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OMB No 1545-0052

2016

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-20	)16 , a	nd ending 12-31		
LA	DIES B	ındatıon ENEVOLENT SOCIETY ITY OF CHARLESTON		57-6001563	lentification numbe	er
Num	ber and	d street (or P O box number if mail is not delivered to street address)	Room/suite	R Tolophone pu	ımber (see ınstructio	ne)
P	O BOX 2	21408		(843) 577-662	·	113)
		ı, state or province, country, and ZIP or foreign postal code N, SC 29413	1		application is pendin	ng, check here
	l	I that apply	form or public charity	D.1 Foreign of	rganizations, check h	► L
a Ci	теск ат	I that apply ☐ Initial return ☐ Initial return of a☐ Final return ☐ Amended return	tormer public charity		rganizations, check in	▶ ⊔
		Address change Name change			ck here and attach co	
<b>1</b> Ch	neck ty	pe of organization Section 501(c)(3) exempt private in	foundation		undation status was on 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust				
of '	year <i>(f</i>	xet value of all assets at end from Part II, col (c), \$ 2,109,568  J Accounting method  Other (specify) (Part I, column (d) must	Cash Accru		ation is in a 60-mont on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total		1	1	(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	36,626	5		
	_	schedule)  Check   If the foundation is <b>not</b> required to attach				
	2	Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	30,220	30,220	,	
	5a b	Gross rents				
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	32,644	1		
Revenue	b	Gross sales price for all assets on line 6a 184,250	,			
	7	Capital gain net income (from Part IV, line 2)		32,644		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	Ь	Less Cost of goods sold			<del>                                     </del>	
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	99,490	62,864		
	13	Compensation of officers, directors, trustees, etc		0	<u> </u>	0
	14	Other employee salaries and wages				
68	15	Pension plans, employee benefits				
3	16a	Legal fees (attach schedule)				
χ	ь	Accounting fees (attach schedule)	<b>9</b> 650	650	1	C
Operating and Administrative Expenses	С	Other professional fees (attach schedule)				
a [[	17	Interest				
<u>.</u>	18	Taxes (attach schedule) (see instructions)	2,671	. 2,671		C
Ē	19	Depreciation (attach schedule) and depletion				
AG	20 21	Occupancy				
Ē	22	Printing and publications	1,302		1	1,302
р <u>Б</u>	23	Other expenses (attach schedule)	22,419		,	3,820
at II	24	Total operating and administrative expenses.				
<u>B</u>		Add lines 13 through 23	27,042	21,797	<u>                                      </u>	5,122
)	25	Contributions, gifts, grants paid	101,850			101,850
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	128,892	21,797	,	106,972
	27	Subtract line 26 from line 12	123,332	22,737		233,372
	a	Excess of revenue over expenses and	-29,402			
	ь	disbursements Net investment income (if negative, enter -0-)		41,067	,	
	c	Adjusted net income(if negative, enter -0-)				
or	Paner	work Reduction Act Notice, see instructions.	<u> </u>	Cat No. 11289		rm <b>990-PF</b> (2016)

1,939,730

100,000

1,839,730

1,939,730

1,939,730

1,910,328

100,000

1,810,328

1,910,328

1,910,328

2

3

4

5

6

1,939,730

1,910,328

1,910,328

Form **990-PF** (2016)

-29,402

0

2,109,568

15

16

17 18

19

20 21

22

23

24

25

26

28 29

30

31

Part III

2

3

Liabilities

Balances

Fund

ŏ

Assets 27

Net

Other assets (describe > \_

Other liabilities (describe -\_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶ \_

Other increases not included in line 2 (itemize) ▶ \_\_\_\_\_

instructions Also, see page 1, item I)

Total assets (to be completed by all filers—see the

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

**Analysis of Changes in Net Assets or Fund Balances** 

2-story brick warehouse, or common stock, 200 shs MLC Co )

1aSee Additional Data Table

(e)

Gross sales price

(i)

FMV as of 12/31/69

Capital gain net income or (net capital loss)

a See Additional Data Table

in Part I, line 8

(a)

Base period years Calendar

year (or tax year beginning in)

2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

a See Additional Data Table

b C d 6

b C d e

b c d e

2

Part V

			Page <b>3</b>
ome			
	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
			_
Cost or	(g) other basis ense of sale	Gain o	r (loss) n minus (g)
	_		-

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (j) Adjusted basis

as of 12/31/69

(f)

Depreciation allowed

(or allowable)

(k) Excess of col (1) over col (j), if any

2

3

(I)Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income ) Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Net value of noncharitable-use assets

If gain, also enter in Part I, line 7

If (loss), enter -0- in Part I, line 7

(d) Distribution ratio

(col (b) divided by col (c))

🗌 Yes 🗸 No

If section 4940(d)(2) applies, leave this part blank

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

. . . . . . . . . . .

Enter the appropriate amount in each column for each year, see instructions before making any entries

106,469

107,379

114,410

103,142

98,722

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

2,116,236

2,177,946

2,012,365

1,897,894

2,011,902

2

3

4

5

6

7

8

0 050311

0 049303

0 056854

0 052017

0 051266

0 259751

0 051950

2,008,674

104,351

104,762 106,972

Form 990-PF (2016)

411

32,644

**5a** During the year did the foundation pay or incur any amount to

Page **6** 

	<ul><li>(1) Carry on propaganda, or otherw</li><li>(2) Influence the outcome of any sp</li></ul>	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	on, directly or indirectly, any void (3) Provide a grant to an individual	=		· · Yes 🛂	No		
	(4) Provide a grant to an individual	**		∐ Yes ⊻	No		
	ın section 4945(d)(4)(A)? (see ii		· •		No		
	(5) Provide for any purpose other th						
	educational purposes, or for the			∟ Yes 💌	No		
D	If any answer is "Yes" to 5a(1)-(5), Regulations section 53 4945 or in a					ь	
	Organizations relying on a current n	• •	•	•		-	
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	ь	No
<b>7</b> _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

Form 990-PF (2016)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Paid I	Employees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 PROVIDES FINANCIAL ASSISTANCE TO THE POOR AND ELDERLY OF TH		<u> </u>
MEDICAL NEEDS THE ASSISTANCE CONSISTS OF 1)MEDICINES, 2) ME		0
2		
3		
4		
·		
Part IX-B Summary of Program-Related Investments (see	e instructions)	
Describe the two largest program-related investments made by the foundation during	g the tax year on lines 1 and 2	Amount
1		
2		_
		-
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
		Form <b>990-PF</b> (2016)

1a

1b

2

3a 3b

4

5

106,972

106.972

106.561

Form 990-PF (2016)

411

Part XII

1

2

3

4

5

b

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

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

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

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

**b** Total for prior years

From 2011. . . . **b** From 2012. . . . . c From 2013. . .

**d** From 2014. . . . .

e From 2015. . . . .

XII, line 4 > \$

indicated below:

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . . . .

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . . .

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . . d Applied to 2016 distributable amount. . . . .

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

**b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount —see instructions . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

Subtract lines 7 and 8 from line 6a . .

10 Analysis of line 9 a Excess from 2012. .

**b** Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

**5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

same amount must be shown in column (a) )

15.338 1,538

1,977

15,338

1.538

1.977

6.949

(a)

Corpus

18,853

6.949

25.802

25,802

(b)

Years prior to 2015

(c)

2015

Page 9

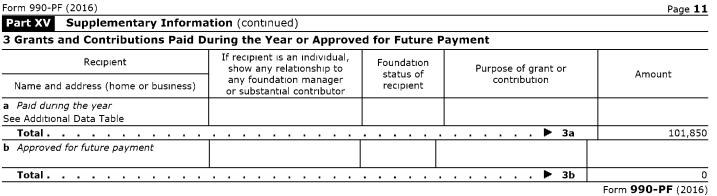
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Form **990-PF** (2016)

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Form 990-PF (2016)							
Part XIII Undistributed Income (see instruction							



Form 990-I	, ,	Activities				Page <b>12</b>
	·		usiness income	Evaluded by costror	512 F12 or F14	(e)
Enter gross	s amounts unless otherwise indicated	(a)	(b)	Excluded by section	(d)	Related or exempt function income
_	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions )
	and contracts from government agencies					
3 Intere	ership dues and assessments					
	nds and interest from securities			14	30,220	
	ntal income or (loss) from real estate					
	-financed property					
	ental income or (loss) from personal property					
<b>7</b> Other	investment income.					
	or (loss) from sales of assets other than			10	22.644	
	tory			18	32,644	
	profit or (loss) from sales of inventory					
	revenue <b>a</b>					
					50.054	
12 Subtot 13 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0		62,864 <b>3</b>	62,864
(See works	heet in line 13 instructions to verify calculatio	ns )				
Line No.	I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ıncome ıs report	ed in column (e) o	f Part XVI-A contribi		
	instructions )					E THE PRIMARY
8	LADIES BENEVOLENT SOCIETY IS PRIMARIL MEANS BY WHICH THE ORGANIZATION IS A					
	1					
	1				Fo	rm <b>990-PF</b> (2016)

Part	XVII	Information Re Exempt Organic		ransf	ers To	and Transac	tio	ns and R	Relatio	nships With No	ncharitab	le		
		ganization directly or in Code (other than sectio	directly enga								ion 501		Yes	No
<b>a</b> Tran	a Transfers from the reporting foundation to a noncharitable exempt organization of													
(1)	Cash.										. 1a	(1)		No
(2)	Other	assets									. <u>1a</u>	(2)		No
<b>b</b> Othe	er trans	sactions												
(1) Sales of assets to a noncharitable exempt organization												(1)		No
(2) Purchases of assets from a noncharitable exempt organization												(2)		No
(3) Rental of facilities, equipment, or other assets												(3)		No
												(4) (5)		No No
		or loan guarantees. mance of services or m										(6)		No
٠,		facilities, equipment, n	•		-							.c		No
	-	ver to any of the above			•							_		110
of th	ne good ny tran	ds, other assets, or sersection or sharing arra  (b) Amount involved	vices given b ngement, sh	y the r ow in c	reporting column (d	foundation If	he f the	oundation goods, oth	receive ner asse	d less than fair mar	rket value Ived		ngemen	ts
<b>,</b> , , , , , , , , , , , , , , , , , ,		<b>(-)</b>	(-,			, , , , , , , , , , , , , , , , , , ,		(,		,	,		.,	
							+							
							+							
							_							
	_						+							
	_						+							
							+							
desc	cribed i	dation directly or indire in section 501(c) of the implete the following so (a) Name of organization	Code (other chedule		section 50	•	secti	ion 527?	-				<b>✓</b> N	o
Sign	of m	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, c							than taxpayer) is b	ased on all	nfor	mation	n of
Here	*	****				2017-05-12		\ **:	****		May the IRS d with the prepa			
	5	Signature of officer or ti	rustee			Date		Titl	le	<u>.</u>	(see instr )?	<b>√</b> γ	es 🗆 N	lo
		Print/Type preparer's		Prepa	arer's Sigi	nature		Date		Check if self- employed ▶ □	PTIN POO	1292	986	
Paid Prepa Use (		Firm's name ► MOS	S & YANTIS	CPA PA	Ą						Firm's EIN I	<u></u> -	-13567	'37
J3C (	J111 Y	Firm's address ▶ PC	BOX 2425											
							Phone no (	343)	) 606-2	2349				
										1				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d								
	kınd(s) of property sold (e g , real e use, or common stock, 200 shs ML0	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )				
ABBOTT LABORATORIES			Р	2014-12-19	2016-12-29			
ABBOTT LABORATORIES			Р	2015-12-09	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-04-03	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-06-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-07-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-08-04	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-09-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-10-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-11-03	2016-12-29			
FRANKLIN US GOVT SECS			Р	2015-12-02	2016-12-29			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h				
(e) Gross sales price	Depreciation allowed (f) (or allowable)		r other basis pense of sale	Gain <b>(h)</b> (e) plus	or (loss) (f) minus (g)			
16,899			20,308		-3,409			
16,860			19,782	-2,922				
101,123	101,123				-4,877			
272			285	-13				
291			302	-11				
284			294	-10				
286			295		-9			
287			296		-9			
293			302		-9			
286			294		-8			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns i - I				
Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus t less than -0-) <b>or</b>			
(i) F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Exces ( <b>k</b> ) over c	ss of col(ı) ol(ʒ), ıf any		rom col (h))			
					-3,409			
					-2,922			
					-4,877			
					-13			
					-11			
					-10			
					-9			
					-9			
					-9			
<u> </u>					-8			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d								
	kınd(s) of property sold (e g , real e use, or common stock, 200 shs ML0	(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )				
FRANKLIN US GOVT SECS			Р	2015-12-31	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-02-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-03-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-04-04	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-05-03	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-06-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-07-05	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-08-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-09-02	2016-12-29			
FRANKLIN US GOVT SECS			Р	2016-10-04	2016-12-29			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h				
(e) Gross sales price	Depreciation allowed (f) (or allowable)		r other basis pense of sale	Gain <b>(h)</b> (e) plus i	or (loss) (f) minus (g)			
295			302		-7			
283			291	-8				
277			285		-8			
285			293		-8			
283			290		-7			
285			292		-7			
279			287		-8			
272			279		-7			
276			283		-7			
267			273		-6			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	nsi-l				
Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus t less than -0-) <b>or</b>			
(i) F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Exces ( <b>k</b> ) over c	ss of col(၊) ol(ϳ), ıf any		rom col (h))			
					-7			
					-8			
					-8			
					-8			
					-7			
					-7			
					-8			
					-7			
					-7			
					-6			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation FRANKLIN US GOVT SECS Ρ 2016-11-02 2016-12-29 FRANKLIN US GOVT SECS Ρ 2016-12-02 2016-12-29 CAPITAL GAINS DIVIDENDS Ρ Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Cost or other basis Gain or (loss) Depreciation allowed (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) (f) 296 301 -5 270 272 44,001 44,001 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any -5

44,001

(a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to (e) other allowances hours per week not paid, enter (b) devoted to position -0-) employee benefit plans and deferred compensation MRS PATRICK W MCKINNEY SUPERINTENDENT 2 00 PO BOX 21408

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

MDC LYNN Z DANTZLED				
PO BOX 21408 CHARLESTON, SC 29402	SECRETARY 2 00			
MRS MYRON C HARRINGTON JR	RECORDING	0	0	0
CHARLESTON, SC 29402				

MRS MYRON C HARRINGTON JR	RECORDING	0	U	0
PO BOX 21408 CHARLESTON, SC 29402	SECRETARY 2 00			
MRS LYNN Z DANTZLER	CORRESPONDENT	0	0	0
PO BOX 21408	SECRETARY 2 00			

MDC TOUR A CTUUD		_	_	
PO BOX 21408 CHARLESTON, SC 29402	SECRETARY 2 00			
MRS LYNN Z DANTZLER	CORRESPONDENT	0	0	0
PO BOX 21408 CHARLESTON, SC 29402	2 00			

MRS LYNN Z DANTZLER	CORRESPONDENT	0	0	0
PO BOX 21408 CHARLESTON, SC 29402	SECRETARY 2 00			
MRS JOHN A STUHR	TREASURER	0	0	0
DO BOY 21409	2 00			

CHARLESTON, SC 29402	2 00			
MRS JOHN A STUHR	TREASURER	0	0	0
PO BOX 21408 CHARLESTON, SC 29402	2 00			

MRS JOHN A STUHR	TREASURER	0	0	(
PO BOX 21408 CHARLESTON, SC 29402	2 00			

CHARLESTON, SC 29402				
MRS LEON B DEBRUX	JR SUPERINTENDENT	0	0	
PO BOX 21408	2 00			

CHARLESTON, SC 29402

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
RESPITE CARE MINISTRIESST MATTHEWS CHURCH 405 KING ST CHARLESTON, SC 29403		PUBLIC	PUBLIC SUPPORT FOR SENIOR DAY CARE	6,000
BARRIER ISLAND FREE MEDICAL CLINIC 3226 MAYBANK HIGHWAY JOHNS ISLAND, SC 29455		PUBLIC	PUBLIC SUPPORT FOR NURSING AND MEDICAL CARE FOR THE NEEDY	31,500
CHARLESTON AREA SENIOR CITIZENS 259 MEETING ST CHARLESTON, SC 29401		PUBLIC	PUBLIC SUPPORT FOR NURSING AND MEDICAL CARE FOR SENIOR CITIZENS	12,000
EAST COOPER MEALS ON WHEELS 2304 NORTH HIGHWAY 17 MT PLEASANT, SC 29466		PUBLIC	PUBLIC SUPPORT FOR MEDICINES & SUPPLIES	1,850
CHARLES WEBB NURSE 1611 EVERGREEN STREET CHARLESTON, SC 29407		PUBLIC	PUBLIC SUPPORT FOR NURSING AND MEDICAL CARE FOR THE NEEDY	35,000
SUMPTER FREE HEALTH CLINIC 1083 NORTH STATE HIGHWAY 35 ST STEPHEN, SC 29479		PUBLIC	PUBLIC SUPPORT FOR NURSING AND MEDICAL CARE FOR THE NEEDY	1,500
ASSOCIATION FOR THE BLIND 1071 MORRISON DRIVE CHARLESTON, SC 29403		PUBLIC	PUBLIC SUPPORT FOR THOSE LIVING WELL WITH PARTIAL VISION	7,000
CAROLINA HEARING BANK 6296 RIVERS AVENUE STE 100 NORTH CHARLESTON, SC 29406		PUBLIC	PUBLIC SUPPORT FOR THOSE LIVING WELL WITH PARTIAL HEARING	7,000
Total				101,850

Total . 3а

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TY 2016 Accounting Fees Schedule						
	Name:	LADIES BENE	VOLENT SOCIE	≣TY		
OF THE CITY OF CHARLESTON						
<b>EIN:</b> 57-6001563						
Category	Amo	unt Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

ACCOUNTING FEES

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## **TY 2016 Investments Corporate Bonds Schedule**

Name: LADIES BENEVOLENT SOCIETY

OF THE CITY OF CHARLESTON

<b>EIN:</b> 57-6001563				
Name of Bond	End of Year Book Value	End of Year Fair Market Value		
ALLIANCE BERNSTEIN SMALL CAP GROWTH FUND	50,045	50,848		
EATON VANCE LARGE CAP VALUE FUND CLASS A	86,772	110,768		
GROWTH FUND OF AMERICA CL F1	140,696	194,525		
IVY SMALL CAP VALUE FUND CLASS A	42,662	57,925		
JP MORGAN LARGE CAP GROWTH FUND	135,816	185,496		
R S SELECT GROWTH FUND	65,720	76,327		
R S VALUE FUND CLASS A	64,701	79,477		
SUNAMERICA FOCUSTED DIVIDEND STRATEGY FUND	164,849	199,156		
THORNBURG INTERNATIONAL VALUE FUND CLASS A	94,749	99,075		
LEHMAN BROS HLDGS	26,410	0		
V F CORP	530	373		
HARTFORD INTL VALUE	133,444	141,948		
JOHNSON & JOHNSON	495	461		

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TY 2016 Investments Corporat	e Stock Sche	dule	
i i 2010 i ili estincino corporat			
Name: l	ADIES BENEVOLI	ENT SOCIETY	
(	OF THE CITY OF	CHARLESTON	

53,333

50,001

<b>EIN:</b> 57-6001563		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

MERRILL LYNCH & CO

TY 2016 Investments - Other Schedule	
Name: LADIES BENEVOLENT SOCIETY	

DLN: 93491132023017

110,833

106,299

OF THE CITY OF CHARLESTON

FIN: 57-6001563

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PIONEER STRATEGIC INCOME FUND CLASS A

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
DELAWARE DIVERSIFIED INCOME FUND CLASS A	AT COST	50,007	51,891		

AT COST

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TY 2016 Other Expenses Schedule							
Name: LADIES BENEVOLENT SOCIETY							
OF THE CITY OF CHARLESTON							
<b>EIN:</b> 57-6001563							
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
AID TO NEEDY	6,974	6,974		0			
SECREATRY OF STATE FEE	50	0		50			
INSURANCE	2,394	0		2,394			

200

600

576

15

108

11,502

0

0

11,502

200

600

576

CHARITABLE DONATIONS

INVESTMENT EXPENSE

MISCELLANEOUS

BANK SERVICE CHARGES

PARTY EXPENSES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491132023017			
TY 2016 Taxes Schedule							
Name	: LADIES BEN	EVOLENT SOCIETY	<b>(</b>				
OF THE CITY OF CHARLESTON							
<b>EIN:</b> 57-6001563							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
FEDERAL EXCISE TAX	2,671	2,671		0			