4 L	126_113	PRESIDE	<u>NT_ </u>		
[/		Signature		Date		Title (if applicable)		
V					OODLANDS	MEMORIAL	FOR	EST
ĨŸWŔ	5 L GUY, II _	PIN	Number II	IC.	e of taxpaver from line	1 if other than individual		
Part II	Declaration of F	Representative						
Linder genali	ties of perjury, I declare that	•						
•			ctice before the Internal Revei	nue Service:				
	•	•	Part 10), as amended, conce	•	e the internal Reve	nue Service;		
• lama	authorized to represent the	taxpayer identified in Part I fo	or the matter(s) specified the	e; and		·		
I am c	one of the following:							
	•		ighest court of the jurisdiction					
		'	a certified public accountant	in the jurisdiction s	shown below.			
	=	an agent under the requirem						
		of the taxpayer's organization						
		ime employee of the taxpaye	ii. family-for-example: spouse-	parent shild amad	inneant geandahild	ctan navant atan ah	.ld	
	rother, or sister).	or the taxpayer 3 minerate		Search Paris Name	parent granochia	, step-parent, step-cu	ιια,	
	•	s an actuary by the Joint Bo	ard for the Entollment of Act	rardes under \$911 S	C. 1242 (the author	nritv		
			by section 10.3(d) of Circula		.0. 10 10 (010 00111	arty .		
			before the Internal Revenue S		u must have been	ellaible to sign the re-	turn	
			ce 2011-6 and Special rules					ars
	n the instructions.						p. vpa.	
i R	legistered Tax Return Prepa	arer - registered as a tax retu	rn preparer under the require	ments of section 1	0.4 of Circular 230.	Your authority to pra	actice be	fore
ti	ne Internal Revenue Service	is limited. You must have b	een eligible to sign the return	under examination	and have signed t	he return. See Notice	2011-6	and
S	pecial rules for registered	tax return preparers and u	nenrolled return preparers i	n the instructions.				
			ce before the IRS by virtue of				rking in	
			instructions for Part II for ad					
			t plan agent under the require	ements of Circular 2	230 (the authority t	o practice before the		
ļr	nternal Revenue Service is (imited by section 10.3(e)).						
	LE THIS GEGI ADATION	OF OFDERENTATIVE IS NO	OT SIGNED AND DATED, THE	DOW/ED OF ATTOR	MEV WALL DE DET	TIDNED DENDECENS	T	
•			/E. See the instructions for P		INET WILL BE KEI	UNNED. KEYKESEN I	AHVES	i
	MIDO FOIGHT HE THE UNI	DEN FIGUED IN FINE 5 MBO	VE. 300 UIS IIISUUCUOIIS IOI P	art n.				
Note: For de	signations d-f, enter your ti	tle, position, or relationship	to the taxpayer in the Licens	ing jurisdiction* coli	umn. See the instru	actions for Part II for i	more	
information.	1.1	12 7				· · · · · · · · · · · · · · · · · · ·		
Designation Insert above		Bar, license, certification, registration, or				j		
letter (a-r)	ticensing authority	i enrollment number		Signature			Date	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(if applicable)	(if applicable). See instructions for Part II for						
	<u></u>	more information.						
	SOYTH		1 .	21				
B	CAROLINA	516	Jerry W	1 Donn	with	9/1	26/	13
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(Rev March 2012)

Department of the Treasury Internal Revenue Service

Power of Attorney and Declaration of Representative

► Type or print ► See the separate instructions.

OMB No 1545-0150

For IRS Use Only

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Power of Attorney Part I Caution: A separate Form 2848 should be completed for each taxpayer. Form 2848 will not be honored for any Function purpose other than representation before the IRS. Taxpayer Information. Taxpayer must sign and date this form on page 2, line 7. Taxpaver name and address Taxpayer identification number(s) 57-0741451 WATEREE FLOODLANDS MEMORIAL FOREST, INC. P O BOX 129 CAMDEN, SC 29021 Plan number (if applicable) Daytime telephone number 803-432-5312 hereby appoints the following representative(s) as attornay(s)-in-fact: 2 Representative(s) must sign and date this form on page 2, Part II. Name and address 6500-73623R CAF No. TERRY M. HANCOCK PTIN P00186176 PO BOX 428 803-432-1424 Telephone No. CAMDEN, SC 29021-0428 803-432-1831 Fax No. Check if to be sent notices and communications Check if new: Address Telephone No. Name and address CAF No. PTIN Telephone No. Fax No. Check if to be sent notices and communications Check if new; Address Telephone No. Name and address CAF No. 217 RECEIVED OSC PTIN Telephone No. Fax No. v: Address Telephone No. Fax No to represent the taxpayer before the Internal Revenue Service for the follo ing grante Pia I Depi BB 1 RS OGDEN U Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whisteblower, Tax Form Number Year(s) or Period(s) (if applicable) Practitioner Discipline, PLR, FOIA, Civil Penalty, etc.) (see instructions for line 3) (1040, 941, 720, etc.) (if applicable) (see instructions for line 3) EXCISE 990PF 2009;2010;2011; **EXCISE** 990PF Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. Specific Uses Not Recorded on CAF Acts authorized. Unless otherwise provided below, the representatives generally are authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The representative(s), however, is (are) not authorized to receive or negotiate any amounts paid to the client in connection with this representation (including refunds by either electronic means or paper checks). Additionally, unless the appropriate box(es) below are checked, the representative(s) is (are) not authorized to execute a request for disclosure of tax returns or return information to a third party, substitute another representative or add additional representatives, or sign certain tax returns. Disclosure to third parties. Substitute or add representative(s); Signing a return; Other acts authorized: (see instructions for more information) Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan agent may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. A registered tax return preparer may only represent taxpayers to the extent provided in section 10.3(f) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practice limited (for example, they may only practice under the supervision of another practitioner). List any specific deletions to the acts otherwise authorized in this power of attorney:

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Förm 2848 (Rev	3-2012)					Page 2
		rer(s) of attorney. The filing				
, power(s) of attorney on file with th	e Internal Revenue Service t	for the same matters and	years or periods cov	ered by this	·
	document. If you do not want to revoke a prior power of attorney, check here					
		NY POWER OF ATTORNEY				
					e must each file a separate po	
		certify that I have the author			natters partner, executor, rece	eiver, auministrator, or
00366	m benan of the taxpayer, i	certify that I have the author	my to execute this form o	и обичи от пте гахфа	syei.	
► IF NO	OT SIGNED AND DATED. T	HIS POWER OF ATTORNEY	WILL BE RETURNED TO	THE TAYPAVER		
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4	amer to	Kuy II		9/26/13	PRESIDENT	
7/		Signature		Date	Title	(if applicable)
7		,		WATEREE F	LOODLANDS ME	MORIAL FOREST,
<u>James</u>	L GUY, II			INC.		
	Print Name	PIN	Number	Print r	ame of taxpayer from line 1 if other	r than Individual
Part II	Declaration of R	epresentative				
		· · · · · · · · · · · · · · · · · · ·				
-	s of perjury, I declare that	: lon or disbarment from prac	Mice hefore the Internal D	ovenue Service:		
	-			•	fore the Internal Revenue Se	rvice'
	•	axpayer identified in Part I fo			noro mo miorna novones oc	, 4100,
	e of the following:	arpayor recording in reservice	or the matter(o) openiou	wiore, and		
	_	standing of the bar of the h	ahest court of the jurisdi	ction shown below.		
		duly qualified to practice as	-		n shown below.	
		an agent under the requirem	•	•		
d Off	icer - a bona fide officer o	f the taxpayer's organization	ı .			
e Ful	l-Time Employee - a full-ti	me employee of the taxpaye	۲.			
f Far	nity Member - a member (of the taxpayer's immediate	tamilya(toj eyampte/spou	Seaperentachild, on	andparent, grandchild, step-p	arent, step-child,
	other, or sister).	£			•	
		s an actuary by the Joint Bଦ୍ୱି	a\ _\\ A/			
to p	practice before the Interna	d Revenue Service is limited	විද්යලක්වේ වර්ය(ආක් Ca	:utan230).	•	
h Un	enrolled Return Preparer -	· Your authority to practice b	pefore the internal Revenu	ie Service is limited.	You must have been eligible	to sign the return
unc	der examination and have	signed the return. See Notic	ce 2011-6 and Special re	iles for registered t	ax return preparers and une	nrolled return preparers
	the instructions.					
		=	• •		n 10.4 of Circular 230. Your a	
_			• •		ion and have signed the retu	rn See Notice 2011-6 and
-	•	tax return preparers and u	* *			
		•	•		a law, business, or accounti	ng student working in
		10.7(d) of Circular 230. See			•	and burgaria Abir
	_		t plan agent under the rec	juirements of Circul	ar 230 (the authority to pract	ice detore the
ini	erriai meverius pervice is i	imited by section 10.3(e)).				
>	IF THIS DECLARATION	OF REPRESENTATIVE IS NO	OT SIGNED AND DATED.	THE POWER OF ATT	TORNEY WILL BE RETURNED). REPRESENTATIVES
	MUST SIGN IN THE ORI	DER LISTED IN LINE 2 ABOV	E. See the instructions f	or Part II.		
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information.	gnations o-i, enter your ti	ue, position, or relationship	to the taxpayer in the Lic	ensing jurisaicuan	column See the instructions	for Part II for more
Designation -	Licensing jurisdiction	Bar, license, certification,				
Insert above	(state) or other	registration, or				
letter (a-r)	licensing authority (if applicable)	enrollment number (if applicable). See		Signature		Date
	(ii appinante)	instructions for Part II for				1
		more information.		-		
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Form **2848** (Rev. 3-2012)