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# Form 990-PF

**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

OMB No 1545-0052

_		lendar year 2014 or tax year beginning		<u>, 2014, and er</u>	nding	<del>,</del>	
		of foundation				A Employer identif	ication number
:	SEC	JRITY'S LENDING HAND FOUNDAT	ION			57-10129	
	Numb	er and street (or P O box number if mail is not delivered	f to street address)	Room/s	suite	B Telephone numb	er (see instructions)
		3OX 811	<del></del>			864-237-	6225
	City o	r town, state or province, country, and ZIP or foreign pos	stal code				
						C If exemption application pending, check here	ation is
_:	SPAI	RTANBURG, SC 29304				J Ferram gr 4112211112	
G	Che	ck all that apply Initial return	Initial return of	of a former public cl	narity	D 1. Foreign organiza	tions, check here >
		Final return	Amended ref	turn		2. Foreign organiza	
_		Address change	Name change			85% test, check to computation .	
H	<u>C</u> he	eck type of organization $[X]$ Section 501(	c)(3) exempt private f	oundation		E if private foundation	n status was terminated
1	s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	<del></del>			)(1)(A), check here .
I		C	unting method X Ca	ash Accrual		F If the foundation is	in a 60-month termination
		<del></del>	ther (specify)			under section 507(b	)(1)(B), check here . >
_			olumn (d) must be on cas	h basis )			
L	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net investment	١,	c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	expenses per books	income	'	income	purposes
	<u>5</u> .	column (a) (see instructions) )					(cash basis only)
8	ှိ 1	Contributions, gifts, grants, etc., received (attach schedule)	416,000				
3 3	<b>, 2</b>	Check ► If the foundation is not required to attach Sch B		· · · · · · · · · · · · · · · · · · ·			<u></u>
	3	Interest on savings and temporary cash investments.					
	4	Dividends and interest from securities			REC	SEIVED	
23	5a	Gross rents				O	
	b	Net rental income or (loss)			2424 6		11
Ę		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			<u>ЯДУ 2</u>	2 0 2015	
SRevenue WAY		assets on line 6a				I <u>n</u>	i
ģ	7	Capital gain net income (from Part IV, line 2) .	-1		ogr	en, ut –	
D	8	Net short-term capital gain					
	9	Income modifications		· · · · · · · · · · · · · · · · · · ·			
	104	and allowances				·	
		Less Cost of goods sold .				···	
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	41.6.000				
_	12	Total. Add lines 1 through 11	416,000			<del></del>	
es	13	Compensation of officers, directors, trustees, etc		···		·····	
10	14	Other employee salaries and wages			+		
e	15	Pension plans, employee benefits		·			
Expens	16 a	Legal fees (attach schedule)					<u> </u>
ē	b	Accounting fees (attach schedule)			+	<del>-</del>	
흃	C	Other professional fees (attach schedule)		· · · · · ·	<del></del>		<del> </del>
Str	17	Interest	··-	· · · · · · · · · · · · · · · · · · ·	+	<del></del>	
Ë	18	Taxes (attach schedule) (see instructions)			+		
Ę	30	Depreciation (attach schedule) and depletion.			-		
ĕ	21	Occupancy			+		<del> </del>
and Administrative	4 T	Travel, conferences, and meetings					
g	22	Other expenses (attach schodule)		· · · · · · · · · · · · · · · · · · ·		<del></del>	
Ę.	23 24 25	Other expenses (attach schedule)		· · · · · · · · · · · · · · · · · · ·	+		
el:	-4	Add lines 13 through 23					1
ă	25	Contributions, gifts, grants paid	416,000	<del></del>			416,000
J	25 26	Total expenses and disbursements Add lines 24 and 25	416,000		+-		416,000
-	27	Subtract line 26 from line 12	110,000	·	+-		410,000
		Excess of revenue over expenses and disbursements					
		Net investment income (if negative, enter -0-)					
		Adjusted net income (if negative, enter -0-).			+	· · · · · · · · · · · · · · · · · · ·	<del> </del>

Ð	arţ.ll	Rálance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		of year
_		Balance Offeets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	28,658	28,658	28,658
			cash investments			
	3	Accounts recêivable ▶				
j		Less allowance for dou	btful accounts ►			
			btful accounts ▶			
					<u> </u>	
	6		officers, directors, trustees, and other			
			tach schedule) (see instructions)			
		• • • • • • • • • • • • • • • • • • • •	receivable (attach schedule)			
			btful accounts ▶			
छ	8		e			
Assets	9	Prepaid expenses and d	eferred charges			
AS	10 a	Investments - U.S. and stat	e government obligations (attach schedule)			
	b	Investments - corporate	stock (attach schedule)			·
	c	Investments - corporate	bonds (attach schedule)			
	11 T	Investments - land, building	s, <b>&gt;</b>		<del></del>	
		and equipment basis Less accumulated deprecia	ation •			
	40	(attach schedule)				
	12 13	investments - mortgage	loans			
	14	cario, buildings, and			-	
		equipment basis Less accumulated deprecia	ition			
	15	(attach schedule)				
	16		completed by all filers - see the	7		
			age 1, item l)	28,658	28,658	20 650
$\dashv$	17				20,030	28,658
	18		accrued expenses		<del></del>	
,,	19	Deferred revenue				
Liabilities	20	Learn from officers durant				
園		Martages and other as	ors, trustees, and other disqualified persons			-
멸	21 22		otes payable (attach schedule)		<u> </u>	
	22	Other habilities (describe	∍ ▶)			
	23	Total liabilities (add line	es 17 through 22)			
$\dashv$			low SFAS 117, check here . ▶			
			24 through 26 and lines 30 and 31.			
Sez	24	<del>-</del>	· · · · · · · · · · · · · · · · · · ·			
lan	24			<del>- ,                                   </del>	···	
Ba	25					
pu	26					
			not follow SFAS 117, ▶ ☐☐☐ plete lines 27 through 31.			
	27		-	28,658	20 650	
	28		cipal, or current funds		28,658	
	29		r land, bldg , and equipment fund			
	30		ulated income, endowment, or other funds	28,658	20 (50	
ž	31		net assets/fund balances (see	20,030	28,658	
	٠.		net assets/fulld balances (See	20 650	00 650	
P	art II		nges in Net Assets or Fund Bala	28,658 nces	28,658	
			palances at beginning of year - Part I		ust agree with	<del> </del>
-			ed on prior year's return)			28,658
2	Ente	er amount from Part I	line 27a			20,038
3	Oth	er increases not include	ded in line 2 (itemize) ▶	• • • • • • • • • • • • • • • • • • • •		<del> </del>
4	Add	lines 1, 2, and 3	the state of the s		<u>3</u>	28,658
5	Dec	reases not included in	n line 2 (itemize) ▶	• • • • • • • • • • • • • • • • • • • •		20,030
			palances at end of year (line 4 minus	line 5) - Part II. column (b)		28,658
				-/	,, ,	Form <b>990-PF</b> (2014)

Part IV Capital Gains and Losses for Tax on Investment Income

	d describe the kind(s) of property sold (earliek warehouse, or common stock, 200 s		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A			D_ Derramer		
b					
c					
d					
6					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b					
С					
<u>d</u>					
е					
Complete only for assets	showing gain in column (h) and owned	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	aın mınus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less to Losses (from co	
a					
b					
<u> </u>					
d			ļ		
Ө					
2 Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
If gain, also enter in P	ain or (loss) as defined in sections 1 art I, line 8, column (c) (see inst	ructions) If (loss), enter -0- in	3		
Part V Qualification	Under Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase perio	d?	Yes X No
	nount in each column for each year		o any ent	ries	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ration (col (b) divided by	
2013	391,500	37,115		(00. (0) 0000 0)	10.5483
2012	5,000			· <del></del>	32.0513
2011	337,800		<del></del>		933.1492
	2010 305,000 97				311.8609
2009	<del>                                     </del>		219.7406		
	305,000	1,388			
2 Total of line 1, column (	4)		2		1507.3503
3 Average distribution rate					
number of years the foundation has been in existence if less than 5 years					301.4701
4 Enter the net value of no	4		27,613		
5 Multiply line 4 by line 3	5 Multiply line 4 by line 3				8,324,494
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		8,324,494
8 Enter qualifying distribut	ions from Part XII, line 4		8		416,000
If line 8 is equal to or g	greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $\mathcal J$			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			0
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	1a		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	ا . ا		77
	Instructions for the definition)?	1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities	4		v
	Did the foundation file Form 1120-POL for this year?	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   \$\( \begin{align*}			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
e	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
2	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
•	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	SOUTH CAROLINA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b	_X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х
	-	00	A DE	

Pai	rt VII-A . Statements Regarding Activities (continued)			
11	'At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► JONATHAN W. NORWOOD Telephone no ► 864-237-	6225	5	
	Located at ▶181 SECURITY PLACE, SPARTANBURG, SC ZIP+4 ▶ 29307			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If			
	"Yes," enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			,
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	ŀ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	:		
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
	termination of government service, if terminating within 90 days)			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
Ī	were not corrected before the first day of the tax year beginning in 2014?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b		_X_
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	of f "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	1		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	۱.		
	foundation had excess business holdings in 2014)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a_	-	<u> </u>
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4.		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		<u> X</u>

Par	t VII-B.	<b>Statements Regarding Activities</b>	for Which Form	4720 May Be Req	uired (continued)		
5a '	During the	year did the foundation pay or incur any amo	unt to				
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	Yes X No	,	
	(2) Influer	nce the outcome of any specific public ele	ection (see section 4	4955), or to carry or	<u> </u>		
		y or indirectly, any voter registration drive?		•		,	
		e a grant to an individual for travel, study, or o				,	
		e a grant to an organization other than a					
	• •	1 4945(d)(4)(A)? (see instructions)	_			, [	
		e for any purpose other than religious, ch					
						.	
		ses, or for the prevention of cruelty to children swer is "Yes" to 5a(1)-(5), did any of the					
b	-	swer is fes to ba(1)-(b), did any or the s section 53 4945 or in a current notice regar		•	•	'     5b	
	_	•	<del>-</del>	•		` <del>``</del>	<del> </del>
		ons relying on a current notice regarding disas					
С		swer is "Yes" to question 5a(4), does the		•			
		maintained expenditure responsibility for the g		· · · · · · · · · · · · ·	YesNo	<b>'</b>	
		ttach the statement required by Regulations sec	, ,			į.	
6a		oundation, during the year, receive any fun		· · · · ·			
		nal benefit contract?			. Yes X No	)	
þ	Did the for	indation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	ict?	_6b	X
		6b, file Form 8870					
7 a	At any time	e during the tax year, was the foundation a pa	arty to a prohibited tax	x shelter transaction?.	. Yes X No	•	
		d the foundation receive any proceeds or have					
Par	t VIII	Information About Officers, Director and Contractors	rs, Trustees, Fou	indation Managers	s, Highly Paid Em	oloyees,	
1	List all of	icers, directors, trustees, foundation n	nanagers and their	r compensation (see	instructions).		
		(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		se account, owances
SUS	AN A BR	IDGES	CHAIRMAN, 0			-	
PO 1	BOX 811	SPARTANBURG, SC 29304		0	0		0
A.R	. BIGGS		PRESIDENT, 0				
PO 1	30X 811	SPARTANBURG, SC 29304		0	0.		0
		. NORWOOD	TREASURER, 0				
		SPARTANBURG, SC 29304	·	0	0		0
				······································	<u>_</u>		
			İ				
2	Compens	ation of five highest-paid employees	(other than thos	e included on line	e 1 - see instructi	ons). If n	one, enter
	"NONE."		·				
(2)	Name and a	ddress of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expens	se account,
(a)	Hame and a	adiess of each employee paid more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	other all	owances
NON	 3						
				ı			
				!			
		· · · · · · · · · · · · · · · · · · ·					
Total	number o	f other employees paid over \$50,000	<u> </u>				
		. Julian amproposo para stor 400,000 i	<u> </u>	<del></del> .			

Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employee and Contractors (continued)	es,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NC	ONE CONTRACTOR OF THE CONTRACT	
Tota	al number of others receiving over \$50,000 for professional services	
Pa	rt IX-A Summary of Direct Charitable Activities	
	at the foundations foundament disease begutable continued disease that the second and a second at the second as th	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 9	CASH CONTRIBUTIONS TO QUALIFY FOR A NON-PROFIT ORGANIZATION; SEE PART XV 3	
		416,000
2		
-		
3		
٠.		
4		
٠.		
Pa	rt IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	NONE	
2		
	Il other program-related investments. See instructions	<del>_</del>
3		
<u>Tota</u>	al. Add lines 1 through 3	

Form 990-PF (2014)

Page 8

Pari	<ul> <li>Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)</li> </ul>	gn foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	
	purposes	
а	Average monthly fair market value of securities	1a
b		1b 28,034
С	Fair market value of all other assets (see instructions).	1c
d		1d 28,034
е		
	1c (attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3 28,034
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see	
	Instructions)	421
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 27,613
6	Minimum investment return. Enter 5% of line 5	6 1,381
Par	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part)	ndations
1	Minimum investment return from Part X, line 6	1,381
2 a	Tax on investment income for 2014 from Part VI, line 5	
b		]
С	Add lines 2a and 2b	2c
3	Distributable amount before adjustments Subtract line 2c from line 1	3 1,381
4	Recoveries of amounts treated as qualifying distributions	
5	Add lines 3 and 4	5 1,381
6	Deduction from distributable amount (see instructions)	6
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	
	line 1	1,381
Par	t XII Qualifying Distributions (see instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	
а		1a 416,000
b		1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
	purposes	2
3	Amounts set aside for specific charitable projects that satisfy the	
а	Suitability test (prior IRS approval required)	3a
b	Cash distribution test (attach the required schedule)	3b
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4 416,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	
	Enter 1% of Part I, line 27b (see instructions)	5
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 416,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when a qualifies for the section 4940(e) reduction of tax in those years	

Form 990-PF (2014)

e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)    6 Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5  b Prior years' undistributed income Subtract line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	Pa	art XIII Undistributed Income (see instru	ictions)			_
Inine 7  Undistributed mome, if any, as of the end of 2014 a Enter amount for 2013 only  Total for proxyears 20  ZO  ZO  Becess distributions carryover, if any, to 2014 a From 2009  304, 931 b From 2010  304, 951 c From 2011  337, 782 d From 2012  4, 992 e From 2013  389, 644 f Total of lines 3a through e  Undistributions for 2014 from Part XIII, line 4 b S  4 16, 000 a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions)  d Applied to 2014 distributable amount e Remaining amount distributed out of corpus Excess distributions could in (d), the same amount must be shown in coulumn (a) Ethics the next total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed mome Subtract line ab from line 2b Enter the manual of prior years' undistributed mome for which a notice of deficiency has been instead, or on which the section 4942(a) tax has been previously assessed  4 Subtract line 6c from line 8b Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2013 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistributed income for 2014 Subtract line 4 a from line 2a Taxable amount - see instructions  Undistribu	1	Distributable amount for 2014 from Part XI	, ,	• •		
2 Undistributed income , if any, as of the end of 2014 a Enter amount for 2013 only b Total for proyeas 2 0 20 20 3 Excess distributions carryover, if any, to 2014 a From 2009 304, 931 b From 2010 304, 931 c From 2011 337, 782 d From 2012 4, 992 e From 2013 389, 644 f Total of lines 3a brough e 1, 342, 300  Qualifying distributions for 2014 from Part XII, line 4 \$ 416,000 a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions). c Treated as distributions out of corpus (Election required - see instructions). d Applied to 2014 distributable amount expers in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount must be shown in column (gl, the same amount experise in column (gl, the same amount expe	•			<del></del>	_	1.381
a Enter amount for 2013 only b Total for pror years 20 20 20  \$ Excess distributions carryover, if any, to 2014 a From 2009	,			-		
b Total for proryears 20						
3 Excess distributions carryover, if any, to 2014 a From 2010	a	Total for progress 20 20 20	<del> </del>			<del>                                     </del>
a From 2009 304, 931 b From 2010 304, 951 c From 2011 4, 992 d From 2012 4, 992 e From 2013 389, 644 f Total of lines 3a through e			<del></del>		<u></u>	
b From 2010						
c From 2011	a h	From 2010 304,951				
d From 2012 4,992 e From 2013 389,644 f Total of lines 3a through e		From 2011 337 782				
e From 2013 389, 644 f Total of lines 3 a through e 1,342,300  4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 416,000  a Applied to 2013, but not more than line 2a. b Applied to undistributed income of prior years (Election required -see instructions).  c Treated as distributions out of corpus (Election required -see instructions).  d Applied to 2014 distributable amount Remaining amount distributed out of corpus Excess distributions carryover applied to 2014 ((If an amount appears in column (a)) the same amount must be shown in column (a) the same amount must be shown in column (a)  a Corpus Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  d Subtract line 6c from line 6b Taxable amount - see instructions  e Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015  f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015  Amounts treated as distributions out of corpus to salesfy requirements imposed by section	٦	From 2012 4 992				
f Total of lines 3a through e	ū	• • • • • • • • • • • • • • • • • • • •				
4 Qualifying distributions for 2014 from Part XII, line 4   \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			1 3/2 300			
Inne 4 ▶ \$ 416,000  a Applied to 2013, but not more than line 2a			1,342,300	·-···	., -	
a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2014 distributable amount e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2014 (If an amount appears in column (g), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed 0 d Subtract line 6c from line 6b Taxable amount - see instructions c Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section	4					
b Applied to undistributed income of prior years (Election required - see instructions)  c Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2014 distributable amount  e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2014  (If an amount appears in column (a), the same amount must be shown in column (a).  Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5  b Prior years' undistributed income Subtract line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  d Subtract line 6c from line 6b Taxable amount - see instructions  e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions  f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section	_					
(Election required - see instructions)  c Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2014 distributable amount e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2014 (If an amount appears in column (a), the same amount must be shown in column (a)  6 Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions  f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015  Amounts treated as distributions out of corpus to satisfy requirements imposed by section						
c Treated as distributions out of corpus (Election required - see instructions)	b					
required - see instructions)  d Applied to 2014 distributable amount	c	I				
d Applied to 2014 distributable amount	•				_	
e Remaining amount distributed out of corpus	d	Applied to 2014 distributable amount				1,381
Excess distributions carryover applied to 2014 (If an amount appears in column (a)) the same amount must be shown in column (a))  Enter the net total of each column as indicated below:  Corpus Add lines 3f, 4c, and 4e Subtract line 5  Prior years' undistributed income Subtract line 4b from line 2b  Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed			414,619			
amount must be shown in column (a) )  Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5  Prior years' undistributed income Subtract line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		Excess distributions carryover applied to 2014	!			
6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed						
indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5  b Prior years' undistributed income Subtract line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  d Subtract line 6c from line 6b Taxable amount - see instructions	6	1 / /				
b Prior years' undistributed income Subtract line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed						
line 4b from line 2b  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed			1,756,919			-
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	þ	Prior years' undistributed income Subtract				
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	c	Enter the amount of prior years' undistributed		<del></del>		
tax has been previously assessed	·					
d Subtract line 6c from line 6b Taxable amount - see instructions				0		
amount - see instructions		i				
Undistributed income for 2013 Subtract line     4a from line 2a Taxable amount - see instructions	d	Subtract line 6c from line 6b Taxable				
4a from line 2a Taxable amount - see instructions	е	Undistributed income for 2013 Subtract line				<del> </del>
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015		4a from line 2a Taxable amount - see				
4d and 5 from line 1 This amount must be distributed in 2015						
distributed in 2015	f					
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section						
to satisfy requirements imposed by section	7					<del>  </del>
	•	·				
170(b)(1)(E) or 4942(d)(3) (Election may be l		170(b)(1)(F) or 4942(g)(3) (Election may be				
required - see instructions)						
8 Excess distributions carryover from 2009 not	Q					
applied on line 5 or line 7 (see instructions)	٠		304,931			
9 Excess distributions carryover to 2015.	9		· · · ·			· · · · · · · · · · · · · · · · · · ·
Subtract lines 7 and 8 from line 6a 1, 451, 988		<u> </u>	1,451,988			
10 Analysis of line 9	10					
a Excess from 2010 304, 951						
<b>b</b> Excess from 2011 337,782	ь	Excess from 2011				
c Excess from 2012 4,992	С	Excess from 2012 4,992				
d Excess from 2013 389, 644	d	Excess from 2013 389, 644				
e Excess from 2014 414, 619	е					<u> </u>

Pa	rt XIV , Private Op	erating Foundations	s (see instructions a	nd Part VII-A, quest	ion 9)			
1 a	1a if the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling is effective for 2014, enter the date of the ruling							
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	n section	4942(j)(3) or	4942(J)(5)	
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) Total	
	Justed net income from Part (a) 2014 (b) 2013 (c) 2012 (d) 2011					1		
	I or the minimum investment return from Part X for each							
	year listed				ļ		<del></del>	
b	85% of line 2a							
С	Qualifying distributions from Part							
	XII, line 4 for each year listed .				<del> </del>			
a	Amounts included in line 2c not used directly for active conduct							
	of exempt activities			<del> </del>	<del> </del>		<u>.</u>	
е	Qualifying distributions made directly for active conduct of							
	exempt activities Subtract line					-		
3	2d from line 2c  Complete 3a, b, or c for the							
-	alternative test relied upon							
а	"Assets" alternative test - enter							
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying</li></ul>						<del></del>	
	under section							
b	4942(j)(3)(B)(i) "Endowment" alternative test-	<del></del>						
	enter 2/3 of minimum invest-							
	ment return shown in Part X, line 6 for each year listed							
С	"Support" alternative test - enter						,,	
	(1) Total support other than							
	gross investment income (interest, dividends rents,							
	payments on secunties loans (section 512(a)(5)),							
	or royalties)							
	(2) Support from general public and 5 or more					Į		
	exempt organizations as							
	provided in section 4942 (j)(3)(B)(iii)			<u> </u>	ļ			
	(3) Largest amount of sup- port from an exempt							
	organization			<del> </del>			<del></del>	
	(4) Gross investment income	ntany Information (	Complete this par	t only if the found	dation had 9	\$5 000 or m	oro in accate	
Pe	rt XV Suppleme	e during the year - s	complete this par	t only if the louin	uation nau 1	95,000 OI II	iore in assets	
1	Information Regardin							
·	List any managers of	the foundation who	have contributed mo	re than 2% of the tot	al contribution	ns received by	the foundation	
	before the close of any	y tax year (but only if t	ney have contributed	more than \$5,000) (S	See section 50	7(d)(2))		
N/	A							
b	List any managers of					n equally larg	e portion of the	
	ownership of a partne	rship or other entity) o	f which the foundatio	n has a 10% or greate	r interest			
N/	A Information Regardin	0 - 4 - 11 41 0	City I am Cabalana	Lin ata Dinamina				
2		-		-				
	Check here \( \bigcup \bigcup X \) if the foundation only makes contributions to preselected charitable organizations and does not accept							
	unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.							
	The name, address, a			the person to whom a	oplications show	uld be address	ed	
м /	Δ							
t	The form in which app	lications should be su	bmitted and informat	on and materials they	should include	е	_	
N/	A							
	: Any submission dead	ines						
<u>N/</u>	A Any restrictions or I			<del></del>	·		<del> </del>	
C	Any restrictions or I factors	imitations on awards	s, such as by geogr	aphical areas, charit	able fields, ki	ınds of ınstitu	itions, or other	
NI/	7\							

JSA 4E 1490 1 000 Part XV Su Supplementary Information (continued)

3 Grants and Contributions Paid Duri	ig tile Tear Or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
SEE STMT 2				416,000
				ļ
		·		
Total			▶ 3a	416,000
<b>b</b> Approved for future payment				
Total	<u> </u>		▶ 3b	

Part XVI-A Analysis of Income-Prod	ucina Activ	vitios	<del></del>		Page 12
Part XVI-A Analysis of Income-Prod Enter gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income (See instructions)
a					(Occ manachons /
b					
c					· · · · · · · · · · · · · · · · · · ·
d		<del></del>			
e					·
g Fees and contracts from government agencies					.,,
2 Membership dues and assessments					,
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities	ļ				
5 Net rental income or (loss) from real estate					
Debt-financed property     Not debt-financed property			<del></del>		
6 Net rental income or (loss) from personal property					
7 Other investment income					· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other than inventor					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					· · · · · · · · · · · · · · · · · · ·
b	<b>———</b>			-	
d					
е					
12 Subtotal Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify cal Part XVI-B Relationship of Activitie		complishment of E	vomnt Burn	0000	
	*	· · · · · · · · · · · · · · · · · · ·		, a , a d	
Explain below how each active accomplishment of the foundat					
N/A			<del></del>		
			<del></del>		
		<u>-</u> -		<del></del>	<del></del>
				<del></del>	
		·			
		<del> </del>		<u> </u>	
					<del></del>
			·		-
					<del></del>
	<del></del>	114:			
				· · · · · · · · · · · · · · · · · · ·	
					····
			<del></del>		
				<del></del>	

Part	XVII ,	Information R Exempt Organ		sfers To and Trai	sactions an	d Relations	ships With None	hari	table	•
	ın secti	•	•	gage in any of the foction 501(c)(3) organ	•				Yes	No
а	Transfe	ers from the reportin	g foundation to a	noncharitable exemp	t organization of	f				
								1a(1)		_X
								1a(2)	_	X
		ransactions	nobaritable avemr	ot organization				1b(1)		x
	(1) Sar (2) Pur	chases of assets fro	om a noncharitable	e exempt organization.				1b(2)		X
				ssets						X
								1b(4)		Х
	( <b>5</b> ) Loa	ns or loan guarantee	es					1b(5)		X
	( <b>6</b> ) Per	formance of service	s or membership	or fundraising solicitation	ions			1b(6)		X
				other assets, or paid						X
				complete the follow						
				s given by the repor ment, show in colum						
(a) LII		(b) Amount involved	<del></del>	charitable exempt organizat			ers, transactions, and sha			
		(-,			(-,		,			
	-									
					-					
							1		-	
	describ	ped in section 501(c) " complete the follo	of the Code (other	ated with, or related er than section 501(c)	(3)) or in section	n 527?	[		es X	] No
X		(a) Name of organizatio	11	(b) Type of organia	zauon	(	c) Description of relations	nip		
Α							<del></del>			
						3, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			•	
				***						
				this return, including accompayer) is based on all information			the best of my knowledge	e and t	elief, it	is tru
Sign					N	an, money	May the IRS	discus	s this	returr
Here	.   <b>_</b>	V	7	5/8/15		ASURER	with the pr	eparer		belov
	Sign	nature of officer or trustee	- (	Date	Title		(see instruction	s)?	Yes	N
		Print/Type preparers na	ıme	Preparer's signature	<u></u>	Date		PTIN		
Paid						5=.5	Check if self-employed	*		
Prep	arer	Firm's name	<del></del>	<u> </u>			Firm's EIN		-	
-	Only	Firm's address		<del> </del>						
	•						Phone no			

#### Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its Instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization **Employer identification number** SECURITY'S LENDING HAND FOUNDATION 57-1012986 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
SECURITY'S LENDING HAND FOUNDATION

Employer identification number 57-1012986

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

		, ···· ·	<del></del>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PO BOX 811  SPARTANBURG, SC 29304-0811	\$321,570	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PROFESSIONAL FINANCIAL SERVICES CORP.  PO BOX 811  SPARTANBURG, SC 29304-0811	\$94,430	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization SECURITY'S LENDING HAND FOUNDATION

**Employer identification number** 

57-1012986

Part II	Noncash Property	(see instructions).	. Use duplicate cop	ies of Part II if additiona	I space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b></b>		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

SECURITY'S LENDING HAND FOUNDATION

**Employer identification number** 

57-1012986 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10)

contributions of \$1,000 or less for the	year (Enter this information of	otal of <i>exclusively</i> religious, charitable, etc , once See instructions.) ► \$ <u>N/A</u>
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, and	J ZIP + 4	Relationship of transferor to transferee
	· · · · ·	
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, and	I ZIP + 4	Relationship of transferor to transferee
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	(e) Transfer of gift	
Transferee's name, address, and	I ZIP + 4	Relationship of transferor to transferee
	contributions of \$1,000 or less for the Use duplicate copies of Part III if addition (b) Purpose of gift  Transferee's name, address, and (b) Purpose of gift  (b) Purpose of gift  Transferee's name, address, and (b) Purpose of gift  Transferee's name, address, and (b) Purpose of gift	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (e) Transfer of gift  (c) Use of gift  (d) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (f) Use of gift

#### Statement 1

#### SECURITY'S LENDING HAND FOUNDATION

TOTAL CONTRIBUTIONS RECEIVED

57-1012986

\$<u>416,000</u>

## FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

Name and Address	<u>Date</u>	Direct Public Support
Security Finance Corporation of Spartanburg 181 Security Place Spartanburg, SC 29307	12-18-2014	\$321,570
Professional Financial Services Corp. 181 Security Place Spartanburg, SC 29307	12-18-2014	\$94,430

STATEMENT #2
SECURITY'S LENDING HAND FOUNDATION DONATIONS

Amount for	Organization (Check made out to) Contact person	Contact person	Phone	ADDRESS Line	City, State Zip
\$ 5,000.00 MARR	MARR	Gigi Barnes	678-805-5112	2815 Clearview Place	Doraville, GA 30340
\$ 2,500.00	2,500.00 The Salvation Army of Spartanburg		864-576-6670	1529 John B White Sr Blvd	Spartanburg, SC 29301
\$ 4,500.00	4,500.00 Spartanburg Humane Society		864-583-4805	110 Dexter Rd	Spartanburg, SC 29303
\$ 2,500.00	2,500.00 Chapman Cultural Center		864-583-2776	200 E St John St	Spartanburg, SC 29301
\$ 155,500.00	\$ 155,500.00   American Red Cross - Western Carolii Kimberly Shell	Kimberly Shell	864-583-8000	131 E Main St	Spartanburg, SC 29306
\$ 5,000.00	5,000.00 Spartanburg Methodist College		800-772-7286	1000 Powell Mill Rd	Spartanburg, SC 29301
\$ 1,000.00	1,000.00 Spartanburg Area Conservancy, Inc.		864-948-0000	100 E Main St, Surte 7B	Spartanburg, SC 29306
\$ 2,500.00	2,500.00   Spartanburg Soup Kitchen		864-585-0022	136 South Forest St.	Spartanburg, SC 29306
\$ 217,500.00	\$ 217,500.00 Childrens Miracle Network	Angle Otasua	801-214-7400	205 West 700 South	Salt Lake City, UT 84101
\$ 10,000.00	\$ 10,000.00 Hub City Farmer's Market		864-585-0905	298 Magnolia St	Spartanburg, SC 29306
\$ 2,500.00	2,500.00 Hope Center for Children		864-583-7688	202 Hudson L Barksdale Blvd	Spartanburg, SC 29306
\$ 7,500.00	7,500.00 Mobile Meals	Jayne McQueen	864-573-7684	PO Box 461	Spartanburg, SC 29304
\$ 416,000.00			:		