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Department of the Treasury Internal Revenue Service

L(Q)

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

For the 2013 calendar year, or tax year beginning Jul 1 , 2013, and ending , 2014 D Employer Identification Number Ogeechee Technical College Foundation, Check if applicable Address change 58-1875628 E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Name change (912) 681-2758 Initial return City or town, state or province, country, and ZIP or foreign postal code Terminated 209,167 G Gross receipts \$ Amended return 30459 Statesboro F Name and address of principal officer H(a) Is this a group return for subordinates? Yes Application pending H(b) Are all subordinates included? Barry Turner One Joe Kennedy Blvd Statesboro GA 30458 If 'No,' attach a list. (see instructions) 4947(a)(1) or Tax-exempt status X 501(c)(3) 501(c) ((insert no) H(c) Group exemption number Website: ► N/A Other P M State of legal domicile Form of organization X Corporation Trust Association L Year of formation 1989 Part I Summary Briefly describe the organization's mission or most significant activities. To Secure and administer monetary donations, grants, and other funds from constituents within its service delivery area to support Activities & Governance Ogeechee Technical College in its quest to foster economic growth and development, and enhance the quality of life for the citizens in its region through excellence in workforce and adult education. Check this box - ____ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of independent voting members of the governing body (Part VI, line 1b) . . . 4 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 6 99 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 351,315. 146,990. ANNED JUN 1 1,214. 45,075. Other revenue (Part VIII), column (A), lines 5, 60, 8c, 9c, 10c, and 11e) 12,786. 7,339. Total revenue - add lines 8 through 11 (must equal Flam VIII, column (A), line 12) 365,315. 199,404. 13 46,206 107,342. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part & count (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 113,289 145,378. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 159,495. 252,720. 205,820. -53,316. End of Year **Beginning of Current Year** 1,799,368. ,685,466. 21 526. 22 1,798,842. 1,684,940 Part II 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. Signature of offic Sign Kosengurt Here Type or print name and title. Print/Type preparer's name Date Check 05/14/15 self-employed P01272835 Richard N Deal, CPA Paid Westerfield Preparer Firm's name Thigpen, Lanier, CPAs Use Only Firm's EIN Firm's address P.O. Box 505 58-1820983 Statesboro 30459 Phone no 489-8756 . X Yes No

Form 990 (2013)

For	n 990 (2013) Ogeechee Technical College Foundation, Inc	58-1875628	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
· 1	Briefly describe the organization's mission		
	To Secure and administer monetary donations,		
	grants, and other funds from constituents within its service de	livery area to	support
	See Form 990, Page 2, Part III, Line 1 (continued)		
	The state of the s		
2	Did the organization undertake any significant program services during the year which were not listed on the	·	п
	Form 990 or 990-EZ?	· · · · · · · · · · · Yes	X No
	If 'Yes,' describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service if 'Yes,' describe these changes on Schedule O.	ces ⁷ Yes	S X No
A	Describe the organization's program service accomplishments for each of its three largest program services	s as measured by evnen	200
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported.	int of grants and allocation	ns to
4 a	(Code:) (Expenses \$ 107,342. including grants of \$ 107,342.)	(Revenue \$	45,075.)
	STUDENT DEVELOPMENT AND ENHANCEMENT FOR STUDENTS OF TECHNICAL C	OLLEGE TO INCLU	JDE
	SCHOLARSHIPS, EMERGENCY ASSISTANCE, AND AWARDS FOR STUDENT COMP	ETITIONS.	
			
			
		(Revenue \$	<u> </u>
	FUNDING FOR VARIOUS CAREER DEVELOPMENT AND ACTIVITIES FOR TECHN		
	FACULTY AND STAFF; FUNDING FOR ACCREDITATION EXPENSES FOR TECHN	ICAL COLLEGE,	.
	EVENTS TO PROMOTE COLLEGE WITH LOCAL MEDIA AND LEGISLATORS.		
			
		- 	
		- 	
•			
		<u>. </u>	
	Code) (Expenses \$37,133. including grants of \$0.)		0.)
	MATERIALS AND SUPPLEMENTAL SERVICES TO PROVIDE INSTRUCTIONAL SUP	PPORT_FOR	
-	VARIOUS PROGRAMS OFFERED BY TECHNICAL COLLEGES.		
-			
-			
_			
-			
-		·	
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_	. 		
_			
			
	other program services. (Describe in Schedule O.)		,
	Expenses \$ 14,619. including grants of \$ 0.) (Revenue \$	0.)
4 e T	otal program service expenses ► 197,365.		

Form 990 (2013) 58-1875628 Ogeechee Technical College Foundation, Inc Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Χ Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 2 3 X Х 4 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 Х 5 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, 6 Х 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х 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 9 Х Х 10 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. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total 11 b Х 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 11 c Х 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 Х 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If Yes,' complete Schedule D, Part X. . . Х 11 e 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. Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If Yes,' complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Х if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12 b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States?.......... 14a Х 14h 15 Х 16 Х 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? If 'Yes,' complete Schedule G, Part I (see instructions) 17 Χ Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19 Х

20

Х

20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

Form 990 (2013) Ogeechee Technical College Foundation, Inc

Part JV | Checklist of Required Schedules (continued)

			Yes	No
`2 [,]	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
2	Did the organization report more than \$5,000 of grants or 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	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24	a 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 25a	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		_
25	a 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		Х
	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		Х
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		х
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)			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ь	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		х
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		Х
	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		Х
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	х	

BAA

Form 990 (2013)

Check if Schedule O contains a response or note to any line in this Part V			<u>. [</u>
		Yes	N
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 1		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
2 a 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?	2 b	i	!
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		х
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
4 a 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)?	4 a		Х
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.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	.	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
· · · · · · · · · · · · · · · · · · ·			
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).	1	ļ	
a 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?	7 a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	1	Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did 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.		\neg	
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	ļ	ł	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11 Section 501(c)(12) organizations. Enter:		1	
a Gross income from members or shareholders		1	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	-	-	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	\neg	\neg	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
Note. See the instructions for additional information the organization must report on Schedule O.	\top	\neg	
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			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14 a	$\neg \uparrow$	Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 21 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 21 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? 2 Х Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 Х 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a X Х 8 h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12 a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c Х 13 Х 14 X 15 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? 15a X 15b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed <u>Georgia</u> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply. Another's website X Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization makes 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: One Joe Kennedy Blvd Statesboro GA __ (912) 681-2758 TEEA0106 07/02/13 Form 990 (2013)

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Form 990 (2013) Ogeechee Techni	ical Co	lleg	je _	Fοι	ınd	atic	n,	Inc	58-187	5628 Page
Part VII Compensation of Office	rs, Direc	tors,	Tr	ust	ees	, Ke	y Ei	mployees, Highe	st Compensated	Employees, and
Independent Contractor						- 4b 1	Dad	VIII		F
Check if Schedule O contains a Section A. Officers, Directors, True										
1 a Complete this table for all persons require organization's tax year										· · · · · · · · · · · · · · · · · · ·
 List all of the organization's current officompensation. Enter -0- in columns (D), (E), a 								luals or organizations)	, regardless of amount	of
 List all of the organization's current key 										
 List the organization's five current high who received reportable compensation (Box sorganization and any related organizations. 	est compe 5 of Form \	nsated N-2 an	l em id/or	ploy Box	ees < 7 o	(other f Form	thar 109	n an officer, director, tr 99-MISC) of more than	ustee, or key employe \$100,000 from the	∍)
 List all of the organization's former office of reportable compensation from the organization 	ition and a	ny rela	ted	orga	ınıza	tions	•	, ,		
 List all of the organization's former directions organization, more than \$10,000 of reportable 										
List persons in the following order. individual t	,				•			, -		ated
employees; and former such persons.										
X Check this box if neither the organization	nor any rel	lated o	rgar			compe	nsat	ed any current officer,	director, or trustee.	
	i			(6	C)				Ì	
(A) Name and Title	(B) Average hours per	one bo	ox, ùn	less p	persor	more the s bother/trustee	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours	우 콧	돐	2	<u></u>	3 %	ੂ	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	for related organiza-	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former		·	organization and related
	tions below dotted	호호	욻		ploy	econ	`			organizations
	line)	uste	ន្ត		8	pen.				
		ľ	ee			satec				
(1) Tom Clark	0.00						<u> </u>			
President		х		Х						
(2) Bill Perry	0.00									
Vice President	l	Х		Х						
(3) Dewey Newton	0.00									

Board Member

Form 990 (2013) Ogeechee Technical Colle Part VII Section A. Officers, Directors, Trus								d Highest Con	58-18756			age 8
Fait vii Section A. Officers, Directors, 110	(B)	Tey	<u> </u>	_	C)	:65,	all	Id Highest Con	iipensateu Em	pioye	es (coi	niinuea)
(A) Name and title	Average hours per	of	k, unle ficera	Position not check more than one unless person is both an cer and a director/trustee)				(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F) Estimated amount of oth compensation	
	(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	0	from the rganization and relate rganization	on ed
(15) Karen Lambert Board Member	0.00	X										
(16) Jimmy Sands	0.00	1		-								
Board Member (17) Bill Thompson	0.00	1								-		
Board Member (18) Jan Tankersley	0.00	Х			_							
Board Member	0.00	Х					_			<u> </u>		
(19) Yolanda Tremble Board Member		х										
(20) Darron Burnette Board Member	0.00	x										
(21) Dorothy Glisson Board Member	0.00	х										
(22)									 -		·	
(23)										ļ		
(24)												
(25)											<u> </u>	
1 b Sub-total							-					
d Total (add lines 1b and 1c)							>	I mare then \$100.0	00 of reportable as		Ai	
from the organization	tnose II	siea	apo	ve) \	wno	recei	ved	more than \$100,0	оо от геропаріе соі	mpensa	ition	
3 Did the organization list any former officer, director, or											Yes	No
 on line 1a? If 'Yes,' complete Schedule J for such indiv For any individual listed on line 1a, is the sum of report the organization and related organizations greater than 	table cor 1 \$150,0	npen	satio	on a	nd o	ther lete S	con S <i>ch</i>	npensation from edule J for		3		X
such individual	pensatio	n fro	m ai	ny u	nrela	ated (orga	anızation or individu	ıal	4		<u>X</u>
for services rendered to the organization? If 'Yes,' com Section B. Independent Contractors										. 5		X
 Complete this table for your five highest compensated compensation from the organization. Report compensation. 	indepenation for	dent the c	cont alen	tract dar	ors (year	hat r	ece ing	eived more than \$10 with or within the o	00,000 of rganization's tax ye	ar.		
(A) Name and business address								(B) Description of	services	Compe	C) ensation	1
							\perp					
							\downarrow					
Total number of independent contractors (including but	not limit	ed to	tho	se lı	sted	abo	ve)	who received more	than			
\$100,000 of compensation from the organization		FA01	18 1·	1/11/4	13	-				Form	990 (2	013)

_		Check if Schedule O contains a response or note to any li	ne in this Part VIII .	<u> </u>	<u></u> .	<u> </u>
-			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512-514
TS	2	1 a Federated campaigns 1 a			 -	
RA		b Membership dues 1 b				
S		c Fundraising events 1 c				
틎	AR	d Related organizations 1 d				
(S, (를	e Government grants (contributions) 1 e				
PROGRAM SERVICE REVENIIF CONTRIBUTIONS, GIFTS, GRANTS	I HER S	f All other contributions, gifts, grants, and similar amounts not included above				
E :	2	g Noncash contributions included in lines 1a-1f \$				
3	4	h Total. Add lines 1a-1f	146,990.			
į		Business Code		<u> </u>		1
Ž		2a				
Ä		b				
Ž		·				
SE		<u> </u>				
RAN		6 All of the control	-			
90		f All other program service revenue	_	-		
<u> </u>	╀	g Total. Add lines 2a-2f				, , , , , , , , , , , , , , , , , , ,
	;	Investment income (including dividends, interest and other similar amounts)	240	240	•	
	L	Income from investment of tax-exempt bond proceeds	348.	348.	0.	0
	1.	5 Royalties				·
	'	(i) Real (ii) Personal			 	
	١,	Ga Gross rents	•	[
	`	b Less. rental expenses	•			
		c Rental income or (loss)				
		d Net rental income or (loss)				
		(v) Securities (v) Other				
	7	a Gross amount from sales or				
		1 11/2/1				
		b Less cost or other basis and sales expenses	,			
			i.			
	İ	c Gain or (loss)	44 737	44 707		
4	8	a Gross income from fundraising events	44,727.	44,727.	0.	0
OTHER REVENUE		(not including \$ of contributions reported on line 1c).				
æ						
٣		See Part IV, line 18				
OI		b Less: direct expenses b 9,763. c Net income or (loss) from fundraising events			_	
	•	a Gross income from gaming activities See Part IV, line 19	7,339.		0.	7,339.
		b Less. direct expenses b		1		
		c Net income or (loss) from gaming activities				
		` ' " "				
		a Gross sales of inventory, less returns and allowances				
- 1		b Less cost of goods sold b				
-		Net income or (loss) from sales of inventory				
}	44	Miscellaneous Revenue Business Code		ĺ		
	11:	~ 				
	ı	·				
	•	·				
		All other revenue				
		• Total. Add lines 11a-11d				
1	12	Total revenue. See instructions	199,404.	45,075.	0.	7,339.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)	
Check if Schedule O contains a response or note to any line in this Part IX	

	not include amounts reported on lines , 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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	107,342.	107,342.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	· · · · · · · · · · · · · · · · · · ·				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	3				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
	a Management				
	Legal				
	Accounting	750.	0.	750.	0.
	Lobbying				- · · - · · · · · · · · · · · · · · · ·
	Professional fundraising services See Part IV, line 17		,		
	Investment management fees				
_	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion				
13	Office expenses	19,085.	0.	19,085.	0.
14	Information technology	9,878.	0.	9,878.	0.
15	Royalties	3,0.0.		3,0,0.	
16	Occupancy			-	· · · · · · · · · · · · · · · · · · ·
17	Travel				1
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	2,619.	0.	2,619.	0.
_	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
	Depreciation, depletion, and amortization	6,312.	0.	6,312.	0.
	Insurance	1,679.	0.	1,679.	0.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				· ·
а	College Relations	28,824.	28.824.	0.	0.
	Instructional Support	37,133.	37,133.	0.	0.
	Adult Literacy	14,619.	14,619.	0.	0.
đ	Fundraising Supplies	1,497.	0.	0.	1.497.
e .	All other expenses	22,982.	9,447.	13,535.	0.
25	Total functional expenses. Add lines 1 through 24e	252,720.	197,365.	53,858.	1,497.
t J	Joint costs. Complete this line only if he organization reported in column (B) oint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720).				

•			(A) Beginning of year		(B) End of year
_	1	Cash — non-interest-bearing	201,044.	1	158,353
	2	·		2	
	3		71,318.	3	
	4	Accounts receivable, net		4	
	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	
	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 I		6	
A S	7	Notes and loans receivable, net		7	
ASSET	8	Inventories for sale or use		8	
Ī	9	Prepaid expenses and deferred charges		9	
	10	a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D			
	l i	b Less accumulated depreciation		10 c	
	11	Investments – publicly traded securities	1,403,036.	11	1,636,715.
	12	Investments — other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	10,068.	14	3,757.
	15	Other assets. See Part IV, line 11		15	543.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,685,466.	16	1,799,368.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable	· ·	18	
	19	Deferred revenue	<u>526.</u>	19	526.
<u>.</u>]	20	Tax-exempt bond liabilities		20	
<u> </u>	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
A B I L	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
T	23	Secured mortgages and notes payable to unrelated third parties		23	
E S	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 D		25	
	26	Total liabilities. Add lines 17 through 25	526.	26	526.
N E T		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete			
- 1		lines 27 through 29, and lines 33 and 34.			
ŝ	27	Unrestricted net assets	1,427,822.	27	1,572,573.
ASSETS	28	Temporarily restricted net assets	142,118.	28	111,269.
	29	Permanently restricted net assets	115,000.	29	115,000.
2		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
- 1	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	··
	33	Total net assets or fund balances	1,684,940.	33	1,798,842.
Be le Politio		Total liabilities and net assets/fund balances	1,685,466.	34	1,799,368.
AΑ				•	Form 990 (2013)

For	n 990 (2013) Ogeechee Technical College Foundation, Inc 5	<u>8-1875</u>	628		Page 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Parl XI				X
, 1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		199	9,404.
2	Total expenses (must equal Part IX, column (A), line 25)			252	2,720.
3	Revenue less expenses. Subtract line 2 from line 1	. 3		_ 5;	3,316.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	1		4,940.
5	Net unrealized gains (losses) on investments	. 5			4,041.
6	Donated services and use of facilities	. 6			-
7	Investment expenses				•
8	Prior period adjustments	. 8		-36	5,823.
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	. 10	1	. 798	3,842.
Pa	t XII Financial Statements and Reporting			, , , , ,	7 0 12.
	Check if Schedule O contains a response or note to any line in this Part XII				
	Check is Scriedule O contains a response of note to any line in this rait Air	· · · · · ·		· · · ·	es No
1	Accounting method used to prepare the Form 990:		_	- '	03 110
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or separate basis, consolidated basis, or both:	а			
•	Separate basis Consolidated basis Both consolidated and separate basis				
t	Were the organization's financial statements audited by an independent accountant?		· · L	2 b	X
	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.				
	Separate basis Consolidated 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 of the areview, or compilation of its financial statements and selection of an independent accountant?	ıdit,		2 c	x
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	e 		3 a	х
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	audit			1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b	
BAA			Fo	orm 99	0 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is

2013

Open to Public Inspection

58-1875628

Department of the Treasury Internal Revenue Service

Name of the organization

Ogeechee Technical College Foundation, Inc

at www.irs.gov/form990. Employer Identification number

Par	t I Reason f	or Pul	olic Charity St	atus (All organizatio	ns must c	omple	te this	<u>part.) </u> 3	See ins	tructio	ns.		
The c	organization is not	a privat	e foundation becar	use it is: (For lines 1 throu	ugh 11, ched	k only c	ne box.)						
1	A church, co	nventior	of churches or as	sociation of churches des	scribed in se	ection 1	70(b)(1)(A)(i).					
2	A school des	cribed II	n section 170(b)(1)(A)(ii). (Attach Schedule	e E.)								
3	A hospital or	а сооре	erative hospital ser	vice organization describe	ed ın sectio	n 170(b)(1)(A)(ii	i).					
4	A medical re	search o	organization operat	ed in conjunction with a h	nospital desc	cribed in	section	170(b)	(1)(A)(iii)). Enter t	the hospital's	6	
	name, city, a	nd state	:										
5	X An organizat	on oper iv). (Co	ated for the benefit emplete Part II.)	t of a college or university	owned or o	perated	by a go	vernmei	ntal unit	describe	d in section		
6				governmental unit descri									
7	An organizati	on that ' 0(b)(1)(normally receives a (A)(vi). (Complete	a substantial part of its su Part II.)	ipport from a	a govern	imental u	init or fr	om the g	eneral p	ublic describ	ed	
8	A community	trust de	scribed in section	170(b)(1)(A)(vi). (Comp	lete Part II)								
9	from activities investment in June 30, 197	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10	An organizatı	on orga	nized and operated	dexclusively to test for pu	ublic safety.	See sec	tion 509)(a)(4).					
11	more publicly	support	ted organizations d	f exclusively for the bene lescribed in section 509(a ation and complete lines	a)(1) or sect	on 509(function a)(2). Se	s of, or e sect ion	carry out on 509(a	the purp)(3). Ch	ooses of one eck the box	or that	
	a. ∏Type I	b	Type II	c Type III – Fund	tionally inte	grated		d 📗	Type III	- Non-fi	unctionally in	ntegrat	ed
е	By checking to other than for section 509(a	ndation	I certify that the or managers and oth	ganization is not controlle er than one or more pub	ed directly o licly support	r indirec ed orga	tly by on nizations	e or mo describ	re disqua ed in se	alified pe ction 509	ersons 9(a)(1) or		
f	check this box			ermination from the IRS			· · · ·		• • • • •		ation,		. [
g	Since August	17, 200	6, has the organiza	ation accepted any gift o	r contributio	n from a	iny of the	follow	ng perso	ns?			
	(I) A perso	n who d	rectly or indirectly	controls, either alone or supported organization?	together wit	h persor	ns descri	bed in (ii) and (iii)	11 g (i)	Yes	No
		-		• •									
				ribed in (i) above?							. 11g (ii)		
				n described in (i) or (ii) at					· · · · ·		· 11 g (iii)		
h	Provide the fo	llowing	nformation about t	he supported organization	n(s).		,				·		
	(i) Name of suppo organization	rted	(ii) EIN	(Iii) Type of organizatio (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go) listed in	(v) Did yo the organi column (l) supp	zation in of your	(vi) li organiz colun organize U :	ation in nn (i)	(vii) Amouni sup	of mone	tary
					Yes	No	Yes	No	Yes	No			
													
(A)							1		ļ				
(B)													
(0)							<u> </u>						
(C)							ł						
(0)	·				 -		 		<u> </u>				
(D)		ļ											
					 		 		 				
E)		ĺ											
-/			····		-		 	 					
Γotal													

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	•		,,,,,
(Complete only	if you chacked the boy on line 5	7, or 8 of Part I or if the organization failed to qualify under Part II	I If the
(Complete only	ii you checked the box on line o,	7, or o or rait i or it the organization laned to quality under rait if	1. 11 (116
organization fai	Is to qualify under the tests listed	below, please complete Part III.)	

Se	ction A. Public Support						
Cal	endar year (or fiscal year ginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')	297,209.	249,915.	365,158.	351,315.	146,990.	1,410,587.
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	297,209.	249,915.	365,158.	351,315.	146,990.	1,410,587.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		÷	·			
6	Public support. Subtract line 5 from line 4	<u> </u>	•	,			1,410,587.
Seg	tion B. Total Support						
Cale begi	endar year (or fiscal year inning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	297,209.	249,915.	365,158.	351,315.	146,990.	1,410,587.
8	Gross income from interest, dividends, payments received on secunties loans, rents, royalties and income from similar sources	22,813.	22,952.	28,309.	1,214.	348.	75,636.
9	Net income from unrelated business activities, whether or not the business is regularly carned on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	64,279.	20,599.	21,271.	12,786.	7,339.	126,274.
11	Total support. Add lines 7 through 10						1,612,497.
12	Gross receipts from related activities	s, etc (see instruct	ions)			12	
13	First five years. If the Form 990 is organization, check this box and st	for the organization op here	n's first, second, th	ard, fourth, or fifth t	ax year as a secti	on 501(c)(3)	▶ ∏
Sec	tion C. Computation of Pub	lic Support Pe	ercentage				
	Public support percentage for 2013		•				87.48 %
15	Public support percentage from 2012 Schedule A, Part II, line 14						
16 a	33-1/3% support test - 2013. If the and stop here. The organization quality	ne organization did Jalifies as a publicly	not check the box y supported organi	on line 13, and the zation	e line 14 is 33-1/39	% or more, check t	his box
b	33-1/3% support test - 2012. If the and stop here. The organization quality	e organization did i alifies as a publicly	not check a box on y supported organi	ı line 13 or 16a, an zation	d line 15 is 33-1/3	% or more, check	this box
	10%-facts-and-circumstances tes or more, and if the organization me the organization meets the 'facts-ar	ets the 'facts-and-ci	ircumstances' test.	. check this box an	d stop here. Expl	ain in Part IV how	,
	10%-facts-and-circumstances tes or more, and if the organization med organization meets the 'facts-and-come Private foundation. If the organiza	ets the 'facts-and-ci rcumstances' test.	rcumstances' test, The organization of	, check this box and qualifies as a public	d stop here. Expl cly supported orga	ain in Part IV how inization	the ▶ □
		uon did not check a	DUA UTTINE 13, I	Ja, 100, 17a, 01 17			
AA					Sche	edule A (Form 990	or 990-EZ) 2013

B 4 111	I – .				=/	1/01
Dart III	CHARACE	Cabadii	la tar Armanisationa Ila	CAPIDAM ID SA	ATIAN BILLI	21171
raitiii	SUDDUIL	ouneun	le for Organizations Des	scribed III de	CUUII 3031	anzı

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)

30	ection A. Public Support						
	endar year (or fiscal yr beginning in) ► 1 Gifts, grants, contributions and membership fees received. (Do not include	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	any 'unusual grants ')		J				
2	2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.					-	<u> </u>
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	-					
5							
6							
	a Amounts included on lines 1, 2, and 3 received from disqualified persons						
	b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	c Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business						···-
11	Activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13					[
	First five years. If the Form 990 is organization, check this box and st			nird, fourth, or fifth	tax year as a secti	on 501(c)(3)	
Sec	tion C. Computation of Pub	ilic Support P	ercentage				
15	Public support percentage for 2013					————	& <u>&</u>
16	Public support percentage from 201	2 Schedule A, Pa	art III, line 15			16	
Sec	tion D. Computation of Inve	stment Incor	ne Percentage	!			
17	Investment income percentage for 2	•	• • • • • • • • • • • • • • • • • • • •	•	•		90
18	Investment income percentage from						િ
	33-1/3% support tests — 2013. If this not more than 33-1/3%, check the	s box and stop h e	ere. The organizati	on qualifies as a p	oublicly supported o	rganization	
	33-1/3% support tests — 2012. If the line 18 is not more than 33-1/3%, ch	neck this box and	stop here. The org	janization qualifie:	s as a publicly supp	orted organization	•
20	Private foundation. If the organizat	ion did not check					<u></u>
RΔΔ			TEEA0403 0	6/28/13	Sci	nedule A (Form 990	0 or 990 EZ\ 2013

Ogeechee Technical College Foundation, Inc 58-18/5628 Page
Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Pt_II_Line_10: Description: Rental_Income
Pt_II_Line_10: 2009: 207.
Pt II Line 10: 2010: 113.
Pt II Line 10: Description: Golf Tournament
Pt_II_Line_10: 2009: 21798.
Pt_II_Line_10: 2010: 20261.
Pt_II_Line_10: 2011: 20545.
Pt II Line 10: 2013: 7339.
Pt II Line 10: Description: Oktoberfest
Pt_II_Line_10: 2009: 6370.
Pt_II_Line_10: 2010: 0.
Pt_II_Line_10: _2011: _726
Pt_II_Line_10: Description: Disney Institute
Pt_II_Line_10:_2009:_33691.
Pt_II_Line_10:_2010:_0
Pt_II_Line_10: Description: Other_Revenue
Pt_II_Line_10:_2009:_2213
Pt_II_Line_10: 2010: 225.
Pt_II_Line_10:_2012:_12786
·

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete If the organization answered 'Yes,' to Form 990 Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number 58-1875628 Ogeechee Technical College Foundation, Inc 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 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? Nο 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). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area 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 Tax Year a Total number of conservation easements 2 a 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ► Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for 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. 1 a 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. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 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: **►**\$

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Schedule D (Form 990) 2013

(a) Description of security or category (including name of security)	(b) Book value	Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation Cost or end-of-year market value
) Financial derivatives	(-)	(e) member of valuation cost of child of year market value
) Closely-held equity interests		
) Other	 	
)		
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<u>, </u>		
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)	-	
<u>,</u>		
tal (Column (b) must equal Form 990, Part X, column (B) line 12)		
art VIII Investments - Program Related.	*	<u> </u>
Complete if the organization answered Y		Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market valu
1)		
2)		
3)		
4)	 	
5)		
6)		
7)		
8)		
9)	·	
al. (Column (b) must equal Form 990, Part X, column (B) line 13)	- 	
rt IX Other Assets.		<u> </u>
		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered 'Y (a) Des		
Complete if the organization answered 'Y (a) Description		
Complete if the organization answered 'Y (a) Description (a) D		
Complete if the organization answered 'Y (a) Description (a) D		
Complete if the organization answered 'Y (a) Description (a) D		
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Complete if the organization answered 'Y (a) Description (a)		
Complete if the organization answered 'Y (a) Description (b) Complete if the organization answered 'Y (a) Description (b) Complete if the organization answered 'Y (a) Description (b) Complete if the organization answered 'Y (b) Complete if the organization answered 'Y (c) Description (d) Descript		
Complete if the organization answered 'Y (a) Description (b) Complete if the organization answered 'Y (a) Description (b) Complete if the organization answered 'Y (a) Description (b) Complete if the organization answered 'Y (b) Complete if the organization answered 'Y (c) Description (d) Descript	cription	(b) Book value
Complete if the organization answered 'Y (a) Description (a) D	cription	(b) Book value
Complete if the organization answered 'Y (a) Description (b) Description (c) Column (b) must equal Form 990, Part X, column (B), limit X Other Liabilities.	cription	(b) Book value
Complete if the organization answered 'Y (a) Description (a) D	cription	(b) Book value
Complete if the organization answered 'Y (a) Description of liability Complete if the organization answered 'Yes' to Form (a) Description of liability Federal income taxes	e 15.)	(b) Book value
Complete if the organization answered 'Y (a) Description of liability Federal income taxes (a) Description of liability	e 15.)	(b) Book value
Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), line (a) Column (b) must equal Form 990, Part X, column (B), line (b) Must equal Form 990, Part X, column (B), line (c) Complete if the organization answered 'Yes' to Form (a) Description of liability (b) Federal income taxes	e 15.)	(b) Book value
Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), lim (c) Other Liabilities. Complete if the organization answered 'Yes' to For (a) Description of liability Federal income taxes	e 15.)	(b) Book value
Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), limit X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability Federal income taxes	e 15.)	(b) Book value
Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), line (c) Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability Federal income taxes (b) Description of liability (c) Federal income taxes	e 15.)	(b) Book value
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Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), line (c) Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability Federal income taxes	e 15.)	(b) Book value
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Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), lim (c) Other Liabilities. Complete if the organization answered 'Yes' to For (a) Description of liability Federal income taxes	e 15.)	(b) Book value
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Complete if the organization answered 'Y (a) Description (b) must equal Form 990, Part X, column (B), lim (c) Other Liabilities. Complete if the organization answered 'Yes' to For (a) Description of liability Federal income taxes	m 990, Part IV, line 11 (b) Book value	e or 11f. See Form 990, Part X, line 25

• Schedule D (Form 990) 2013 Ogeechee Technical College Foundation, Inc 5	8-1875628 Page
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	. 1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains on investments	
b Donated services and use of facilities	-
c Recovenes of pnor year grants	_
d Other (Describe in Part XIII)	_
e Add lines 2a through 2d	. 2 e
3 Subtract line 2e from line 1	. 3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII)	_
c Add lines 4a and 4b	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities	_
b Prior year adjustments	_} }
c Other losses	_
d Other (Describe in Part XIII.)	_}
e Add lines 2a through 2d	· 2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	-
c Add lines 4a and 4b	. 4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	
Part XIII Supplemental Information.	
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 addition	nal information
BAA	Schedule D (Form 990) 2013

1		(Form 990) 2013	Ogeechee	Technical	College	Foundation,	Inc	58-1875628	Page 5
	Part XIII	Supplementa	I Informatio	n (continued)					
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Information about Schedule G (Form 990 or 990-EZ) and its instructions is

OMB No 1545-0047 2013

> Open to Public Inspection

Department of the Treasury Internal Revenue Service at www.irs.gov/form990. Employer identification number Ogeechee Technical College Foundation, Inc 58-1875628 Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants f c Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Activity (i) Name and address of individual (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (or retained by) or entity (fundraiser) from activity (or retained by) have custody or control of contributions? fundraiser listed in organization column (i) Yes No 1 2 3 5 6 7 8 9 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

		Fundraising Events. Complete if more than \$15,000 of fundraising Events. List events with gross receipts greaters.	the organization ansevent contributions	swered 'Yes' to Fori	m 990, Part IV, line	18, or reported
		Liot ovortio man grood recorpte groot	(a) Event #1 Golf Tournament (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
R E V E N U	1	Gross receipts	17,102.			17,102.
Ē	2	Less, Charitable contributions				
	3	Gross income (line 1 minus line 2)	17,102.			17,102.
	4	Cash prizes				
	5	Noncash prizes				
DIRECT	6	Rent/facility costs				
C	7	Food and beverages				
E X P	8	Entertainment				
EXPERSES	9	Other direct expenses	9,763.			9,763.
S	10	Direct expense summary. Add lines 4 through	gh 9 in column (d)			9,763.
_	11	Net income summary. Subtract line 10 from	line 3, column (d)	<i>.</i> <u>.</u>	<u> </u>	7,339.
Par	<u>t III</u>	Gaming. Complete if the organizati \$15,000 on Form 990-EZ, line 6a.	on answered Yes	to Form 990, Part i	v, line 19, or reporte	o more tnan
##>##			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
-	1	Gross revenue				<u> </u>
E	2	Cash prizes				
D X I P R E E N	3	Noncash prizes				
R E N C S C S C S C S C S C S C S C S C S C	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes %	
	7	Direct expense summary. Add lines 2 throug	gh 5 in column (d)			
	8_	Net gaming income summary. Subtract line	7 from line 1, column (d)			
a	ls the	or the state(s) in which the organization operate organization licensed to operate gaming act	tivities in each of these s			
		e any of the organization's gaming licenses re				
AA			TEEA3702 06/3	26/13	Schedule G (Form	990 or 990-EZ) 2013

Sch	edule	G (Form 990 or 990-EZ) 2013 Ogeechee Technical College Foundation, Inc 58-1875628	Page 3
11	Doe	es the organization operate gaming activities with nonmembers?	res No
12	ls th	ne organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to ninister charitable gaming?	/es No
. 42	دالم سا		
		cate the percentage of gaming activity operated in. organization's facility	9
		organization's facility	
		er the name and address of the person who prepares the organization's gaming/special events books and records.	
	Nam	ne	
	Addr	ress >	
15 a	Does	s the organization have a contact with a third party from whom the organization receives gaming revenue?	Yes No
		es, enter the amount of gaming revenue received by the organization \$ \(\) and the amount	
	of ga	eming revenue retained by the third party	
c		es,' enter name and address of the third party	
	Nam	ie -	
			i I
	Addre	ess	'
16	Gamı	ing manager information	
	Name	e -	
	Gamı	ing manager compensation * \$	
	Desci	ription of services provided	
		Director/officer	
17	Mand	latory distributions	•
а	is the	organization required under state law to make charitable distributions from the gaming proceeds to retain the gaming license?	Yes No
		the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
		ization's own exempt activities during the tax year 🕒 Ş	
Part	IV	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	v),
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SCHEDULEI		S.S	ants and Other	Grants and Other Assistance to Organizations.	o Organizations	.6		OMB No. 1545-0047
(Form 990)		Gove Complet	Governments, an omplete if the organizatio	Governments, and Individuals in the United States Complete if the organization answered Yes' to Form 990, Part IV, line 21 or 22.	i the United Sta m 990, Part IV, line 21	ites or 22.	[]	2013
Department of the Treasury Internal Revenue Service		► Information	about Schedule I (F	 Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. 	ı. ıctions is at www.irs.g	ovform990.	<u> </u>	Open to Public Inspection
Name of the organization	1						Employer identification number	tton number
Ogeechee Technical Part General Inform	1cal College Iformation on Gr	ee Technical College Foundation, Inc General Information on Grants and Assistance	Inc				58-1875628	88
1 Does the organiza the selection criter 2 Describe in Part IV	ution maintain records ria used to award the of the organization's pr	to substantiate the amgrants or assistance?	to the grants or	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	s' eligibility for the grant	s or assistance, and		X Yes No
Part II Grants an Form 990,	Id Other Assistal Part IV, line 21 fo	Grants and Other Assistance to Governments and Org Form 990, Part IV, line 21 for any recipient that received m	nts and Organiat received more	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ed States. Comple can be duplicated	ete if the organizati if additional space	on answered 'Yes is needed.	s' to
(a) Name and address of organization or government	ess of organization ernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
[2]								
[3]								
(4)								
(5)								
(6)								
<u>m</u>								
(9)								
2 Enter total number	er of section 501(c)(3)	Enter total number of section 501(c)(3) and government organizations listed		in the line 1 table				
10	Reduction Act Notice	Enter total number of outer organizations have in the line i table For Paperwork Reduction Act Notice, see the Instructions fo	s for Form 990.		TEEA3901	07/12/13	Schedu	Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013) Ogeechee Technical College Foundation, Inc Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line Part III can be duplicated if additional space is needed.	nical College ndividuals in the L al space is needed	Foundation, In Inited States, Cor	nplete if the organi	58 zation answered 'Yes' to	8–1875628 Part IV, line 22.
(a) Type of grant or assistance	(b) Number of reciplents	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships, Assistance, and Awards	34	107,342.			
2					
3					
4					
5					
9					
1					
Supplemental I	le the information re	equired in Part I, lir	ne 2, Part III, colum	any (litional information.
Pt I line 2 on the millifications of an	ical College F	۵۱ ۱	monitors the distr	distribution of scholarships	rships based
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Schedule I (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Ogeechee Technical College Foundation, Inc	58-1875628
Pt VI, Line 11b The 990 is reviewed by an officer of the Foundat	ion prior to filing.
Pt VI, Line 19 Documents are available upon reguest.	
Pt_XINet_unrealized gains on investments.	
Pt VI, Line 12c Members are required to disclose conflicts of in	terest each year.
	·

Ogeechee T	echnical College	Foundation,	Inc 58	3-1875628		
	(Form 990), Supp Page 2, Part III, Li			orm 990		
Ogeechee Te		in its ques	st to foster		and development, a workforce and adult	
Describe services,	as measured by e	program selexpenses. Se	rvice accomp	lishments for each 3) and 501(c)(4) or	of its three largest pr	ired to
Describe services, report the	the organization's as measured by e	program see expenses. See and allocation	rvice accomp	lishments for each 3) and 501(c)(4) or		ired to
Describe services, report the each prog	the organization's as measured by e amount of grants gram service report	program sel expenses. Se and allocated	rvice accomp ection 501(c)(ons to others	lishments for each 3) and 501(c)(4) or , the total expense	rganizations are requi	ired to v, for
Describe services, report the each prog	the organization's as measured by e amount of grants gram service report	program sel expenses. Se and allocated	rvice accomp ection 501(c)(ons to others	lishments for each 3) and 501(c)(4) or , the total expense	rganizations are requi s, and revenue, if any	ired to v, for
Describe services, report the each prog	the organization's as measured by e amount of grants pram service reports the description:	program sel expenses. Se and allocated	rvice accomp ection 501(c)(ons to others	lishments for each 3) and 501(c)(4) or , the total expense	rganizations are requi s, and revenue, if any	ired to v, for

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