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61-1584614

**Part II Balance Sheets (see the instructions for Part II)**

Check if the organization used Schedule O to respond to any question in this Part I.

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments . . . . .	38 272	22 3,489
23	Land and buildings . . . . .	0	23 0
24	Other assets (describe in Schedule O) . . . . .	6	24 0
25	<b>Total assets</b> . . . . .	38 272	25 3 489
26	<b>Total liabilities</b> (describe in Schedule O) . . . . .	(34 783)	26 0
27	<b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	3,489	27 3,489

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III) A

Check if the organization used Schedule O to respond to any question in this Part III

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### What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

## Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others.)

28

28a ) If this amount includes foreign grants, check here . . . . ►  28a

29

(Grants \$ ) If this amount includes foreign grants, check here . . . . ►  29a

30

(Grants \$ ) If this amount includes foreign grants, check here . . . . ► □ 30a

**31 Other program services (describe in Schedule O)**

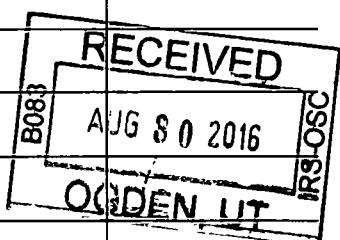
(Grants \$ ) If this amount includes foreign grants, check here . . . . ►  31a

**32 Total program service expenses (add lines 28a through 31a)**

**IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated – see the instructions)

Check if the organization used Schedule Q to respond to any question in this Part IV. See the instructions for Part IV.

Check if the organization used Concur to respond to any question in this part.



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0425867059  
Aug. 09, 2016 LTR 2695C 0 R  
61-1584614 201512 67  
Input Op: 0425867059 00025424

WINE AND SPIRITS WHOLESALERS  
ASSOCIATION OF SOUTH CAROLINA  
CAPITOL STATION  
PO BOX 11645  
COLUMBIA SC 29211



DECLARATION

017788

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Julie Cox Seidel  
Signature of officer or trustee

8/24/16  
Date

Associate Manager  
Title