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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at *www IRS gov/form990*

OMB No 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
South Carolina Association for Community Economic Development

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
PO Box 20577

City or town, state or province, country, and ZIP or foreign postal code
Charleston, SC 29413

D Employer identification number
56-2049813

E Telephone number
(843) 579-9855

G Gross receipts $ 844,171

F Name and address of principal officer
Bernett Mazyck
903 W Fifth N Street
Summerville, SC 29483

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☑ No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www scaced org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1995 **M** State of legal domicile SC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
The South Carolina Association for Community Economic Development (SCACED) is state-wide trade association of nonprofits, community development corporations (CDCS), community development financial institutions (CDFIS), local governments, financial institutions, corporations and other entities working within the state's economically distressed communities The SCACED places particular emphasis on promoting development in communities that have been left out of the economic mainstream, especially minority communities Through our network of members and partner organizations, South Carolina Association for Community Economic Development (SCACED) strives to improve the quality of life for low wealth families and communities by advancing the community economic development industry in South Carolina SCACED achieves this through capacity building and attracting public-private investment to local community economic development organizations, as well as influencing the public policy process in S

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	14
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	**5**	8
6	Total number of volunteers (estimate if necessary)	**6**	14
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	

			Prior Year	**Current Year**
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	778,584	733,350
	9	Program service revenue (Part VIII, line 2g)	103,958	110,799
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12	22
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	882,554	844,171
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	137,461	251,746
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	325,368	340,991
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶61,180		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	251,976	277,175
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	714,805	869,912
	19	Revenue less expenses Subtract line 18 from line 12	167,749	-25,741
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	**20**	Total assets (Part X, line 16)	574,478	543,691
	21	Total liabilities (Part X, line 26)	49,669	44,623
	22	Net assets or fund balances Subtract line 21 from line 20	524,809	499,068

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2017-05-12
Signature of officer Date

Bernett Mazyck President & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Will Stevens CPA	Will Stevens CPA			P01208094

Firm's name ▶ The Hobbs Group PA | Firm's EIN ▶

Firm's address ▶ 1704 Laurel Street
Columbia, SC 29201 | Phone no (803) 799-0555

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

The South Carolina Association for Community Economic Development (SCACED) is state-wide trade association of nonprofits, community development corporations (CDCS), community development financial institutions (CDFIS), local governments, financial institutions, corporations and other entities working within the state's economically distressed communities The SCACED places particular emphasis on promoting development in communities that have been left out of the economic mainstream, especially minority communities Through our network of members and partner organizations, South Carolina Association for Community Economic Development (SCACED) strives to improve the quality of life for low wealth families and communities by advancing the community economic development industry in South Carolina SCACED achieves this through capacity building and attracting public-private investment to local community economic development organizations, as well as influencing the public policy process in S

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 130,848 including grants of $ 66,000) (Revenue $)

See Schedule O

4b (Code) (Expenses $ 87,385 including grants of $ 84,200) (Revenue $ 57,720)

See Schedule O

4c (Code) (Expenses $ 70,133 including grants of $) (Revenue $)

See Schedule O

4d Other program services (Describe in Schedule O)

(Expenses $ 398,419 including grants of $ 101,546) (Revenue $ 110,799)

4e **Total program service expenses ▶** 686,785

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?*If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V . . . . ☑

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	6			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .			3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	0			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		No
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .			9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .			9b		No
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			14b		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	**1a** 15			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ SC

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶Bernett Mazyck PO Box 20577 Charleston, SC 29413 (843) 579-9855

Part VII **Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Evelyn Coker Director	1 00 0 00	X						0	0	0
(2) Matt Giddens Director	1 00 0 00	X						0	0	0
(3) Lori Jones-Gibbs Director	1 00 0 00	X						0	0	0
(4) Wilbur Cave Director	1 00 0 00	X						0	0	0
(5) LaTasha Cooper Director	1 00 0 00	X						0	0	0
(6) Rev William Stanfield Director	1 00 0 00	X						0	0	0
(7) Ginny Stroud Director	1 00 0 00	X						0	0	0
(8) Robert Thomas Director	1 00 0 00	X						0	0	0
(9) Scotty Davis Director	1 00 0 00	X						0	0	0
(10) Jennifer Wilford Director	1 00 0 00	X						0	0	0
(11) Nate Barber Chairman	1 00 0 00			X				0	0	0
(12) Don Oglesby Vice Chair	1 00 0 00			X				0	0	0
(13) Kristi King-Brock Secretary	1 00 0 00			X				0	0	0
(14) Deborah McKetty Treasurer	1 00 0 00			X				0	0	0
(15) Bernett Mazyck President & CEO	40 00 0 00			X				85,825	0	2,696

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

	(D)	(E)	(F)
1b Sub-Total . . . . ▶			
c Total from continuation sheets to Part VII, Section A . . . . ▶			
d Total (add lines 1b and 1c) . . . . ▶	85,825		2,696

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts						
1a Federated campaigns	1a					
b Membership dues	1b	24,100				
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e	85,000				
f All other contributions, gifts, grants, and similar amounts not included above	1f	624,250				
g Noncash contributions included in lines 1a-1f $						
h **Total.** Add lines 1a-1f ▶			733,350			
Program Service Revenue	Business Code					
2a Annual Conference			97,738	97,738		
b Tax Credit Fees			13,061	13,061		
c						
d						
e						
f All other program service revenue						
g **Total.** Add lines 2a–2f ▶			110,799			
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) ▶			22	22		
4 Income from investment of tax-exempt bond proceeds ▶			0			
5 Royalties ▶			0			
	(i) Real	(ii) Personal				
6a Gross rents						
b Less rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) ▶			0			
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory						
b Less cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss) ▶			0			
8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18	a					
b Less direct expenses	b					
c Net income or (loss) from fundraising events ▶			0			
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities ▶			0			
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory ▶			0			
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e **Total.** Add lines 11a–11d ▶			0			
12 **Total revenue.** See Instructions ▶			844,171	110,821		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	182,758	182,758		
2 Grants and other assistance to domestic individuals See Part IV, line 22	68,988	68,988		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	88,521	57,540	17,704	13,277
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	190,238	123,657	38,048	28,533
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,396	2,207	679	510
9 Other employee benefits	38,079	24,751	7,616	5,712
10 Payroll taxes	20,757	13,492	4,152	3,113
11 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	0			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	26,370	13,185	13,185	
12 Advertising and promotion	32,497	29,247	3,250	
13 Office expenses	16,754	11,728	2,513	2,513
14 Information technology	0			
15 Royalties . .	0			
16 Occupancy	28,827	18,737	7,207	2,883
17 Travel	49,072	41,711	7,361	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	55,085	52,331	2,754	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization . .	233	23	23	187
23 Insurance . . .	6,637	3,982	2,323	332
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a Outside Services	19,542	13,679	5,863	
b Computer Expenses	14,108	10,581	2,116	1,411
c Telephone Expense	11,175	7,264	2,235	1,676
d Postage and Shipping	8,265	6,199	1,033	1,033
e All other expenses	8,610	4,725	3,885	
25 Total functional expenses. Add lines 1 through 24e	869,912	686,785	121,947	61,180
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

					(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			418,405	1	458,131
	2	Savings and temporary cash investments				2	0
	3	Pledges and grants receivable, net				3	0
	4	Accounts receivable, net			153,651	4	79,526
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L				6	0
	7	Notes and loans receivable, net				7	0
	8	Inventories for sale or use				8	0
	9	Prepaid expenses and deferred charges				9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	15,999			
	b	Less accumulated depreciation	10b	15,765	1,672	10c	234
	11	Investments—publicly traded securities				11	0
	12	Investments—other securities See Part IV, line 11				12	0
	13	Investments—program-related See Part IV, line 11				13	0
	14	Intangible assets				14	0
	15	Other assets See Part IV, line 11			750	15	5,800
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			574,478	16	543,691
Liabilities	17	Accounts payable and accrued expenses			19,589	17	24,077
	18	Grants payable				18	
	19	Deferred revenue			30,080	19	20,546
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D				25	
	26	**Total liabilities.** Add lines 17 through 25			49,669	26	44,623
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			264,029	27	163,633
	28	Temporarily restricted net assets			260,780	28	335,435
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			524,809	33	499,068
	34	Total liabilities and net assets/fund balances			574,478	34	543,691

Part XI **Reconcilliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	844,171
2	Total expenses (must equal Part IX, column (A), line 25)	2	869,912
3	Revenue less expenses Subtract line 2 from line 1	3	-25,741
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	524,809
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	499,068

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:	16000303
Software Version:	2016v3.0
EIN:	56-2049813
Name:	South Carolina Association for Community Economic Development

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493132050717

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
South Carolina Association for Community Economic Development

Employer identification number
56-2049813

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170 (b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	1,078,971	545,098	657,107	782,334	733,350	3,796,860
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 **Total.** Add lines 1 through 3	1,078,971	545,098	657,107	782,334	733,350	3,796,860
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6 **Public support.** Subtract line 5 from line 4						3,796,860

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7 Amounts from line 4	1,078,971	545,098	657,107	782,334	733,350	3,796,860
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	158	45	8	12	22	245
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0
11 **Total support.** Add lines 7 through 10						3,797,105

12 Gross receipts from related activities, etc (see instructions) | 12 | 501,912

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) | 14 | 99 990 %

15 Public support percentage for 2015 Schedule A, Part II, line 14 | 15 | 99 990 %

16a **33 1/3% support test—2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support test—2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2016** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2015** Schedule A, Part III, line 17	18	

19a **331/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		

Part IV **Supporting Organizations** (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in **Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in **Part VI.** the role played by the organization in this regard*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013.			
d From 2014.			
e From 2015.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2017.** Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013.			
c Excess from 2014.			
d Excess from 2015.			
e Excess from 2016.			

Part VI **Supplemental Information.**

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2016
Open to Public Inspection

Name of the organization
South Carolina Association for Community Economic Development

Employer identification number
56-2049813

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ____________

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . .				
b Buildings				
c Leasehold improvements				
d Equipment . . .		15,999	15,765	234
e Other . . .				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* . . ▶				234

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			**1**	844,171
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	**2a**			
b	Donated services and use of facilities	**2b**			
c	Recoveries of prior year grants	**2c**			
d	Other (Describe in Part XIII)	**2d**			
e	Add lines **2a** through **2d**			**2e**	
3	Subtract line **2e** from line **1**			**3**	844,171
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b .	**4a**			
b	Other (Describe in Part XIII)	**4b**			
c	Add lines **4a** and **4b**			**4c**	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			**5**	844,171

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			**1**	869,912
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	**2a**			
b	Prior year adjustments	**2b**			
c	Other losses	**2c**			
d	Other (Describe in Part XIII)	**2d**			
e	Add lines **2a** through **2d**			**2e**	
3	Subtract line **2e** from line **1**			**3**	869,912
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b . .	**4a**			
b	Other (Describe in Part XIII)	**4b**			
c	Add lines **4a** and **4b**			**4c**	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			**5**	869,912

Part XIII **Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** ***(continued)***

Return Reference	Explanation

Additional Data

Software ID: 16000303
Software Version: 2016v3.0
EIN: 56-2049813
Name: South Carolina Association for Community Economic Development

Supplemental Information

Return Reference	Explanation
Part X FIN48 Footnote	The Association has received a determination letter from the Internal Revenue Service (IRS) indicating it is a tax-exempt organization under Section 501(c)(3) of the Internal Reven ue Code and is subject to federal income tax only on unrelated business income The Associ ation also qualifies for charitable contribution deduction under sEction 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509 (a)(2) Management is not aware of any transactions which would jeopardize their tax-exemp t status Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the Association and to recognize a tax liabi lity (or asset) if the Association has taken an uncertain position that more likely than n ot would not be sustained upon examination by the IRS Management has analyzed the tax pos itions taken by the Association and has concluded that as of December 31, 2016, there are no uncertain positions taken or expected to be taken that would require recognition of lia bility (or asset) or disclosure in the financial statements The Association is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any ta x periods in progress Management believes it is no longer subject to income tax examinati ons for fiscal years prior to 2013 U S state jurisdictions have statutes of limitations that generally range from three to five years Currently no audits for any tax periods are in progress

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
South Carolina Association for Community Economic Development

Employer identification number
56-2049813

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
See Additional Data Table							
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 2

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 11

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Given through Individual Dev Acct	27	68,988			
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation

Additional Data

Software ID: 16000303
Software Version: 2016v3.0
EIN: 56-2049813
Name: South Carolina Association for Community Economic Development

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
A Fathers Place 809 Wright Blvd Conway, SC 29528	57-1145908		25,000	0			Pathways to Health and Employment
Allendale County ALIVE PO Box 252 Allendale, SC 29810	58-2399005		20,000	0			Create FT Housing Developer
Chester County Literacy Counc 109 Ella Street Chester, SC 29706	57-0789897		25,000	0			Proper Nutrition 101

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
East Cooper Community Outreac 1145 Six Mile Road Mount Pleasant, SC 29466	57-0939280		8,300	0			Finanical Literacy and Empowerment
Fresh Future Farm Inc PO Box 22194 Charleston, SC 29413	46-5699947		25,000	0			Cooking up Community Economic Devel
Increasing HOPE 1551 Remount Road STE B N Charleston, SC 29406	75-3070026		10,000	0			Rehabilitation of homes

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Metanoia 2005 Reynolds Aveneu North Charlesto, SC 29405	20-0310400		8,700	0			Summer Freedom School Youth Employm
Mill Community Ministries 8 Lois Avenue Greenville, SC 29611	90-0854058		25,000	0			Mill Village Market at Greenlink Tr
Northside Development Corpora 410 Magnolia Street Spartnaburg, SC 29303	30-0698663		10,000	0			The Cleveland Heights Neighborhood

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Prime CDC PO Box 774 Georgetown, SC 29442	46-3604452		6,000	0			Money Matters
Southern Carolina Regional CD 422 Beech Avenue Denmark, SC 29042	57-1066960		10,000	0			Affordable Rental Houshing Project
Sterling Land Trust PO Box 1655 Greenville, SC 29602	24-4320744		10,000	0			Sterling Revitalization

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TN Development Corporation 1225 Lady Street Columbia, SC 29201	57-0979157		8,000	0			Bank on Columbia

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
South Carolina Association for Community Economic Development

Employer identification number
56-2049813

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 Various OTHER PROGRAM SERVICES 5 OTHER PROGRAM SERVICES 6 OTHER PROGRAM SERVICES 7 OTHER PROGRAM SERVICES 8 OTHER PROGRAM SERVICES 9

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Return Reference	Explanation
Form 990, Part VI, Line 11b Form 990 Review Process	Management reviews the Form 990 for completeness and accuracy Once it is approved, it is forwarded to the Board of Directors for review and comment period At the completion of this comment period, and once all comments are addressed, the Form 990 is filed with the Internal Revenue Service

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Annually the Board of Directors is provided a copy of the organization's by-laws to re-familiarize themselves with the organization governing documents The Board of Directors is required to review and sign a conflict of interest statement The personnel policy, which includes policies of conduct that include conflicts of interest, is reviewed annually by the executive committee for needed changes, and when changes are made to the policy, each employee is provided a copy of the updated document and is required to sign an affirmation of their review Each new employee is provided a copy of the personnel policy and is required to sign and affirmation of their review

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Return Reference	Explanation
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The organization consults with salary surveys provided by the South Carolina Association of Nonprofit Organizations, as well as other state community development corporations, when developing the President and CEO and other employee salaries Committees of the Board of Directors review and conclude on this information when providing a recommendation to the Board for approval

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Return Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The Organization makes its Public Disclosure Form 990 available upon request at its corporate offices The Organization makes its governing documents, conflict of interest policy and financial statements available to the public upon request in its corporate offices

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Return Reference	Explanation
Form 990, Part V, Line 1c - Reportable Payments	The organization had no reportable payments to a vendor requiring compliance with backup withholding rules, nor did they provide any reportable gaming, gambling, or winnings to a prize winner

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Return Reference	Explanation
Part III - Statement of Program Service Accomplishments Line 4a	Healthy Insights A joint partnership between the MITRE Corporation and SCACED supported by the Robert Wood Johnson Foundation (RWJF), Healthy Insights was launched in 2016 with the goal of strengthening efforts to combat obesity in South Carolina The Healthy Insights t ool harnesses publicly available sources, big data, across multiple sectors to identify co mmunities most in need of access to healthy lifestyle resources and to pinpoint potential opportunities for investment in community health projects Major Activities 1 Use the data analytics tool to select four communities in greatest need of a community health interven tion 2 Conduct community workshops in the Upstate, Midlands, Pee Dee and Low Country 3 Sol icit projects to be funded through an RFP process4 Provide grantees with project capital, capacity development, monitoring and evaluation The Data ToolMITRE built the tool, Healthy Insights, by collecting various population data and local capacity data -Visually display s areas of SC with greatest health challenges and greatest need for investment in communit y health-32 different sets of population data (MITRE)-10 sets of local capacity data (SCAC ED)The tool is an Original User Interface (UI) that allows users to run queries and visual ize maps with open, publicly available data and includes Predictive Modeling based on corr elations with income, obesity and diabetes The site is an open source software and can be found by using the following link www healthyinsight org The WorkshopsSCACED conducted fo ur Healthy Insights Community Workshops in each region of the state - Upstate, Pee Dee, Mi dlands, & Lowcountry with the purpose of introducing the initiative statewide, discussing available funding and RFP process, and soliciting feedback from the community on health ch allenges and potential solutions A total of 135 people attended the four regional communi ty workshops Upstate 38 attendeesPee Dee 27 attendeesLowcountry 30 attendeesMidlands 4 0 attendeesGrant Program$100,000 in grant capital was made available to support four proje cts at $25,000 each SCACED developed a competitive grant process w/ independent grant rev iew committee to receive and vet the funding requests and make final funding recommendatio ns, total funding requests totaled $684,000 from 27 different organizations Funded Organi zations and Their Projects ($25,000 each) Lowcountry Fresh Future Farm, Cooking Up Commun ity Economic Development oIn an effort to fulfill its mission to leverage urban agricultur e to create socially just economic development, Fresh Future Farm will partner with the Lo wcountry Alliance for Model Communities (LAMC) and others to design and build a mobile DHE C certified kitchen incubator This incubator, primarily located at FFFs location in the C hicora-Cherokee neighborhood of North Charleston, will allow FFF to extend the shelf life of its produce and herbs, create and sell value added products, and train area food entrep reneurs to use the kitchen and

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Return Reference	Explanation
Part III - Statement of Program Service Accomplishments Line 4a	grow their businesses They will work with North Charleston and DHEC officials as well as architects to create a kitchen that can be reproduced in any part of the state Midlands Chester County Literacy Council, Proper Nutrition 101oThis program will deliver an easy-to -understand nutritional curriculum for the population at large to make real and lasting ch ange Based on a grassroots initiative with the goal of developing universal nutritional p rogramming, the Nutrition 101 curriculum supplies the catalyst to raise public awareness o f the diet-health relationship across diverse literacy levels Detailing the predisposing, enabling, and reinforcing factors for health and wellness, this initiative will create 10 0 lay nutritionists who gain the skillset to take active roles in their families health T hrough three cycles of classes with twelve weeks of instruction per cycle, the curriculum fosters a mindset of nutritional knowledge that can maintain any individual for life and n ot just for a few months Pee Dee A Fathers Place, Pathways to Health and EmploymentoPathw ays to Health and Employment will enhance participants health, employment readiness and ec onomic stability by strengthening health education and increasing access to health service s The projects goal is to improve the economic and health conditions of low-income noncus todial fathers in Marion County so they can be employable and contribute financially and e motionally to their children and communities The project will serve 75 participants in Ma rion County Through provision of a health education curriculum, bi-annual health screenin gs, consultations, and increased access to medical services, participants will improve the ir knowledge about healthy behaviors, health conditions, and nutrition Upstate Mill Commu nity Ministries, Mill Village Market at Greenlink Transit StationoThis project will transf orm a vacant space within the Greenlink Bus Transit Station in downtown Greenville into a vibrant, educational, and affordable farmers market storefront The new market location wi ll impact the surrounding residents as well as the more than 2,500 riders that pass throug h the Transit Station every day Through this market, MCM will be able to reach more at-ri sk youth with paid employment to serve their community and be empowered with life- and job -skills The market will also help expand MCMs produce distribution, which will allow them to expand their agricultural opportunities and create more youth gardening employment opp ortunities Finally, this project aims to provide educational outreach on sustainable back yard gardening by building a demonstration garden in the landscaping beds adjacent to the market ____South Carolina Community Economic Developme nt Certification Program In partnership with the South Carolina Department of Commerce, SC ACED is actively supporting efforts to certify organizations as Community Development Corp orations (CDC) and Community D

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Return Reference	Explanation
Part III - Statement of Program Service Accomplishments Line 4a	evelopment Fınancıal Instıtutıons (CDFI) ın both rural and urban communıtıes across South Carolına SCACED has been coordınatıng the certıficatıon process by 1) receıvıng and revı ewıng applıcatıons for certıficatıon/re-certıficatıon 2) provıdıng technıcal support on ı ndıvıdual applıcatıons as well as a customızed organızatıonal assessment and sıte vısıt fo r each organızatıon seekıng certıficatıon/re-certıficatıon, 3) submıttıng both the complet ed applıcatıon and organızatıonal assessment to the Dept of Commerce for final approval o r rejectıon Certıfied CDCs and CDFIs have the exclusıve opportunıty to access the 33% Sou th Carolına Communıty Development Tax Credıt and grants from the Communıty Economıc Develo pment Fund when avaılable both of whıch are authorızed by the South Carolına Communıty Eco nomıc Development Act of 2000 The followıng ıs a lıst of the twenty-one communıty-based or ganızatıons currently certıfied wıth the SC Dept of Commerce (as of 1 6 17) Organızatıon Areas Served (Countıes unless otherwıse stated)1 Allendale County ALIVEAllendale, Bamberg, Barnwell, Hampton2 Anderson Interfaıth MınıstrıesAnderson, Oconee, Pıckens3 Benedıct-Alle n CDCCalhoun, Faırfield, Kershaw, Lexıngton, Newberry, Saluda, Rıchland4 Busıness Developm ent CorporatıonAıken, Allendale, Bamberg, Barnwell, Berkeley, Charleston, Chester, Clarend on, Colleton, Darlıngton, Dorchester, Edgefield, Faırfield, Florence, Georgetown, Greenvıl le, Hampton, Horry, Kershaw, Laurens, Lee, Lexıngton, Marlboro, Newberry, Orangeburg, Rıch land, Saluda, Spartanburg, Sumter, Unıon, Wıllıamsburg, York5 The Butterfly FoundatıonAnde rson, Greenvılle, Spartanburg 6 Charleston Cıtywıde Local Development CorporatıonBerkeley, Dorchester, Charleston (Charleston MSA), Colleton (non-metropolıtan) 7 Communıty Assıstanc e ProvıderCalhoun, Chester, Clarendon, Faırfield, Georgetown, Kershaw, Lancaster, Lee, Lex ıngton, Newberry, Orangeburg, Rıchland, Saluda, Sumter, Wıllıamsburg8 Communıty Works Caro lınaAbbevılle, Anderson, Cherokee, Chester, Edgefield, Greenvılle, Greenwood, Lancaster, L aurens, McCormıck, Oconee, Pıckens, Spartanburg, York, Unıon9 Genesıs HomesGreenvılle, Lau rens 10 Greenwood Area Habıtat for HumanıtyGreenwood11 Homes of HopeStatewıde 12 Increasın g H O P E Berkeley, Charleston, Dorchester13 Lowcountry Communıty Actıon Agency, Inc Coll eton, Hampton14 MetanoıaCıty of North Charleston (southern half)15 Mıdlands Housıng Trust FundAbbevılle, Aıken, Allendale, Bamberg, Barnwell, Calhoun, Edgefield, Faırfield, Florenc e, Greenwood, Horry, Kershaw, Lexıngton, Lee, McCormıck, Marıon, Newberry, Orangeburg, Rıc hland, Saluda, Sumter, Wıllıamsburg16 Northsıde Development Corporatıon Cıty of Spartanbur gs Northsıde Communıty/Neıghborhood17 Santee Lynches CDCBerkeley, Calhoun, Clarendon, Darl ıngton, Florence, Georgetown, Horry, Kershaw, Lee, Marıon, Orangeburg, Rıchland, Sumter, W ıllıamsburg18 SC Communıty Loan Fund Statewıde 19 Southeastern Housıng FoundatıonAıken, Al lendale, Bamberg, Barnwell, Be

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Part III - Statement of Program Service Accomplishments Line 4a Cont	Microenterprise Partnership Program Thanks to the SC Department of Commerce, $200,000 in capital was made available in 2015 to support microlending programs for two organizations Community Works Carolina, Inc and the Charleston Citywide Local Development Corporation - at their requested amount of $100,000 The two awards were projected to facilitate the financing of at least 15 loans to low-income entrepreneurs creating or retaining at least 15 jobs while leveraging an additional $200,000 creating $400,000 in total loan capital and an anticipated collective economic impact of $800,000 for underserved communities Impact through 2015 13 loans deployed totaling $111,629 in loan capital55 jobs created or retained69 individuals completed small business training and coaching137 hours of technical assistance provided to microentrepreneurs$200,000 in loan capital has been leveraged with an additional $600,000 from other sources creating an anticipated collective economic impact of $1 6 million New impact in 2016 5 loans deployed totaling $36,760 in loan capital40 jobs created or retained203 hours of technical assistance provided to microentrepreneurs____SC Energy Saves Program The SC Energy Saves Program is a community-based, stakeholder-driven initiative designed to demonstrate the value of and need for residential energy efficiency and solar energy programs that benefit low-wealth communities, SCACED does this by advocating for progressive energy policy at the state level, educating key stakeholders on the benefits of energy efficiency and solar energy, and connecting community economic development organizations with access to resources and capital to support existing and create new programs Since the passage of Act 236 in 2014 (aka Distributed Energy Resources Program Act), SCACED has also taken a more active role in connecting community economic development organizations with our states two investor-owned utilities in an effort to support the development of share and community solar projects that are located in and benefit LMI communities Impact of SC Energy Saves Program in 2016 -Coordinated two educational workshops where over 100 individuals gained valuable information on existing energy efficiency and solar programs in their area-Co-authored in conjunction with the Southern Environmental Law Center and the Partnership for Southern Equity - the Solar for All best-practices guide to help SC utilities make solar accessible to everyone-Educated members and other partners about the Distributed Energy Resource (DER) programs created as a result of Act 236 and the associated incentives and benefits -Working to connect more CED groups with the investor-owned utilities and forthcoming opportunities in residential solar and community and shared solar project development

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Part III - Statement of Program Service Accomplishments Line 4b	Individual Development Account ProgramProgram Description The South Carolina Association for Community Economic Development (SCACED) statewide Individual Development Account (IDA) program is a 3 1 matched savings account program that allows individuals to use their savings and match money toward any of three productive assets a home, a small business or post-secondary education Participants are required to save their funds, participate in financial literacy education and asset based training before having access to their match funds 2001 2016 Statewide IDA Program Funds Invested $750,000 in state money matched an additional $750,000 in federal funds for a total of $1,000,000112 homes purchased IDA funds leveraged a total of $11,200,000* in homes sold (*represents average home price of $100,000)100 students went back to school IDA funds leveraged $1,210,000* in tuition (*represents average tuition cost of $12,100) 189 businesses were started IDA funds leveraged a total of $3,931,200*(*represents 189 jobs created at $20,800 average annual salary of minimum wage earner in South Carolina 40 hours per week at $10/hour from the Bureau of Labor Statistics)Leveraged Funds $1,500,000 in IDA funds leveraged a total of $16,341,200 economic impact in South Carolina (Nearly an 11 to 1 Return on Investment)112 homes purchased, 100 students went back to school and 189 business started total In 2016 12 houses were purchased, 6 businesses created and 8 students went back to school Current IDA Funding in South CarolinaGreenville County (CommunityWorks) - $150,000County of Spartanburg (CommunityWorks) - $75,000City of Columbia (City Community Development Dept) - $150,000City of Florence (City Community Development Dept) - $100,000Charleston (East Cooper Community Outreach) - $100,000Applications Currently being Reviewed Anderson - Anderson Interfaith MinistriesUpstate - CommunityWorks

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Return Reference	Explanation
Part III - Statement of Program Service Accomplishments Line 4c	Communıty Impact FundUpdate on 2015 CIF Fundıng OrganızatıonProȷect NameFunds AwardedAllen dale County ALIVEProȷect Homeownershıp$10,000East Cooper Communıty OutreachFınancıal Lıter acy and Empowerment$8,300Genesıs HomesLand Bankıng ın Nıcholtown$5,000Increasıng HOPECapac ıty Buıldıng Inıtıatıve - Here We Grow! $10,000MetanoıaMetanoıa Junıor Servant Leaders Inte rnshıp Program$8,700The Northsıde Development Corporatıon The Cleveland Heıghts Neıghborho od Improvement Program$10,000TN Development Corporatıon"Bank On" Columbıa$8,000Jobs create d or sustaıned 10Busınesses created or expanded 0Indıvıduals receıvıng traınıng/ workıng d evelopment403Unıts of affordable housıng developed 0Homes weatherızed or rehabbed 8Banked ındıvıduals32Blıghted property purchased1Indıvıduals receıvıng fınancıal assıstance (ECCO) 94Actıve IDA partıcıpants (ECCO)282016 Fundıng SCACED held one grant round ın the fourth q uarter of 2016 for the Communıty Impact Fund - made possıble wıth support from the Mary Re ynolds Babcock Foundatıon SCACED set asıde $50,000 for the 2016 CIF Grant Program wıth fu ndıng exclusıvely avaılable to current SCACED members We receıved 13 applıcatıons totalın g $177,750 ın requests, and the CIF Grants Revıew Commıttee on December 2nd 2016 - awarded the $50,000 to seven organızatıons for theır proȷects or programs Informatıon on the 201 6 CIF Awards can be found below OrganızatıonProȷect NameProȷect Type Funds AwardedAllenda le County ALIVEAffordable Homeownershıp FınancıngHomeownershıp$10,000Proȷect Affordable Ho meownershıp Fınancıng proposes to hıre a full-tıme Certıfıed Loan Packager to expand ALIVE s loan packagıng servıce to ıncrease fınancıng for low-ıncome famılıes to buy, buıld, repa ır, ımprove, or modernıze theır homes Blackvılle CDCHome Repaırs & WeatherızatıonOwner-occ upıed rehab and weatherızatıon$5,000Mınor repaırs, rehabılıtatıon, and weatherızatıon wıll be made to homes of low-to-moderate ıncome famılıes to elımınate hıgh energy cost and pro vıde safe and decent housıng ın low-wealth communıtıes Homeless No MoreHomeless No More Ca pacıty BuıldıngAffordable Rental Housıng $4,000Fundıng wıll be used to buıld seven new unı ts of affordable, energy-effıcıent unıts for homeless unaccompanıed youth ages 18 24 Orıgı nSCCredıt Improvement A steppıng stone to homeownershıp ın the Lowcountry & MıdlandsFınan cıal Lıteracy & Homeownershıp$5,000Fundıng wıll support OrıgınSCs Fınancıal Educatıon Prog ram whıch provıdes workshops and ındıvıdual counselıng to consumers lookıng to ımprove the ır credıt so that they can achıeve mılestones, such as buıldıng wealth through homeownersh ıp Prıme CDCMoney Matters Fınancıal Lıteracy InıtıatıveFınancıal Lıteracy$6,000Fundıng wı ll support Prıme CDCs Money Matters fınancıal lıteracy ınıtıatıve through ınstructor-led w orkshops that cover several key fınancıal topıcs ıncludıng budgetıng, managıng checkıng an d savıng accounts, and obtaınıng and usıng credıt Southern Carolına Regıonal CDCAffordabl e Rental Housıng ProȷectAfford

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Part III - Statement of Program Service Accomplishments Line 4c	able Rental Housing $10,000Funding will be used to purchase and renovate a home in Bamberg County and lease the unit to a low-to-moderate income family Sterling Community Land Trus tSterling RevitalizationAffordable Rental Housing$10,000The Land Trust will work with othe r partners to build an affordable rental unit on property owned by the Land Trust in Green ville ____Community Economic Development FundIn the 20 15 Legislative Session, the SC General Assembly authorized an appropriation of $100,000 to be included in the state budget and used for the 2015 CED Grant Program a competitive gra nt round that provides qualified and state-certified CDCs and CDFIs with available funding for their community economic development projects An independent Grants Review Committee was convened by SCACED to vet the applications and funding requests, and the Committee de cided to award six qualified organizations with capital for their respective projects Upd ate on 2015 CED Fund OrganizationProject NameRecommended FundingAnderson Interfaith Minist ries SNAP 2 Work $22,500 CommunityWorks, Inc CommunityWorks MicroBusiness Program$10,000 I ncreasing H O P E Three-Part Quality of Life Project$5,000 Metanoia CDCMetanoia's Youth En trepreneurship Program$10,000 South Carolina Community Loan FundInvesting in Community$20, 000 The Butterfly FoundationCulinary Job Training Program$22,500 Jobs created or sustained 155Businesses created or expanded 39Individuals receiving training/ working development24 2Units of affordable housing developed 1Homes weatherized or rehabbed 1Other#Other#Other#I n the 2016 Legislative Session, the SC General Assembly authorized an appropriation of $10 0,000 to be included in the state budget and used for the 2016 CED Grant Program The Grant Review Committee is currently reviewing the six applications, and funding recommendations will be made on January 13th, 2017 OrganizationProject NameFunds RequestedAllendale Count y ALIVEIncreasing Homeownership in SC$30,000 Anderson Interfaith Ministries SNAP 2 Work $3 0,000 Butterfly FoundationCulinary Job Training Program$30,000 Increasing H O P E Affordab le Housing Project$15,000 Metanoia CDCJunior Servant Leaders Internship Program$15,000 San tee Lynches CDCExpanding Computer Access to Affordable Rental Housing $10,000 $130,000 (on ly $90,000 available) ____Community Development Tax Cre dit The South Carolina Community Economic Development Act of 2000 created the SC Community Development Tax Credit, which provides $5 million in a 33% state tax credit to SC tax pay ers who invest in certified community development corporations (CDCs) and community develo pment financial institutions (CDFIs) These organizations work in poor communities of Sout h Carolina to help families build wealth and escape poverty by creating over 5,500 jobs, o ver 100 small businesses and having an economic impact of over $250 million in South Carol ina The law places an annual

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Part III - Statement of Program Service Accomplishments Line 4c	cap of $1 million in tax credits annually For 12 years, the SC Community Development Tax C redit went virtually unknown by investors, donors and tax professionals in South Carolina until 2013 when the SC Association for Community Economic Development (SCACED) took on the role of administrator and marketer of the SC Community Development Tax Credit The attent ion to and interest in the CD Tax Credit has since grown exponentially In 2015 and 2016 t he full $1 million annual allocation of Community Development Tax Credits was used by inve stors and donors to provide $3 million in private capital to certified CDCs and CDFIs work ing in these poor communities The demand for the credits has increased significantly and all credits for 2016 were claimed before the end of the 2nd quarter of 2016 Breakdown of CD Tax Credit Usage 2014, 2015 & 2016YearTotal Investments AttractedTotal Credits Claimed Credit Balance at Year EndCertified CDCs & CDFIs Using CD Tax Credit2014$2,134,304 44$704, 320 47$295,679 5392015$3,030,303 00$1,000,000 00$092016$3,030,303 00$1,000,000 00 $06 Train ing/Capacity Building Efforts and AttendanceSCACED held 6 Community Development Institute trainings and our Annual Community Economic Development Conference in 2016 The topics and speakers were suggested by CED thought leaders in South Carolina Our goal was to meet th e capacity needs of the CED industry in South Carolina Detail breakdown of classes, course description and attendance Leadership Before you Get Hit by a Bus Succession Planning, C apacity Building and Organizational Sustainability (10 attended)Organizational Financial M gmt for Community-Based Organizations (7 attended) Measuring the Impact of Your Community Development Programs (23 attended)The MicroBusiness Development Workshop A Guide for New and Existing Entrepreneurs (15 attended)Engaging Strategic Partners in Community Developm ent (22 attended)Annual Community Economic Development Conference (over 200 attended) Was heldSeptember 14th through 16th, 2016 in Greenville, SC Keynote Speaker Dr Harris Pastid es, President of the University of South CarolinaImpacting Communities through Single-Fami ly and Multi-Family Housing Development (15 attended)