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DLN: 93493076011064

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)

2012

OMB No 1545-0047

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection , 2012, and ending 06-30-2013 A For the 2012 calendar year, or tax year beginning 07-01-2012 D Employer identification number B Check if applicable SOUTH CAROLINA STUDENT LOAN CORP Address change 57-0602805 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 8906 TWO NOTCH RD Terminated (803) 798-0916 City or town, state or country, and ZIP + 4 COLUMBIA, SC 29223 Amended return Application pending G Gross receipts \$ 116,939,846 Name and address of principal officer **H(a)** Is this a group return for CHARLIE C SANDERS JR affiliates? 8906 TWO NOTCH ROAD COLUMBIA, SC 29223 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status **H(c)** Group exemption number ▶ Website: ► WWW SCSTUDENTLOAN ORG **L** Year of formation 1973 **M** State of legal domicile SC Part I Summary Briefly describe the organization's mission or most significant activities SEE SCHEDULE O Activities & Governance 2 Check this box 🚩 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 191 6 0 Total number of volunteers (estimate if necessary) . . . 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 27,113,745 21,193,491 78,310,997 92,239,980 Program service revenue (Part VIII, line 2g) . . 745,261 3,445,952 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -404,653 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -367,819 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 105,802,184 116,474,770 0 13 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 6,401,345 14,223,216 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 80,503,611 92,499,236 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 86,904,956 106,722,452 18 19 Revenue less expenses Subtract line 18 from line 12 18,897,228 9,752,318 t Assets or id Balances **Beginning of Current End of Year** Year 3,427,376,321 3,069,867,841 20 Total assets (Part X, line 16) . 21 2,575,496,813 Total liabilities (Part X, line 26) . . 2,944,981,323 22 Net assets or fund balances Subtract line 21 from line 20 482,394,998 494,371,028 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2014-03-11 Signature of office Sign Here CHARLIE C SANDERS JR PRESIDENT/CEO

Preparer's signature

Firm's name
DERRICK STUBBS & STITH LLP

Firm's address ► 508 HAMPTON STREET 1ST FLOOR

COLUMBIA, SC 29201

May the IRS discuss this return with the preparer shown above? (see instructions)

Type or print name and title

Paid

Preparer

Use Only

Print/Type preparer's name ALAN F GRIMSLEY CPA

Check

self-employed

Firm's EIN F 57-0306533

Phone no (803) 799-5810

P00557082

▽Yes **□**No

4e Total program service expenses ► 102,877,211

art IV	Check	dist 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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, Part III	5		No
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 "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f G}$	11e	Yes	1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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 $1?$ If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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	,		
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12		100	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least 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 to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		110
	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)?	4a		No
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 same and the same that			NI -
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			110
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	\ <u>'</u>		110
_		1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		No
	Form 1098-C?	/n		NO
0	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	[
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

14 Did the organization have a written document retention and destruction policy?	<u> </u>	ection A. Governing Body and Management							
If there are maternal 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 b. Enter the number of voting members included in line 1a, above, who are independent. c. Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee and the organization of officers, directors or trustees, or key employees to a management company or other orficers or trustees, or key employees to a management company or other person? 5. Did the organization have members or stockholders? 5. Did the organization have members or stockholders? 6. Did the organization have members or stockholders? 7. Did the organization have members, stockholders? 8. Did the organization have members, stockholders? 8. Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 9. Did the organization of the organization reserved to (or subject to approval by) members, stockholders, or other persons of the organization so that has the governing body? 9. If the power is the province of the governing body? 8. Did the organization contens of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 8. Did the organization contens of the did the governing body? 9. If there are management and software a				Yes	No				
body, or if the governing body delejated broad authority to an executive committee or similar committee, explain in Schedule O be Rifert the number of voting members included in line 1a, above, who are independent. 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders? 7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 A rea ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or by a ready governance decisions of the organization reserved to for subject to approval by) members, stockholders, or by a ready governance decisions of the organization reserved to for subject to approval by) members, stockholders, or by a ready governance decisions of the organization or subject to approval by) members, stockholders, or by a ready governance decisions of the organization or subject to approval by) members, stockholders, or by a ready governance decisions of the organization or subject to approval by members, stockholders, or a through governing body? 8 Did the organization have lead to behalf of the governing body? 9 Is there any officer, director, trustee, or key employee instein in Part VIII, Section A, who cannot be reached at the organization have lead to be provided the names and addresses in schedule O, the	1a	1 1 a 1							
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its poverning documents since the prior Form 990 was filled? 5 Did the organization become aware during the year of a significant diversion of the organizations assets? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members of the deliberation and the power to elect or appoint one or more members of the governing body? 9 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 9 Lare any ognization or the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Lare any ognization or the meetings held or written actions undertaken during the very by the following 8 Did the organization or the more provided the governing body? 9 Lare any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization shalling address? If Yes, "provide the names and addresses in Schedule O. 9 Social Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization sexempt purposes? 10 Did the organization have a written accomplete copy of this form 990 to all members of its governing body before filling the form? 10 Did the organization have a written policies and pr		body, or if the governing body delegated broad authority to an executive committee							
Supervision of officers, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 No 7 Did the organization have members or stockholders? 7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 9 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization or memore and addresses in Schedule O 10 Did the organization have a written document and part VII, Section A, who cannot be reached at the organization similing address? If Yes, Provide the anames and addresses in Schedule O 10 Did the organization have local chapters, branches, or affiliates? 10 Did the organization have local chapters, branches, or affiliates? 11 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11 Did the organization have a written document retention and enforce compliance with the policy? If Yes, describe in Schedule O the process, if any, used by the organization to review this Form 990 12 Did the organization have a written of purposes	b								
supervision of officers, directors or trustees, or key employees to a management company or other person? 1 Did the organization make any significant changes to its governing documents since the prior Form 990 was field? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 9 Is there any officer, director, trustee, one when the governing body? 9 Is there any officer, director, trustee, one when the sum of the governing body? 10 Is the organization from the provide the names and addresses in Schedule O. 10 If Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organizations exempt purposes? 10 Did the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 10 Did the organization have a written bolicies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 Did the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 10 Did the organization have a written when the process of the organization to review this Form 990. 11 A Yes 12 Yes 13 Did the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 14 Organization from t	2		2		No				
field? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Published organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) The Describe in Schedule O the process, if any, used by the organization to review this Form 99 to sell members of its governing body before filling the form? Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization by before filling the form? Did the organization provided a complete copy of this Form 99 to sell members of its governing body before filling the form? Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization by before filling the form? Did the organization provided a complete copy of this Form 99 to sell members of its governing body before filling the form? Did the organization and the policies of the following persons include a annually interest that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written document retention and destruction policy? Did the organization	3		3		Νο				
6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following the activities of such capacities or governing the governing t	4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was							
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b Other officers or key employees of the organization	b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 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," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes					
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Section C. Disclosure	b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 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," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No				
	b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No				

- List the States with which a copy of this Form 990 is required to be filed▶SC
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 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 organization ► HARRY BROWN 8906 TWO NOTCH ROAD COLUMBIA, SC (803)612-5069

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h an or/tr	offic	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) CHARLIE SANDERS	40 00	х		х				354,347	0	37,591
PRESIDENT/CEO										
(2) MR FREDERICK T HIMMELEIN ESQ CHAIRMAN	1 00	x						10,500	0	C
(3) J THORNTON KIRBY ESQ	1 00	х						3,000	0	C
TREASURER										
(4) MR WILLIAM M MACKIE JR VICE CHAIRMAN	1 00	x						5,500	0	C
(5) RENEE R BROOKS	1 00									
DIRECTOR		X						1,500	0	C
(6) MRR JASON CASKEY CPA	1 00	х						3,000	0	C
DIRECTOR										
(7) NEIL E GRAYSON ESQ DIRECTOR	1 00	x						4,500	0	C
(8) MR JEFFREY R SCOTT	1 00	×						4,000	0	0
DIRECTOR								.,,		
(9) MS BARBARA F WESTON	1 00	×						4,500	0	C
DIRECTOR (10) MR VINCE V FORD	1.00				_					
	1 00	x						1,500	0	C
DIRECTOR (11) HILLA BOVD	1.00				_					
(11) JULIA BOYD	1 00	×						0	0	C
FORMER DIRECTOR					_					
(12) LOREN CARLSON	1 00	x						2,000	0	C
FORMER DIRECTOR				_	_					
(13) ROBERT HILL	1 00	×						1,000	0	C
FORMER DIRECTOR					<u> </u>					
(14) HARRY BROWN	40 00			x				171,443	0	20,463
CFO										•
(15) THOMAS DUNNIGAN	40 00					×		126,001	0	23,055
FORMER EMPLOYEE								·		
(16) ANNE HARVIN GAVIN	40 00					×		126,466	0	14,015
VP LOAN								,		,
(17) DAVID SIMON	40 00			l		l				
(17) DAVID SIMON						Х		138,641	0	12,799

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box th ar	checl (, unle n office rustee	ss er	(D) Reportable compensation from the organization	(E) Reportable compensatio from related organization	on d s	(F Estim amount o compen from	ated of other sation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099 MISC)	-	organiz	lated
(18) JANE HONEYCUTT	40 00					х		142,289		0		16,512
VP SENIOR ACCOUNTANT										_]		
(19) GERALD LONG	40 00					×		102,329		0		10,719
VP - REPAYMENT OPERATIONS								·		_		
(20) DAVID ROUPE	40 00					x		103,788		0		11,764
VP - EDVANTAGE										_		
										\dashv		
										\dashv		
										1		
					\vdash					\dashv		
										\dashv		
					\vdash					\dashv		
										$oldsymbol{\perp}$		
1b Sub-Total			•	•								
c Total from continuation sheets to Part	VII, Section A		•	•		•						
	<u> </u>	•		•		P		1,306,304		0		146,918
Total number of individuals (including b \$100,000 of reportable compensation)				ed al	bove	e) who	rec	eived more than				
\$100,000 of reportable compensation	Tom the organiz	.acioni	U									
									_		Yes	No
3 Did the organization list any former offi on line 1a? <i>If</i> "Yes," complete Schedule 3									d employee	3		No
4 For any individual listed on line 1a, is the organization and related organizations of									om the			
ındıvıdual			•	•	•	•	•		[4	Yes	
5 Did any person listed on line 1a receive		•						_	ndividual for			
services rendered to the organization?	If "Yes," comple	te Sche	dule.] for	suc	h pers	on		[5		No
Section B. Indonesiant Contracts												
Section B. Independent Contractor 1 Complete this table for your five highes		ındene	nden	ıt co	ntra	ctors	that	received more th	nan \$100 000	of		
compensation from the organization Re											tax year	
Name and h	(A)							December	(B)		(C	
Name and b MCNAIR LAW FIRM 1221 MAIN ST 18 COLUMBIA SC 292	usiness address 01							LEGAL MATTERS	on of services	+	Comper	325,381
WILLIAMS & FUDGE 300 CHATHAM AVENUE ROCK HILL								COLLECTION SE	RVICES-PRIVATE	\dashv		161,336
DERRICK STUBBS & STITH 508 HAMPTON ST 1ST FLOO		201						LOANS AUDIT/ACCOUN	TING SERVICES	+		129,195
KUTAK ROCK LLP 1111 EAST MAIN STREET RICHMOND	VA 23219							LEGAL MATTERS				127,739
NELSON MULLINS RILEY & SCARBOROUGH LLP 1320 MA								LEGAL MATTERS		\perp		122,045
2 Total number of independent contractors \$100,000 of compensation from the orga	. •	iot iimi	icea t	.o th	iose	iisted	apo	ve) who received	more than			

		Check if Schedule O contains a respon	se to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or
	1a	Federated campaigns 1a					514
rributions, Giffs, Grants Other Similar Amounts	ь	Membership dues 1b					
Grants mounts	c	Fundraising events 1c					
_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_	Related organizations 1d					
Contributions, Gitts, and Other Similar A	d		21,193,491				
Sir.	е			ļ	ļ		
	f	All other contributions, gifts, grants, and similar amounts not included above					
<u> </u>	g	Noncash contributions included in lines 1a-1f \$		j	į		
and	h	Total. Add lines 1a-1f		21,193,491			
		1	Business Code				
anu e	2a	STUDENT LOAN INTEREST	900099	134,655,597	134,655,597		
ex.ea	ь	SERVICING FEES	900099	14,809,666	14,809,666		
H e	С	MISCELLANEOUS INCOME	900099	2,481,533	2,481,533		
er vi	d	LATE CHARGES	900099	2,188,268	2,188,268		
Program Serwice Revenue	е	SCEAA REMITTANCE	900099	626,637	626,637		
ڭ ق	f	All other program service revenue		-62,521,721	-62,521,721		
<u>ଝ</u>	g	Total. Add lines 2a-2f		92,239,980			
	3	Investment income (including dividence	ls, interest,	3,445,952			3,445,952
	4	and other similar amounts) Income from investment of tax-exempt bond p	F	3,443,332			3,443,932
	5	Royalties	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		(ı) Real	(II) Personal				
	6a	Gross rents 60,423					
	b	Less rental 465,076 expenses					
	С	Rental income -404,653 or (loss)					
	d	Net rental income or (loss)		-404,653	-404,653		
		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of					
		assets other than inventory					
	b	Less cost or other basis and					
	_	sales expenses Gain or (loss)					
	c d	Net gain or (loss)					
e E	8a	Gross income from fundraising events (not including					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18					
⊕ ⊑	b	Less direct expenses b					
5	С	Net income or (loss) from fundraising e	events 🛌				
	9a	Gross income from gaming activities See Part IV, line 19 a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activ	⁄ities▶-				
	10a	Gross sales of inventory, less returns and allowances .					
	b	Less cost of goods sold b					
	С	Net income or (loss) from sales of inve	entory				
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d					
	12	Total revenue. See Instructions		116,474,770	91,835,327	0	3,445,952

	IX Statement of Functional Expenses				
ectio	n 501(c)(3) and 501(c)(4) organizations must complete all columns All		·		
	Check if Schedule O contains a response to any question in this Pa		(B)		 (D)
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21		·		·
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	624,844	474,783	150,061	
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	10,396,264	9,402,778	993,486	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,134,837	1,009,153	125,684	
9	Other employee benefits	1,183,608	1,059,182	124,426	
0	Payroll taxes	883,663	792,232	91,431	
1	Fees for services (non-employees)				
а	Management				
b	Legal	5,017,458	4,549,753	467,705	
С	Accounting	418,822	376,806	42,016	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	9,913,010	9,886,804	26,206	
2	Advertising and promotion	5,525,525	5,555,55		
	Office expenses	1,849,775	1,663,599	186,176	
ļ	Information technology	824,378	734,399	89,979	
5	Royalties	024,370	754,555	03,313	
5	Occupancy	465,077	372,062	93,015	
,	Travel	· ·			
8	Payments of travel or entertainment expenses for any federal, state, or local public officials	230,356	207,281	23,075	
•	Conferences, conventions, and meetings	49,500	44,550	4,950	
)	Interest	28,261,623	28,261,623	· · · · · ·	
L	Payments to affiliates		·		
2	Depreciation, depletion, and amortization	1,860,074	1,674,067	186,007	
3	Insurance	182,609	164,102	18,507	
1	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	ORIGINATION FEES	12,842,735	12,842,735		
b	LOAN LOSS EXPENSE	6,961,140	6,961,140		
c	OTHER OPERATING EXPENSE	6,925,547	6,224,762	700,785	
d	BORROWER INCENTIVES	6,157,795	6,157,795		
e	All other expenses	10,539,337	10,017,605	521,732	
5	Total functional expenses. Add lines 1 through 24e	106,722,452	102,877,211	3,845,241	
:6	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)				

Part X Balance Sheet

rea	rt X	Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	210,038,953	1	196,319,078
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	91,604,919	4	68,846,845
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
Assets	6	Loans and other 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) Complete Part II of Schedule L			
ŝ	_	Nickey and leave accessible with	3.052.531.484	6 7	2,731,692,373
⋖	7	Notes and loans receivable, net	3,052,531,464		2,731,692,373
	8	Inventories for sale or use	444 400	8	70.240
	9	Prepaid expenses and deferred charges	111,139	9	78,340
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 18,054,564			
	Ь	Less accumulated depreciation 10b 10,961,870	7,601,773	10c	7,092,694
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11	56,760,025	12	56,609,063
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	8,728,028	15	9,229,448
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,427,376,321	16	3,069,867,841
	17	Accounts payable and accrued expenses	49,917,579	17	50,037,677
	18	Grants payable		18	
	19	Deferred revenue	2,088,543	19	1,357,222
	20	Tax-exempt bond liabilities		20	
<u>ن</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
je		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	2,880,753,014	23	2,512,867,205
	24	Unsecured notes and loans payable to unrelated third parties		24	_
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	40,000,407		44 004 700
		D	12,222,187	25	11,234,709
	26	Total liabilities. Add lines 17 through 25	2,944,981,323	26	2,575,496,813
Φ S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	216,629,837	27	218,875,748
<u> </u>	28	Temporarily restricted net assets	265,765,161	28	275,495,280
	29	Permanently restricted net assets	, ,	29	<u>, , , </u>
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
9. F		complete lines 30 through 34.			
<u>9</u>	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	482,394,998	33	494,371,028
~	34	Total liabilities and net assets/fund balances	3,427,376,321	34	3,069,867,841

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		116,4	174,770
2	Total expenses (must equal Part IX, column (A), line 25)	2		106,7	722,452
3	Revenue less expenses Subtract line 2 from line 1	3		9,7	752,318
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		482,3	394,998
5	Net unrealized gains (losses) on investments	5			325,828
6	Donated services and use of facilities				
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,8	397,884
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		494,3	371,028
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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As Filed Data -

DLN: 93493076011064

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

SOUTH CAROLINA STUDENT LOAN CORP

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

									57-060		
	rt I			blic Charity Sta				•		instruction	ıs.
The c	rganı			te foundation becaus							
1	<u> </u>		· ·	on of churches, or a				section 170	(b)(1)(A)(i)	•	
2		A scho	ol described	in section 170(b)(1	L)(A)(ii). (A	ttach Sched	dule E)				
3	Γ	A hosp	ital or a cod	perative hospital se	rvice organi:	zatıon desc	rıbed ın sect i	ion 170(b)(1)(A)(iii).		
4	Г			h organization opera	ted ın conjur	nction with a	a hospital de	scribed in s	ection 170(b)(1)(A)(iii)	. Enter the
_	_			ty, and state	+ - f = 11 =						
5	ı	_	•	erated for the benefi	_	e or univers	ity owned or	operated by	, a governme	ntai unit de:	scribed in
_	_			(A)(iv). (Complete P	•			470(1)	(4)(4)(
6	<u> </u>			local government or							
7	ı			at normally receives on 170(b)(1)(A)(vi).			s support froi	n a governn	nental unit or	from the ge	neral public
8	\vdash			described in section			mplete Part	II)			
9	, V		-	at normally receives			-	-	ibutions, me	mbership fe	es, and gross
_	•			ities related to its e							
				oss investment inco							
				ganızatıon after June						_ ux,	345
10	\vdash	-		ganized and operated	-			· ·	-		
11	<u>'</u>	_		ganized and operated							t the nurnoses of
	'			ly supported organiz							
		the box	that descr	bes the type of supp	orting organ	nzation and	complete lin	es 11e thro	ough 11h		
		а	Type I	b	Type II	I - Functio	nally integra	ted d	Type III - I	Non-functio	nally integrated
e	Γ		_	ox, I certify that the	_			•			•
			han foundat n 509(a)(2)	on managers and ot	her than one	or more pu	iblicly suppo	rted organiz	ations descr	ibed in sect	on 509(a)(1) or
f				received a written de	etermination	from the II	RS that it is a	a Type I. Ty	ne II. or Typ	e III suppo	rting organization.
-			this box					, p = - , . ,	pc 11, c , p		у отушин <u>а</u> шион,
g			-	2006, has the organ	ızatıon acce	pted any gif	ft or contribu	tıon from an	y of the		
			ng persons?							,	
				rectly or indirectly o				n persons a	escribed in (Yes No
				governing body of th		_	on?				lg(i)
				er of a person descr						<u> </u>	.g(ii)
_				lled entity of a perso						[11	g(iii)
h		Provide	e the followi	ng information about	the support	ed organiza	ition(s)				
	N N		(::) FIN	(:::) T f	(:) T -	#I			(:\ T	- 46 -	
_	i) Nan suppoi		(ii) EIN	(iii) Type of organization	(iv) Is organizat		(v) Did yo	•	(vi) I:		(vii) A mount of monetary
	ganiz			(described on	col (i) lis		in col (i)		col (i) or		support
	•			lines 1 - 9 above	your gove		suppo	'	ın the		
				or IRC section	docume	ent?					
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
Total											

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support					•	
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	4,222,822	50,256,006	36,705,414	27,113,745	21,193,491	139,491,478
2	grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished		65,583,547	72,193,006	75,036,369	72,166,115	284,979,037
2	in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities		03/303/31/	, 2,133,000	73,030,303	,2,100,113	201,373,037
3	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	4,222,822	115,839,553	108,898,420	102,150,114	93,359,606	424,470,515
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						C
b	A mounts 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						C
	year						0
8 8	Add lines 7a and 7b Public support (Subtract line 7c from line 6)						424,470,515
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	A mounts from line 6	4,222,822	115,839,553	108,898,420	102,150,114	93,359,606	424,470,515
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	5,273,921	726,475	921,135	745,261	3,445,952	11,112,744
b	Unrelated business taxable income (less section 511 taxes) from businesses						
С	acquired after June 30, 1975 Add lines 10a and 10b	5,273,921	726,475	921,135	745,261	3,445,952	11,112,744
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)	154,889,477	8,580,180	5,044,809	2,906,809	19,669,212	191,090,487
13	Total support. (Add lines 9, 10c, 11, and 12)	164,386,220	125,146,208	114,864,364	105,802,184	116,474,770	626,673,746
14 Se	First five years. If the Form 990 is check this box and stop here ction C. Computation of Pu			ı, cnıra, rourth, or	iiith tax year as a	1 501(c)(3) organ	ization, ►
15	Public support percentage for 201			13, column (f))		15	67 730 %
16	Public support percentage from 20	011 Schedule A, I	Part III, line 15			16	53 680 %
Se	ction D. Computation of In						
17	Investment income percentage fo				nn (f))	17	1 770 %
18	Investment income percentage fro					18	2 200 %
19a	33 1/3% support tests—2012. If the						line 17 is not

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493076011064

OMB No 1545-0047

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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.

Employer identification number Name of the organization SOUTH CAROLINA STUDENT LOAN CORP 57-0602805 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) 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 easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2h

U	rotal deleage restricted by conservation easements	20				
c	Number of conservation easements on a certified historic structure included 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				
3	Number of conservation easements modified, transferred, released, extinguished, or terminat	ed by th	e organization d	durın	g	
	the tax year <u></u>					
4	Number of states where property subject to conservation easement is located 🛌					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har enforcement of the conservation easements it holds?	dling of	violations, and	Г	Yes	┌ĸ
5	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease	ments c	luring the year			
	<u> </u>					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easement	s durin	g the year			
	▶ \$					
3	Does each conservation easement reported on line 2(d) above satisfy the requirements of se and section $170(h)(4)(B)(II)$?	ction 17	70(h)(4)(B)(ı)	Г	Yes	┌ĸ
9	In Part XIII, describe how the organization reports conservation easements in its revenue arbalance sheet, and include, if applicable, the text of the footnote to the organization's financial the organization's accounting for conservation easements	•	•			

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- 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

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

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, 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

Assets included in Form 990, Part X

Cat No 52283D Schedule D (Form 990) 2012

Part	•••• Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	<u>stori</u>	<u>cal Tr</u>	<u>easur</u>	<u>es, or O</u>	<u>the</u>	<u>r Similar Asse</u>	ets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other recor	ds, cl	heck	any of t	the follo	wing that a	re a	significant use o	fits	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
b	Scholarly research		e	Γ	Other	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	er the oi	rganızatıon	's ex	empt purpose in		
5	During the year, did the organization solicit										_
	assets to be sold to raise funds rather than t								· ·	Yes	│ No
Par	Part IV, line 9, or reported an an	nount on Form 99	0, Pa	art X	, line	21.				U, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	for c	ontribu	itions o	r other ass	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_				
							-		Amo	unt	
с	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?	•					Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	n has	been pr	ovided in P	art X	(111		<u> </u>
Pa	rt V Endowment Funds. Complete									\-	
1a	Beginning of year balance	(a)Current year	(D) Prior	year	b (c) IW	o years back	(a)	Three years back (e)Four ye	ears back
ь	Contributions										
c	Net investment earnings, gains, and losses										
								_			
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	ent year end baland	e (lır	ne 1g	, colum	ın (a)) h	eld as				
а	Board designated or quasi-endowment	,	•	_	•						
ь	Permanent endowment -										
c	Temporarily restricted endowment ►										
•	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are held	d and ac	dministered	for	the		
	organization by								- C	Yes	No
	(i) unrelated organizations		•					•	3a(i) 3a(ii)	<u> </u>	
ь	(ii) related organizations							٠. ٠	3b	1	<u> </u>
4	Describe in Part XIII the intended uses of th	•						-		1	<u> </u>
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa	art X	, line :	10.					
	Description of property) Cost or is (inves		(b)Cost or of basis (othe		(c) Accumulated depreciation	(d) Bo	ok value
1a	_and						929	,900			929,900
b I	Buildings						6,144	,448	776,347		5,368,101
c I	_easehold improvements										
d I	Equipment						10,906	,653	10,111,960		794,693
	Other							,563	73,563		0
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part)	X, colu	ımn (B), lıne	10(c).)			•		7,092,694

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	1	
Part IX Other Assets. See Form 990, Part X, III		
(a) Descrip		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	<u> </u>	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of liability	(b) Book value	
Federal income taxes		
DUE TO US DEPARTMENT OF EDUCATION	11,234,709	
	, ,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	11,234,709	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	117,785,166
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	1,310,396
3	Subtract line 2e from line 1	3	116,474,770
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)............4b		
c	Add lines 4a and 4b	4 c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	116,474,770
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	<u>per</u>	Return
1	Total expenses and losses per audited financial statements	1	107,812,704
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
a b			
	Donated services and use of facilities		
b	Donated services and use of facilities		
b c	Donated services and use of facilities	2e	1,090,252
b c d	Donated services and use of facilities	1	-
b c d e	Donated services and use of facilities	2e	-
b c d e	Donated services and use of facilities	2e	-
b c d e 3	Donated services and use of facilities	2e	
b c d e 3 4 a	Donated services and use of facilities	2e	-
b c d e 3 4 a b c	Donated services and use of facilities	2e 3	1,090,252 106,722,452 0 106,722,452

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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional ınformatıon

Identifier	Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE INCLUDED ON LINE 6B 465077 FROM EDVANTAGE INCOME 519491
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE INCLUDED ON LINE 6B 465077 FROM EDVANTAGE EXPENSES 625175

DLN: 93493076011064

OMB No 1545-0047

Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Compensation Information

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization SOUTH CAROLINA STUDENT LOAN CORP **Employer identification number**

57-0602805

Pa	rt I Questions Regarding Compensation	on			
				Yes	No
1a		rovided any of the following to or for a person listed in Form II to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b		organization follow a written policy regarding payment or described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to directors, trustees, and the CEO/Executive Direct	o reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the GEO/Exceditive Direct	ior, regarding the reems encered in time 14.	2		
3	organization's CEO/Executive Director Check all	panization used to establish the compensation of the that apply Do not check any boxes for methods insation of the CEO/Executive Director, but explain in Part III			
	✓ Compensation committee	Written employment contract			
	☐ Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol payment?	4a		No
b	Participate in, or receive payment from, a supplem	nental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-	based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section of compensation contingent on the revenues of	A, line 1a, did the organization pay or accrue any			
а	The organization?		5a		No
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a, did the organization pay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section a payments not described in lines 5 and 6? If "Yes,"	A , line 1a, did the organization provide any non-fixed ' describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII	, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described	ın Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	he rebuttable presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)CHARLIE SANDERS PRESIDENT/CEO	(i) (ii)	354,347 0	0 0	0 0	37,591 0	0	391,938 0	333,885 0
(2)HARRY BROWN CFO	(i) (ii)	171,443 0	0 0	0	20,463 0	0	191,906 0	176,261 0
(3)DAVID SIMON CIO	(i) (ii)	138,641 0	0 0	0	12,799 0	0	151,440 0	0
(4)JANE HONEYCUTT VP SENIOR ACCOUNTANT	(i) (ii)	142,289 0	0 0	0	16,512 0	0	158,801	142,327 0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

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OMB No 1545-0047

2012

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Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization SOUTH CAROLINA STUDENT LOAN CORP

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

57-0602805

Identifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION	THE PURPOSE OF THE CORPORATION IS TO RECEIVE, DISBURSE AND ADMINISTER FUNDS FOR EDUCATIONAL PURPOSES WITHOUT PECUNIARY GAIN OR PROFIT ADDITIONALLY, THE PURPOSE OF THE CORPORATION IS TO AID IN THE FULFILLMENT OF THE DESIRE AND DIRECTION OF THE PEOPLE OF SOUTH CAROLINA IN MAKING LOANS AVAILABLE TO RESIDENTS TO ENABLE THEM TO ATTEND ELIGIBLE INSTITUTIONS WHICH ARE BEYOND THE PUBLIC SCHOOL LEVEL. THE CORPORATION IS ALSO EMPOWERED TO ACT AS AN AGENT FOR OTHER INSTITUTIONS AND FOUNDATIONS TO RECEIVE, INVEST, HANDLE AND DISBURSE FUNDS, AND TO SERVICE STUDENT LOANS, GUARANTEES OF STUDENT LOANS, INSURANCE OF STUDENT LOANS AND ACQUISITIONS OF CONTINGENT INTEREST IN STUDENT LOANS FOR OTHER PRIVATE, OR GOVERNMENTAL INSTITUTIONS AND FOUNDATIONS IN GENERAL, THE CORPORATION IS TO ENGAGE IN AND CARRY ON THE FUNCTION OF MAKING, HANDLING, SERVICING, AND DEALING WITH STUDENT LOANS, THE RECEIVING, INVESTING AND DISBURSING OF FUNDS, AND ALL THINGS INCIDENT THERE TO, PROVIDED THAT NO ACTIVITY SHALL BE CARRIED ON WHICH IS NOT PERMITTED BY A CORPORATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE.

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION	THE PURPOSE OF THE CORPORATION IS TO RECEIVE, DISBURSE AND ADMINISTER FUNDS FOR EDUCATIONAL PURPOSES WITHOUT PECUNIARY GAIN OR PROFIT ADDITIONALLY, THE PURPOSE OF THE CORPORATION IS TO AID IN THE FULFILLMENT OF THE DESIRE AND DIRECTION OF THE PEOPLE OF SOUTH CAROLINA IN MAKING LOANS AVAILABLE TO RESIDENTS TO ENABLE THEM TO ATTEND ELIGIBLE INSTITUTIONS WHICH ARE BEYOND THE PUBLIC SCHOOL LEVEL. THE CORPORATION IS ALSO EMPOWERED TO ACT AS AN AGENT FOR OTHER INSTITUTIONS AND FOUNDATIONS TO RECEIVE, INVEST, HANDLE AND DISBURSE FUNDS, AND TO SERVICE STUDENT LOANS, GUARANTEES OF STUDENT LOANS, INSURANCE OF STUDENT LOANS AND ACQUISITIONS OF CONTINGENT INTEREST IN STUDENT LOANS FOR OTHER PRIVATE, OR GOVERNMENTAL INSTITUTIONS AND FOUNDATIONS IN GENERAL, THE CORPORATION IS TO ENGAGE IN AND CARRY ON THE FUNCTION OF MAKING, HANDLING, SERVICING, AND DEALING WITH STUDENT LOANS, THE RECEIVING, INVESTING AND DISBURSING OF FUNDS, AND ALL THINGS INCIDENT THERE TO, PROVIDED THAT NO ACTIVITY SHALL BE CARRIED ON WHICH IS NOT PERMITTED BY A CORPORATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE

Identifier Return Reference	Explanation e
FORM 990 PART III, LII 2, NEW PROGRAM	OPERATE (ATO) STATUS ON JUNE 25, 2012, FROM THE DOE FOR A NINETY (90) DAY PERIOD SCSLC WAS

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4A, EXEMPT PURPOSE ACHIEVEMENTS	PROVIDE STUDENT LOANS TO ELIGIBLE BORROWERS FOR HIGHER EDUCATION AND SERVICE THE LOANS UNTIL PAID BY THE BORROWERS

Identifier	Return Reference	Explanation
		THE COMPLETED FORM 990 WAS SENT TO THE CORPORATION FOR REVIEW AND FINAL SIGNATURE BEFORE SUBMISSION TO THE IRS THE PROCESS ENTAILED A REVIEW BY THE CHIEF FINANCIAL OFFICER, THE CHIEF EXECUTIVE OFFICER AND ALL MEMBERS OF THE AUDIT COMMITTEE OF THE CORPORATION ANY QUESTIONS/ISSUES WERE CLARIFIED AND ADDRESSED AS NECESSARY BEFORE THE FINAL SIGNATURE AND SUBMISSION

Identifier	Return Reference	Explanation
	VI, SECTION B, LINE 12C	A WRITTEN CONFLICT OF INTEREST POLICY IS DISTRIBUTED WITH THE MEETING AGENDA PACKET MATERIALS FOR THE AUGUST MEETING OF THE BOARD OF DIRECTORS FOR THEIR COMPLETION ALL FORMS ARE COLLECTED AND REVIEWED BY STAFF FOR ANY APPARENT CONFLICT ALL EMPLOYEES COMPLETE DOCUMENTATION ANNUALLY TO DISCLOSE ANY CONFLICTS OF INTEREST NEW HIRES COMPLETE THIS AT THE TIME OF HIRING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS OF THE CORPORATION DETERMINES THE COMPENSATION OF THE PRESIDENT/CEO MEMBERS OF THE COMPENSATION COMMITTEE ARE VERY KNOWLEDGEABLE ABOUT EXECUTIVE COMPENSATION IN GENERAL ONE MEMBER IS A FORMER PRESIDENT OF A STUDENT LOAN PROVIDER AND THE CHAIRMAN OF THE COMPENSATION COMMITTEE IS A FORMER SENIOR VICE PRESIDENT AND HUMAN RESOURCES DIRECTOR OF A COMMUNITY BANK NEITHER THE PRESIDENT NOR OTHER MEMBERS OF THE CORPORATION STAFF ARE INVOLVED IN THESE CEO COMPENSATION DISCUSSIONS TOP MANAGEMENT COMPENSATION IS DETERMINED BY THE PRESIDENT, WHO IS FAMILIAR WITH COMPENSATION STRUCTURES IN THE REGIONAL MARKETPLACE FOR OUR TYPE OF ORGANIZATION BOTH THE COMPENSATION COMMITTEE AND THE CEO USE AN INDUSTRY COMPENSATION SURVEY TO ASSIST IN THEIR COMPENSATION DECISIONS

Identifie	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE CORPORATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST TO THE PUBLIC THE CORPORATION'S YEARLY AUDITED FINANCIAL STATEMENTS ARE POSTED TO ITS WEBSITE

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES		EMPLOYEE BENEFITS-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST 1897884

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE AUDIT COMMITTEE OF THE CORPORATION ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS CONSOLIDATED FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDEDNT ACCOUNTANT

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

DLN: 93493076011064

2012

OMB No 1545-0047

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Schedule R (Form 990) 2012

Employer identification number

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

SOUTH CAROLINA STUDENT LOAN CORP

				57-060280	05		
Part I Identification of Disregarded Entities (Comp	lete if the organizatior	answered "Yes"	to Form 990, Pa	art IV, line 33.)			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) EDUCATIONAL LOAN SERVICING LLC (DBA CAMPUS PARTNERS) 2400 REYNOLDA ROAD WINSTONSALEM, NC 27106	LOAN SERVICING	NC	-12,576,477	3,465,312	SC STUDENT LOAN CORPORATION	ī	
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete if the tax year.)	the organization	answered "Yes'	to Form 990, Pa	art IV, line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	n Public charity sta (if section 501(c))	tus Direct controlling (3)) entity	Section (13) co	
(A) FRUMNITACE CORROBATION	DIRECT LOAN COLLECTIONS		F01(C)(2)	LIME O	CC CTUDENT LOAN	Yes	No
(1) EDVANTAGE CORPORATION	DIRECT LOAN COLLECTIONS	SC	501(C)(3)	LINE 9	SC STUDENT LOAN CORPORATION	Yes	
8906 TWO NOTCH RD COLUMBIA, SC 29223 45-1482379							
13 1102379							
							_
							_

Cat No 50135Y

(a) Name, address, and EIN of related organization		(b) Primary activit	Primary activity Legal Direct Predomicile Controlling Incolling Controlling Country Countr		(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h) Disproprtionat r allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

1 During the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts 11-1V					
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes		
b Gift, grant, or capital contribution to related organization(s)				1b	Yes		
c Gift, grant, or capital contribution from related organization(s)							
d Loans or loan guarantees to or for related organization(s)							
e Loans or loan guarantees by related organization(s)				1e		No	
6 Douglands from related community of (2)				1f		No	
f Dividends from related organization(s)				\vdash		No	
g Sale of assets to related organization(s)				1g 1h		No	
h Purchase of assets from related organization(s)				1i		No	
i Exchange of assets with related organization(s)					Yes	NO	
j Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No	
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No	
• Sharing of paid employees with related organization(s)				10		No	
P. Doumburg amont houd to related organization/s) for expenses				1p		No	
P Reimbursement paid to related organization(s) for expenses				1q		No	
q Reimbursement paid by related organization(s) for expenses				14			
r Other transfer of cash or property to related organization(s)				1r		No	
s Other transfer of cash or property from related organization(s)				1s		No	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complet	te this line, including co	overed relationships	and transaction thresholds				
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	nvolved		
1) EDVANTAGE CORP	J	23,040	RENT BASED ON SQUARE FOOTAGI	E UTIL	_		
2) EDVANTAGE CORP	В	250,887	CAPITAL CONTRIBUTION				
	1						
	ı	I					

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		-	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Software ID:

Software Version:

EIN: 57-0602805

Name: SOUTH CAROLINA STUDENT LOAN CORP

Schedule R (Form 990) 2012

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

	Complete tins i	balt to provide additional morniation for responses to questions on schedule k (see instructions)
Identifier	Return Reference	Explanation
	Reference SCHEDULE R, PART V, 1I	EDVANTAGE CORPORATION IS NOTED HERE AS A TAX-EXEMPT ORGANIZATION FORM 1023 WAS FILED IN JANUARY 2013 REQUESTING TAX- EXEMPT STATUS SCHEDULE R DISCLOSURE IS AS FOLLOWS EDVANTAGE CORPORATION WAS FORMED APRIL 1, 2011 AS A SOUTH CAROLINA NONPROFIT PUBLIC BENEFIT CORPORATION WITH THE PRIMARY PURPOSE OF BECOMING A CONTRACTOR FOR DIRECT LOAN COLLECTIONS FOR THE UNITED STATES DEPARTMENT OF EDUCATION (THE "DOE") UNDER THE SMALL BUSINESS ADMINISTRATION GUIDELINES (THE "SBA") THE CORPORATION MADE A CONTRIBUTION OF CAPITAL AT THE INCEPTION OF EDVANTAGE IN EXCHANGE FOR ALL OF THE OWNERSHIP RIGHTS IN EDVANTAGE CORPORATION AT THE TIME OF THE FILING OF FORM 990, FOR THE PERIOD ENDING JUNE 30, 2011, EDVANTAGE INTENDED TO APPLY FOR ITS OWN EXEMPTION FROM FEDERAL INCOME TAXATION BY SUBMITTING FORM 1023 FORM 1023 WAS SUBMITTED IN JANUARY 2013 EDVANTAGE ENTERED INTO A CONTRACT WITH PERFORMANT/OS ("EDVANTAGE CONTRACT") AS A SUBCONTRACTOR TO PROVIDE COLLECTION SERVICES AND TO PREPARE ITSELF FOR EVENTUALLY APPLYING FOR AND BECOMING A CONTRACTOR FOR DOE PERFORMANT/DCS IS A LARGE CONTRACTOR FOR DOE EDVANTAGE BEGAN PERFORMING THE SUBCONTRACT UNDER THE SMALL BUSINESS SET-ASIDE, AS DEFINED BY REGULATIONS OF THE SBA WHEN EDVANTAGE APPLIED FOR SMALL BUSINESS CERTIFICATION, IT WAS LEARNED THAT IT WOULD NOT QUALIFY DUE TO SBA REQUIREMENTS RELATED TO REVENUE OF OUR PARENT AND NON PROFIT STATUS EDVANTAGE HAS UNSUCCESSFULLY ATTEMPTED TO GET A RULING FROM SBA SO THAT IT CAN CONTINUE TO BE A SUBCONTRACTOR FOR PERFORMANT/DCS UNDER THE SMALL BUSINESS SET ASIDE EDVANTAGE CONTINUES TO OPERATE AS A SUBCONTRACTOR FOR PERFORMANT/DCS AND SUBMITTED A BID ON AUGUST 14, 2013 TO BECOME A LARGE CONTRACTOR TO PROVIDE COLLECTION SERVICES FOR DOE PERFORMANT/DCS AGREED TO ASSIST EDVANTAGE IN ITS FILING
		TO OBTAIN A BID FROM DOE FOR COLLECTION SERVICES WHEN THE BIDDING PROCESS IS OPENED, AND ADDITIONALLY PERFORMANT/DCS HAS AGREED TO ALLOW EDVANTAGE TO CONTINUE USING ITS SOFTWARE TO PERFORM THE FUNCTION REQUIRED FOR THE COLLECTION SERVICES IF EDVANTAGE IS SUCCESSFUL IN OBTAINING A BID FROM DOE EDVANTAGE WILL OPERATE THE SOFTWARE OF PERFORMANT BASED ON PAYMENT OF SEAT LICENSES AND SPECIFIC CONTRACT ARRANGEMENTS ONCE EDVANTAGE RECEIVES ITS OWN COLLECTION SERVICES CONTRACT WITH DOE TO DATE NO RESPONSE HAS BEEN RECEIVED REGARDING EDVANTAGE'S PROPOSAL TO THE DOE HOWEVER, SINCE SUBMITTING ITS PROPOSAL TO BECOME A LARGE CONTRACTOR, EDVANTAGE HAS RECONSIDERED BECOMING A LARGE CONTRACTOR FOR THE DOE AND HAS DECIDED NOT TO CONTINUE TO SEEK THIS CONTRACT, WHEN/OR IF THE OPPORTUNITY TO PROVIDE THIS SERVICE IS GRANTED BY THE DOE