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### OMB No 1545-0052

## 2015

**2015**Open to Public

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

Department of the Treasury Internal Revenue Service

Form 990-PF

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

Information about Form 990-PF and its instructions is at www.irs.gov/form990nf.

		I P Information about Form 990-PF ar	a its instructions is at	www.irs	s.gov/rori	<u>п990рт</u> .	Inspection
For	caler	ndar year 2015, or tax year beginning 01-	01-2015	, and e	nding 1	2-31-2015	
	e of four	ndation AMPBELL FOUNDATION		AE	mployer ide	entification numbe	er
				58-	6346237		
		street (or P O box number if mail is not delivered to street address	s) Room/suite	<b>B</b> Te	lephone nun	nber (see instruction	s)
10	4 BROAD	SUS AVENUE		(86	4) 233-0808		
		state or province, country, and ZIP or foreign postal code SC 29601		<b>C</b> I	f exemption	application is pendin	g, check here
G C	neck all		former public charity	┨╻	Foreign or	ganizations, check h	oro <b>b</b>
•	icek dii	Final return Amended return	Torritor public charity	'	Toreign on	garrizacions, check in	ere F
		Address change Name change		:		ganizations meeting	
<b>H</b> C h	neck tvi	pe of organization $\sqrt{\text{Section } 501(c)(3)}$ exempt privi	ate foundation		If private fou	k here and attach co Indation status was t	erminated
		4947(a)(1) nonexempt charitable trust Other taxa			under sectior	n 507(b)(1)(A), ched	k nere
		et value of all assets at end JAccounting method	▼ Cash	1 -		tion is in a 60-mont	
		rom Part II, col (c),	t he on cash basis )		under sectior	n 507(b)(1)(B), chec	k nere ▶
Da	et T						Disbursements
Ра	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	Revenue and expenses per (a) books		nvestment ncome	Adjusted net (c) income	for charitable purposes  (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	39,426				
	2	Check ► ☐ If the foundation is <b>not</b> required to					
		attach					
		Sch B	68		68		
	3 4	Interest on savings and temporary cash investments  Dividends and interest from securities	644,851		644,851		
	5a	Gross rents	511,555				
	b	Net rental income or (loss)					
E	6a	Net gain or (loss) from sale of assets not on line 10	-141,543				
Reverne	b	Gross sales price for all assets on line 6a 2,114,311					
~	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and					
	ь	allowances Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	6,333		0		
	12	Total.Add lines 1 through 11	_		644,919		
	13	Compensation of officers, directors, trustees, etc	116,276		58,138		58,138
	14	Other employee salaries and wages					
6S	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)	28,013		14,007		14,007
×	b	Accounting fees (attach schedule)			3,713		7,539
	С	Other professional fees (attach schedule)	248,625		248,339		286
ati	17	Interest					
35	18	Taxes (attach schedule) (see instructions)	4,244		1,300		C
=	19	Depreciation (attach schedule) and depletion					
Administrative	20	Occupancy					
and /	21	Travel, conferences, and meetings					
ਹ ਹ	22	Printing and publications Other expenses (attach schedule)			0		23,690
Operating		Total operating and administrative expenses.	20,119				23,390
era	24	Add lines 13 through 23	434,529		325,497		103,660
О	25	Contributions, gifts, grants paid	· ·		//		1,357,335
	26	Total expenses and disbursements. Add lines 24 and					
		25	1,791,864		325,497		1,460,995
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-1,242,729		319,422		
	ı n	rec myesiment micome (ii neuative, enter -u-)	1		コエフ,サムム	ı	i .

Adjusted net income(if negative, enter -0-)

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			n year	
			(a) Book Value	<b>(b)</b> Bo	ok Value	(c) F	aır Market Value
	1	Cash—non-interest-bearing	1,607,136		510,497	,	510,497
	2	Savings and temporary cash investments	1,007,130		310,497		310,497
	3	Accounts receivable ►  Less allowance for doubtful accounts ►					
	4	Pledges receivable ►					
	4	Less allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	Ü	disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
	•	Less allowance for doubtful accounts					
	8	Inventories for sale or use					
ots	9	Prepaid expenses and deferred charges					
Assets	10a	Investments $-U \; S \;$ and state government obligations (attach	737,379	<b>%</b> J	786,782	!	920,156
		schedule)	12 550 625	06-1	16 262 900		19,001,906
	b	Investments—corporate stock (attach schedule)	12,550,625	20	16,262,800	1	19,001,900
	C	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans	485,951	06-1	007.304		1 055 030
	13	Investments—other (attach schedule)	485,951	<u>-20</u>	997,394		1,055,028
	14	Land, buildings, and equipment basis ►	0		2,156,319		2,156,319
	45	· · · · · · · · · · · · · · · · · · ·	33,497		16,726		16,726
	15	Other assets (describe ►)  Total assets(to be completed by all filers—see the	33,437	220	10,720	120	10,720
	16	instructions Also, see page 1, item I)	15,414,588		20,730,518		23,660,632
	17	Accounts payable and accrued expenses	13,414,300		20,730,310		23,000,032
	18	Grants payable				1	
SS	19	Deferred revenue				1	
abilities	20	Loans from officers, directors, trustees, and other disqualified persons				1	
abi	21	Mortgages and other notes payable (attach schedule)		<b>%</b> J	608,531	1	
<b>-</b>	22		• <u>•</u>	<u>-</u>	489,151	-	
	23	Total liabilities (add lines 17 through 22)	0	_	1,097,682	4	
		Foundations that follow SFAS 117, check here ▶				1	
e s		and complete lines 24 through 26 and lines 30 and 31.					
ınc	24	Unrestricted	15,414,588		19,632,836	,	
is is	25	Temporarily restricted				1	
d E	26	Permanently restricted				1	
Fund Balance		Foundations that do not follow SFAS 117, check here					
or		and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds					
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				1	
As	29	Retained earnings, accumulated income, endowment, or other funds					
Net	30	Total net assets or fund balances(see instructions)	15,414,588		19,632,836	5	
	31	Total liabilities and net assets/fund balances(see instructions)	15,414,588		20,730,518	3	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances					
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree			
				_	. 1		15,414,588
2		Enter amount from Part I, line 27a			2		-1,242,729
3		Other increases not included in line 2 (itemize) ▶		<b>%</b>	3		5,462,456
4		Add lines 1, 2, and 3		<del>_</del>	4		19,634,315
5		Decreases not included in line 2 (itemize) ▶		•≥	5		1,479
6		Total net assets or fund balances at end of year (line 4 minus line 5)—l		ıne 30 .	6		19,632,836

	List and describe the (a) 2-story brick warehou	How acquired P—Purchase  (b) D—Donation	(6)	ate acquired mo , day, yr )	Date sold (d) (mo , day, yr )		
1 a	SHORT TERM CAPITAL	GAIN		P			
b	LONG TERM CAPITAL G	GAIN		Р			
С .	REALIZED LOSS ON IN	Р					
d				<u> </u>			
e					1		
(e	) Gross sales price	Depreciation allowed (f) (or allowable)		or other basis expense of sale			or (loss) (f) minus (g)
а	2,0	083					2,083
b	1,2	289					1,289
С	2,110,9	939		2,255,85	4		-144,915
d							
e							
Со	mplete only for assets show	ving gain in column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gaın mınus
(i)	FMV as of 12/31/69	A djusted basis (j) as of 12/31/69		cess of col (ı) r col (ʒ), ıf any	(I) c		ot less than -0-) <b>or</b> (from col (h))
а							2,083
b							1,289
c							-144,915
d							
е							
2 3	If gain, also enter in Part	or (net capital loss)  ain or (loss) as defined in sectio  I, line 8, column (c) (see instru	ctions) If (loss), e	in Part I, line 7	2		-141,543
Part '	<u> </u>	er Section 4940(e) for R		· · ·	3	l come	
(For opt If section Was the	ional use by domestic priva on 4940(d)(2) applies, leav	ate foundations subject to the se	ection 4940(a) tax able amount of any	on net investment	incom	ne)	Γ Yes <b>√</b> No
		in each column for each year, se			tries		
	(a) period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of nonchar			(d) Distributio (col (b) divided	n ratio
	2014	283,578		9,069,337			0 031268
	2013	456,499		7,900,108			0 057784
	2012	246,443		6,969,420			0 035361
	2011	248,726		6,406,179			0 038826
	2010	424,430		6,101,044			0 069567
2 3	A verage distribution ratio	o for the 5-year base period—div	vide the total on lin	e 2 by 5, or by	3		0 232806
4	•	oundation has been in existence ncharitable-use assets for 2015	•	<del>-</del>	4		21,741,897
			•	-	5		
5		ent income (1% of Part I, line 2°		<u> </u>	-		1,012,324
6		ent income (1% of Part 1, line 2		<u> </u>	6		3,194
7				<u> </u>	7		1,015,518
8		ions from Part XII, line 4			8		1,460,995
	If line 8 is equal to or gre the Part VI instructions	eater than line 7, check the box i	in Part VI, line 1b,	and complete that	part u	sing a 1% ta:	x rate See

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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

If "Yes," complete Part XIV

and addresses

No

No

9

10

Par	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	Yes	
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	<u> </u>
	Website address ► <u>N/A</u>			
14	The books are in care of ►WILLIAM W BROWN  Telephone no ►(864)	) 233-	0808	
	Located at ►104 BROADUS AVENUE GREENVILLE SC ZIP+4 ►29601			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶	-
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Dar	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
-6.1	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly)		163	140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	İ		İ
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			ĺ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Ves No	Ì		ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available	Ì		1
	for the benefit or use of a disqualified person)? $\square$ Yes $\square$ No			ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			ĺ
	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 )		 	<u> </u>
Ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16		No
	Organizations relying on a current notice regarding disaster assistance check here	1b		No
	Tyumzadon's refying on a current notice regarding disaster assistance eneck nere	ı		1
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			1
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
а	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
a	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V No			
	If "Yes," list the years ▶ 20, 20, 20	İ		İ
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		L
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
3a	▶ 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
за	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation		!   	
_	or disqualified persons after May 26, 1969, <b>(2)</b> 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 foundation had excess business holdings in 2015)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No
	enantable parpose that had not been removed from Jeopardy before the first day of the tax year beginning in 2015?			140

Pai	rt VIII-B Statements Rega	rding Activities for	Which Form 4720	May Be Required (Con	tinued)	
5a	During the year did the foundation	n pay or incur any amoun	t to			
	(1) Carry on propaganda, or othe	rwise attempt to influence	e legislation (section 49	45(e)) <sup>?</sup>	✓ No	
	(2) Influence the outcome of any	specific public election (	see section 4955), or to	carry		
	on, directly or indirectly, any	voter registration drive?.		· · · · · \ \ Yes	✓ No	
	(3) Provide a grant to an individu	al for travel, study, or oth	ner sımılar purposes?	☐ Yes [	✓ No	
	(4) Provide a grant to an organiza	ation other than a charita	ble, etc., organization de		i j	i i
	in section 4945(d)(4)(A)? (se	ee instructions)		· · · · · · T Yes	✓ No	
	(5) Provide for any purpose other					ĺĺ
	educational purposes, or for t	he prevention of cruelty t	co children or animals?.	Tyes	✓ No	
b	If any answer is "Yes" to 5a(1)-(	5), did <b>any</b> of the transac	tions fail to qualify under	r the exceptions described in	ĺ	
	Regulations section 53 4945 or i	n a current notice regard	ıng dısaster assıstance	(see instructions)?	5b	
	Organizations relying on a curren	t notice regarding disast	er assistance check her	e		
С	If the answer is "Yes" to question	• •	•			
	tax because it maintained expend	liture responsibility for th	ne grant?	· · · · · · T Yes	No	
	If "Yes," attach the statement requ	ired by Regulations section	n 53 4945-5(d)			
<b>6</b> a	Did the foundation, during the yea	•		•		
	a personal benefit contract?			1 .03	1	
b	Did the foundation, during the yea	ar, pay premiums, directly	or indirectly, on a perso	onal benefit contract?	. 6b	No
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, v	was the foundation a party	y to a prohibited tax shel	Iter transaction? <b>Yes</b>	✓ No	
b	If yes, did the foundation receive	, ,	<u>'</u>			
Pai	rt VIIII and Contractors	t Officers, Directors	s, Trustees, Founda	ation Managers, Highly	Paid Em	ployees,
1	List all officers, directors, trustee	s, foundation managers a	and their compensation (	see instructions).		
		Title, and average	(c) Compensation(If	(d)		
	(a) Name and address	hours per week	not paid, enter	Contributions to employee benefit plans		se account, allowances
		(b) devoted to position	-0-)	and deferred compensation	1	anowances
VILLI	AM W BROWN	TRUSTEE	116,276	0	)	0
	BROADUS AVENUE	10 00				
	ENVILLE,SC 29601					"
	Compensation of five highest-paid	employees (other than	tnose included on line 1-	Contributions to	nter "NONE.	
Nar	(a) me and address of each employee ;	Title, and aver	-	employee henefit	Expen	se account,
IN al	more than \$50,000	(b) devoted to posi		plans and deferred	(e) other	allowances
10 N				(d) compensation		
1011	• -					
					1	
ot a	I number of other employees paid o	over \$50,000			1	0

purposes

1

2

3

5

1

2a

3

4

5

6

7

1

2

5

Part XII

Part XI

21,939,107

132,070

1.815

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,

Reduction claimed for blockage or other factors reported on lines 1a and

1e

Fair market value of all other assets (see instructions). . . . . . . . . . . . .

1b 1c 1d

1a

5

1

2c

3

4

5

6

7

1a

1h

2

3а 3b

4

5

22,072,992

2 3

3,194

4

22,072,992 331,095 21,741,897 1,087,095 3) and (1)(5) private operating foundations and certain foreign organizations

1,087,095

1,083,901

1.083.901

1,083,901

1,460,995

1,460,995

1,457,801

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3,194

3,194

n

Minim	Minimum investment return.Enter 5% of line 5.					
: XI	Distributable	Amount				
· XI	(see instructions) (Section 4942(j)(3					
	check here ▶	and do not comple				
Minim	Mınımum ınvestment return from Part X, line 6.					

Recoveries of amounts treated as qualifying distributions. . . . . . . . . .

**Qualifying Distributions** (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

ete this part.)

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Tax on investment income for 2015 from Part VI, line 5. . . . . . 2a Income tax for 2015 (This does not include the tax from Part VI). . . 

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

. . . . . . . . . . . . . . . . . .

2b Distributable amount before adjustments Subtract line 2c from line 1. . . . . . . . . . . . . . . .

		<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2014	(c) 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7	Сограз	rears prior to 2014	2014	1,083,901
	Undistributed income, if any, as of the end of 2015				_,,
	Enter amount for 2014 only			401,501	
	Total for prior years 20, 20, 20		0	,	
	Excess distributions carryover, if any, to 2015				
	From 2010				
b	From 2011				
c	From 2012				
	From 2013				
	From 2014				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$1,460,995				
а	Applied to 2014, but not more than line 2a			401,501	
b	Applied to undistributed income of prior years		0		
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election	0			
	required—see instructions)				1,059,494
	Applied to 2015 distributable amount	0			1,059,494
	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2015	0			·
	(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:	0			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable amount —see instructions		o		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
	instructions			0	
т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				24,407
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may	0			
_	be required - see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2016.				
_	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
а	Excess from 2011				
b	Excess from 2012				
c	Excess from 2013				
	Excess from 2014				
е	Excess from 2015				
				Fo	rm <b>990-PF</b> (2015)

or	m 990-PF (2015)					Page <b>10</b>
	Part XIV Private Operating Foundate	t <b>ions</b> (see instru	ictions and Part	VII-A, question	1 9)	
	If the foundation has received a ruling or determined foundation, and the ruling is effective for 2015,	enter the date of t	he ruling	▶ ∟		
	Check box to indicate whether the organization	is a private operat	ting foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	<ol><li>Total support other than gross investment income (interest,</li></ol>					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
	from an exempt organization					
P)=	(4) Gross investment income  Int XV Supplementary Information (4)	Complete this	nart only if th	e organizatio		more in
- 0	assets at any time during the			e organizatio	ii iiaa 45,000 oi	more m
L a	Information Regarding Foundation Managers: List any managers of the foundation who have o	ontributed more th	an 2% of the tota			tion
	before the close of any tax year (but only if the	•				
b	List any managers of the foundation who own 10 ownership of a partnership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of which is the foundation who own 10 ownership or other entity) of whether entity of the foundation who own 10 ownership or other entity) of which is the foundation who ownership or other entity) of which is the foundation of the foundation whether entity is the foundation of the foundation whether entity is the foundation of the foundation of the foundation whether the foundation of the f		•		vlarge portion of the	
2	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarshi	p, etc., Programs:			
	Check here $\blacktriangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	n makes gifts, gran		-	•	under
а	The name, address, and telephone number or e	mail address of the	e person to whom	applications shou	ld be addressed	
b	The form in which applications should be subm	itted and informati	on and materials t	they should includ	e	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, such factors	as by geographica	al areas, charitabl	e fields, kinds of i	nstitutions, or other	

Form 990-PF (2015)

Part XV Supplementary Information(continued)

Part XV Supplementary Information(continued)					
3 Grants and Contributions Paid		proved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount	
Name and address (home or business)	or substantial contributor	recipient	Contribution		
a Paid during the year					
CAMPBELL YOUNG LEADERS 104 BROADUS AVENUE	N/A	POF	CONTRIBUTION - OPERATING FUNDS	980,000	
GREENVILLE, SC 29601			OF ERATING FONDS		
LEGACY ADVANCEMENT	N/A	PC	CONTRIBUTION -	125,000	
104 BROADUS AVENUE			OPERATING FUNDS		
GREENVILLE,SC 29601	<u></u>				
LIMESTONE COLLEGE 1115 COLLEGE DRIVE GAFFNEY,SC 29340	N/A	PC	CONTRIBUTION TO LIBRARY CAMPAIGN AND OTHER PROGRAMS	252,335	
GAFFNEY,SC 29340			OTHER PROGRAMS		
Total	<u>.</u>		▶ 3a	1,357,335	
<b>b</b> Approved for future payment					
Total			<b>N</b> 24		
Total	<u> </u>		▶ 3b	Form <b>990-PF</b> (2015)	
				101111 330-FI (2013)	

Enter gross	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	<b>(e)</b> Related or exemp
<b>1</b> Program	service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	<b>(d)</b> A mount	function income (See instructions)
a						,
g Fees	and contracts from government agencies					
	rship dues and assessments					
	t on savings and temporary cash nents					
	ds and interest from securities			14	68 644,851	
	tal income or (loss) from real estate			14	044,031	
	financed property					
	ebt-financed property					
propert	tal income or (loss) from personal					
	nvestment income (loss) from sales of assets other than					
	ory			18	-141,543	
9 Netinc	ome or (loss) from special events				2.12,0.10	
	rofit or (loss) from sales of inventory					
L <b>1</b> Otherr	evenue <b>a</b> SETTLEMENT PROCEEDS			14	6,333	
Ь						
с						
c d						
c d e			0		509,709	
c d e L2 Subtota .3 Total.A	If Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				509,709 13_	
c d e .2 Subtota 3 Total.A (See w	ol Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify	calculations )		1	.3	
c d e .2 Subtota 3 Total.A (See w	If Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to
cd e	If Add columns (b), (d), and (e)  If Add columns (b), (d), and (e)  If a corksheet in line 13 instructions to verify the columns of activities to the columns of the foundation of the fou		olishment of E		es ontributed importa	509,709 ntly to

Form 990-Pf							Pag	ge <b>13</b>
Part XVI	Information Re Noncharitable		nsfers To and Tran Inizations	sactions and	Relationships With	1		
			ın any of the following wi 01(c)(3) organizations) (				Yes	No
organızat	ions?							
			harıtable exempt organız					
						1a(1)		No
						1a(2)		No
<b>b</b> Other tra		ritable evennt er	rannization			15/1)		No
			ganızatıon empt organızatıon			. 1b(1) 1b(2)		No No
• •			ts			. 1b(2)		No
						1b(3)		No
						1b(5)		No
• •	5		draising solicitations.			. 1b(6)		No
• •		·	er assets, or paid employ			. 1c		No
-			ete the following schedul				lue	
	•	ectly affiliated w	with, or related to, one or	more tax-exempt	-			
• •	complete the following s							
	(a) Name of organization	1	(b) Type of organiz	ation	(c) Description of	relationship		
				<del></del>				
the		nd belief, it is tru er has any knowl	nave examined this returned, correct, and complete edge 2016-11-08	Declaration of p	reparer (other than tax		sed on scuss th	all iis vn
	Print/Type preparer's i	name Prepa	rer's Signature	Date	Check if self- PTI		201	
	AMY BIBBY		-		employed ▶ ┌	P004458	91	
Paid Preparer Use		DMAN LLP			Firm's EIN ▶ 56-074	17981		
Only	Firm's address ► 500 RIDGEFIELD CO	URT ASHEVILLI	E,NC 28806		Phone no (828) 254	-2254		

TY 2015 Accounting Fees Schedule	
Name: BETSY M CAMPBE	LL FOUNDATION

7,539

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ACCOUNTING FEES

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

3,713

Name of Stoc	k	End of Year Book Value	End of Year Fair Market Value					
EIN:	58-6346237							
Name:	BETSY M CAMPBELL FOUN	NDATION						
TY 2015 Investments Corporate Stock Schedule								
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491315002156					

COMMON STOCK

MUTUAL FUNDS

17,719,105

1,282,801

1,351,133

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TY 2015 Investments Government Obligations Schedule							
Name:	BETSY M CAMPBE	LL FOUNDATION					
EIN:	58-6346237						
US Government Securities - End of Year Book Value:	7	786,782					
US Government Securities - End of Year Fair Market Value:	ç	920,156					
State & Local Government Securities - End of Year Book Value:		0					
State & Local Government Securities - End of Year Fair Market Value:		0					

The civil like print to the record prior like parts								
TY 2015 Investments - Other Schedule								
Name: BETSY M CAMPBELL FOUNDATION								
EIN:	58-6346237	,						
Category/ Item		Listed at Cost or	Book Value	End of Year Fair				

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ANNALY CAP MGMT RECEIVABLE

NATIONAL HEALTH INVS DIV REC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN REITS	AT COST	997,394	1,055,028
PIMCO DIVIDEND RECEIVABLE	AT COST	0	0

AT COST

AT COST

TY 2015 Legal Fees Schedule		

**Purposes** 

14,007

Name: BETSY M CAMPBELL FOUNDATION

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LEGAL FEES

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable

14,007

efile GRAPHIC print - DO NOT PROCESS   As File	d Data - DLN: 93491315002156					
TY 2015 Mortgages and Notes Payable Schedule						
Name: BETSY M CAMPBELL FOUNDATION  EIN: 58-6346237  Total Mortgage Amount:						
Item No.	1					
Lender's Name	FIRST PIEDMONT					
Lender's Title						
Relationship to Insider	BANK					
Original Amount of Loan						
Balance Due	608,531					
Date of Note	2015-09					
Maturity Date	2025-10					
Repayment Terms						
Interest Rate	3.25000000000					
Security Provided by Borrower	REAL ESTATE					
Purpose of Loan	CONSTRUCTION					
Description of Lender Consideration						
Consideration FMV						

Name: BETSY M CAMPBELL FOUNDATION

Description	Paginning of Voor
EIN:	58-6346237

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RECEIVABLE FROM BMC IRRV TR

INTANGIBLES

End of Year - Book Beginning of Year -Description

33,497

Book Value

DLN: 93491315002156

Value

16,726

End of Year - Fair

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315002156						
TY 2015 Other Decreases Schedule								
Name:	BETSY M CAMPBELL FOUNDATION	DN						
EIN:	58-6346237							

**Amount** 

Description

ACCRUAL TO CASH ADJUSTMENT

AMORTIZATION EXPENSE

TRAVEL

429

75

Name: BETSY M CAMPBELL FOUNDATION

DLN: 93491315002156

75

EIN: 58-6346237

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	132	0		132
OFFICE EXPENSE	1,422	0		1,422
INSURANCE EXPENSE	16,957	0		16,957
MISCELLANEOUS	7,104	0		5,104

6,333

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SETTLEMENT PROCEEDS

<b>EIN:</b> 58-634623	37		
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income

Description	Amount
<b>EIN:</b> 58-6346237	
Name: BETSY M CAMPBELL FOUNDATION	
TY 2015 Other Increases Schedule	
elle GRAFFIIC PHIIC - DO NOT PROCESS   AS FIIed Data -	DEN. 93491313002130

DI N. 93491315002156

4,730,412

123,513

608,531

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PRIOR YEAR INVESTMENT TRANSFER ADJUSTMENT

PRIOR PERIOD ADJUSTMENT TO INVESTMENT COST BASIS

ADJUSTMENT FOR UNREPORTED PRIOR YEAR NOTE PAYABLE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		LN: 93491315002156
TY 2015 Other Liabilities Schee	dule		
Name:	BETSY M CAMPBELL FOU	INDATION	
EIN:	58-6346237		
		The state of the s	

Description	Beginning of Year - Book Value	End of Year - Book Value

489,151

OTHER LIABILITY - PAYABLE RELATED TO CONSTRUCTION

IMPROVEMENT

ADVISOR FEES

INVESTMENT FEES

PROFESSIONAL FEES

Name: BETSY M CAMPBELL FOUNDATION

EIN: 36-0340237			
Category	Amount	Net Investment Income	Adjusted No Income

247,996

5.7

286

ETNI. EQ 6246227

247,996

57

572

ted Net

Disbursements for Charitable





DLN: 93491315002156



286

## Name: BETSY M CAMPBELL FOUNDATION

EO CO4COOT

<b>EIN:</b> 58-6346237			
Category	Amount	Net Investment	Adjusted

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

FOREIGN TAXES FROM INVESTMENTS

**EXCISE TAX** 

1,300

**Disbursements for** 

DLN: 93491315002156

Tucome

- d Net Income
- Charitable

1,300

2,944

**Purposes** 

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			Г	DLN: 93491315002156
Schedule B		Schedu	le of Contributors	 S	_	OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	▶ Information ab	out Schedule B (Fo	Form 990, 990-EZ, or 990-Pl orm 990, 990-EZ, or 990-PF) ow irs gov/form990		s is at	2015
Name of the organizati				Er	nployer ide	ntification number
— CAMPBELL F	OUNDATION			58	8-6346237	
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)(_)	(enter number) org	anızatıon			
	4947(a)(1)	nonexempt charit	able trust <b>not</b> treated as a p	orivate foundation		
	527 politica	al organization				
Form 990-PF	<b>√</b> 501(c)(3)	exempt private fou	ndation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3)	taxable prıvate fou	ndation			
other property  Special Rules  For an organizate under sections 5	) from any one contrib tion described in section 509(a)(1) and 170(b)(7	utor Complete Pari on 501(c)(3) filing F I)(A)(vi), that chec	hat received, during the yea ts I and II See instructions for Form 990 or 990-EZ that met ked Schedule A (Form 990 o	or determining a cor t the 33 <sup>1</sup> /3% suppor or 990-EZ), Part II, III	ntributor's to t test of the ne 13, 16a,	regulations or 16b, and that
	ny one contributor, dui or (ii) Form 990-EZ, lin		contributions of the greater of and II	of (1) \$5,000 or (2)	2% of the a	ımount on (ı) Form 990,
during the year,		nore than \$1,000 e	r (10) filing Form 990 or 990 xclusively for religious, chai lete Parts I, II, and III			
during the year, this box is check purpose Do not	contributions exclusive ked, enter here the total complete any of the p	rely for religious, chall contributions that arts unless the <b>Ge</b>	r (10) filing Form 990 or 990 naritable, etc., purposes, but twere received during the yneral Rule applies to this ownere during the year	t no such contribution year for an exclusiver ganization because	ons totaled r vely religious e it received	more than \$1,000 lf s, charitable, etc , l nonexclusively
990-EZ, or 990-PF), but	ıt <b>must</b> answer "No"	on Part IV, line 2, o	e and/or the Special Rules di fits Form 990, or check the oes not meet the filing requi	box on line $\boldsymbol{H}$ of its		

Name of organization
BETSY M CAMPBELL FOUNDATION

Employer identification number 58-6346237

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional spa	ice is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person 🔽
	BETSY M CAMPBELL IRREVOCABLE TRUST 104 BROADUS AVENUE		Payroll
	GREENVILLE, SC 29601	\$ 39,426	Noncash
	SKEENVILLE, 3623001		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		<u> </u>	Payroll
		1	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
		_ _ _ s	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)

Employer identification number

ION ELL FOLINDATION	Employer identification in	umber
	NDATION 58-6346237	
(b)	(c) FMV (or estimate)	(d)
Description of noncash property given	(see instructions)	Date received
(b)	(c) FMV (or estimate)	(d) Date received
bestingtion of nonodern property given	(see instructions)	Dute reserved
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
	Schedule B (Form 9	90, 990-EZ, or 990-PF)
	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) Description of noncash property given  (d) Description of noncash property given  (d) Description of noncash property given  (d) Description of noncash property given  (d) Description of noncash property given  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)