NE 06/12/2018 2 37 PM

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

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf Open to Public Inspection

		dar year 2016 or tax year beginning U // UI/ 16 , a undation	and ending U6/3	0/17	A Emple	oyer identification nu	ımber	
-		a H DUDANG NOIDWANTON				****	-	7-602475
		S F. BYRNES FOUNDATION distrect (or P O box number if mail is not delivered to street address)	Т.	oom/suite		none number (see ins		
		BOX 6781		Jonesune		3-25 4 -93		·/
		n, state or province, country, and ZIP or foreign postal code						chook bara
		MBIA SC 29260-6	781		C If exer	nption application is p	enaing,	Crieck nere
G	Check	all that apply Initial return Initial retu	rn of a former public c	harity	D 1. Fo	reign organizations, c	heck he	re 🕨 📗
		Final return Amended	return	1		reign organizations m	_	
		Address change Name cha		711	85	% test, check here an	d attach	computation
H	Check	type of organization 🗶 Section 501(c)(3) exempt private	foundation			ate foundation status		ninated under
			le private foundation		sectio	n 507(b)(1)(A), check	here	P
		rket value of all assets at J Accounting method	X Cash Acc	rual 1		foundation is in a 60-n		
	-	ear (from Part II, col (c), Under (specify)			unger	section 507(b)(1)(B),	CHECK II	ere
	ne 16) art i			Τ				(d) Disbursements
-	arti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted ne	et	for chantable purposes
		the amounts in column (a) (see instructions))	books	incor		income		(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	140,327					
	2	Check ▶ if the foundation is not required to attach Sch B						<u> </u>
	3	Interest on savings and temporary cash investments	12,249		12,249		249	
	4	Dividends and interest from securities	37,729	<u> </u>	37,729	37,	729	
	5a	Gross rents	 -					U 9 4 2018 15
Ē	6a	Net rental income or (loss)	128,540			507		1 2 4 2018 12
ē	b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,204,764						
Revenue	7	Capital gain net income (from Part IV, line 2)		1:	28,540		0 (N, UT
_	8	Net short-term capital gain				38,	697	-
	9	Income modifications						
	10a	Gross sales less returns and allowances						,
	Ь	Less Cost of goods sold						/
	С	Gross profit or (loss) (attach schedule)						, <u></u>
	11	Other income (attach schedule)		<u> </u>	. 			
	12	Total. Add lines 1 through 11	318,845	1	78,518	88,	675	<u> </u>
es	13	Compensation of officers, directors, trustees, etc	0 25 25 2		0 007		000	05 01 0
Expenses	14	Other employee salaries and wages	33,350		8,337	8,	337 653	25,013
g	15 16a	Pension plans, employee benefits	2,541		653		653	1,888
Û	b	Legal fees (attach schedule) Accounting fees (attach schedule) Stmt 1	3,200		800	· · · · · · · · · · · · · · · · · · ·	800	2,400
<u>ĕ</u> .	C	Other professional fees (attach schedule)	3,200				000	2,100
rat	17	Interest						
ist	18	Taxes (attach schedule) (see instructions)						
를	19	Depreciation (attach schedule) and depletion Stmt 2						
ģ	20	Occupancy	15,201		3,800	3,	800	11,401
Þ	21	Travel, conferences, and meetings						
a E	22	Printing and publications	<u>.</u>			L		
, D	23	Other expenses (att sch) Stmt 3	42,995	:	10,747	10,	747	32,248
" ′ ati	24	Total operating and administrative expenses.					00=	
Operating and Administrative		Add lines 13 through 23	97,287		24,337	24,	337	72,950
Ŋŏ	25	Contributions, gifts, grants paid	91,000		24 227		227	91,000
-	26	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12	188,287	 	24,337	24,	337	163,950
圆	a	Excess of revenue over expenses and disbursements	130,558	1				
	b	Net investment income (if negative, enter -0-)	150,550		54,181			
4	C	Adjusted net income (if negative, enter -0-)		<u> </u>	,	64.	338	
_	Paper	work Reduction Act Notice, see instructions.		2011				Form 990-PF (2016)

ı	Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-user amounts only (See instructions.)	Beginning of year	End of	year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1	Cash – non-interest-bearing	128,293		
	2	Savings and temporary cash investments		253,080	253,080
١	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
1	4	Pledges receivable ▶			1
١		Less allowance for doubtful accounts ▶	L		
l	5	Grants receivable			
1	6	Receivables due from officers, directors, trustees, and other			
١		disqualified persons (attach schedule) (see		1	
Į		instructions)			
١	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶ 0		_	
গ্ৰ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments – U.S. and state government obligations (attach schedule)			
-	b	Investments – corporate stock (attach schedule) See Stmt 4	1,625,602	1,648,771	2,109,160
1	С	Investments – corporate bonds (attach schedule) See Stmt 5		186,888	186,600
l	11	Investments – land, buildings, and equipment basis			
- 1		Less accumulated depreciation (attach sch.) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) See Statement 6	804,462	768,427	764,870
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.) ▶		1	
	15	Other assets (describe ▶			
l	16	Total assets (to be completed by all filers – see the			
		instructions Also, see page 1, item I)	2,558,357	2,857,166	3,313,710
	17	Accounts payable and accrued expenses			
	18	Grants payable			ı
ie.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ia.	21	Mortgages and other notes payable (attach schedule)			1
~	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	•
Se		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted	2,558,357	2,857,166	
띎	25	Temporarily restricted			
8	26	Permanently restricted			
Net Assets or Fund Bala		Foundations that do not follow SFAS 117, check here			
띤		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds			
ĕ	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Š	29	Retained earnings, accumulated income, endowment, or other funds			
늄	30	Total net assets or fund balances (see instructions)	2,558,357	2,857,166	
Ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	2,558,357	2,857,166	
	Part I	Analysis of Changes in Net Assets or Fund Balances			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30 (mu	st agree with	I	_
	end-c	of-year figure reported on prior year's return)		1	2,558,357
		amount from Part I, line 27a		2	130,558
3	Other	r increases not included in line 2 (itemize) ▶ See Statement 7		3	168,251
4	Add I	ines 1, 2, and 3		4	2,857,166
5	Decre	eases not included in line 2 (itemize)		5	
_6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,857,166
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Form 990-PF (2016) JAMES F. BYRNES FOUNDATION Page 3 Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold (c) Date acquired - Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo_day, yr) (mo, day, yr) D - Donation See Worksheet 1a b C d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) а b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (f) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) (i) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any а þ Ç d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 128,540 If (loss), enter -0- in Part I, line 7 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- in 38,697 Part I, line 8 Part V 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) If section 4940(d)(2) applies, leave this part blank N/A Yes Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part 1 Enter the appropriate amount in each column for each year, see the instructions before making any entries (d) Distribution ratio Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) (col (b) divided by col (c)) 2015 2014 2013 2012 2011 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 Multiply line 4 by line 3 5 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 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 instructions

4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"

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

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X

9

complete Part XIV

names and addresses

Form 990-PF (2016) JAMES F. BYRNES FOUNDATION **~***4756 Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the X meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) X 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no ▶ 803-254-9325 The books are in care of KENYA WHITE 14 2711 MIDDLEBURG DRIVE # 314 ZIP+4 ▶ 29204 Located at COLUMBIA SC Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here 15 ▶ | 15 | and enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority Yes No 16 X over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year did the foundation (either directly or indirectly) X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No X (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? No Yes X (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after X termination of government service, if terminating within 90 days) Yes No If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that N/A were not corrected before the first day of the tax year beginning in 2016? 1c Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and X No 6e, Part XIII) for tax year(s) beginning before 2016? Yes , 20 If "Yes," list the years ▶ 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to N/A all years listed, answer "No" and attach statement - see instructions) 2b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 . 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No Yes at any time during the year? If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or

disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

foundation had excess business holdings in 2016)

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X

X

3b

4a

N/A

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Pa	rt VII-B Statements Regarding Activities for Which Form	4720 May Be F	Required (con	tinued)		
5a	During the year did the foundation pay or incur any amount to					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?	<u> </u>	res 🗓 No		
	(2) Influence the outcome of any specific public election (see section 4955), or to	o carry on,				
	directly or indirectly, any voter registration drive?	•		res X No	1	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			res 🗓 No		
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in			1	
	section 4945(d)(4)(A)? (see instructions)			res 🗓 No	Ì	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational	٠ لــا			
	purposes, or for the prevention of cruelty to children or animals?	555551151141		res X No	[,
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify unde	or the excentions d		110	Ĭ	
~	Regulations section 53 4945 or in a current notice regarding disaster assistance	•		N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check he	•				- -
_						
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	m the tax	N/A 🗌		İ	
	because it maintained expenditure responsibility for the grant?		N/A	∕es ∐ No	ļ	
_	If "Yes," attach the statement required by Regulations section 53 4945–5(d)					
ба	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums	┌ .	. 👽	1	
	on a personal benefit contract?			res 🗓 No		3.5
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	ract?		6b	X
_	If "Yes" to 6b, file Form 8870		r	. 🖼		٠ ا
	At any time during the tax year, was the foundation a party to a prohibited tax shi			res X No		}
_	If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b	
Pa	irt VIII Information About Officers, Directors, Trustees, Fo	undation Man	iagers, Hignly	Paid Employ	ees,	
	and Contractors	-41	41 >			
1 -	ist all officers, directors, trustees, foundation managers and their compens.	ation (see instruc	tions).		· · · · · · ·	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
Se	e Statement 8			-		
2	Compensation of five highest-paid employees (other than those included o "NONE."	n line 1 – see ins	tructions). If non	e, enter		
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
NO	NE					
,						
						
						
ota	number of other employees paid over \$50,000	i	<u> </u>	<u> </u>		0

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Part VIII	Information About Officers, Directors, Trustees, For and Contractors (continued)	undation Managers, Highly Paid	Employees,
3 Five high	est-paid independent contractors for professional services (see in	structions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		į	
otal number o	f others receiving over \$50,000 for professional services		>
Part IX-A	Summary of Direct Charitable Activities		
	's four largest direct chantable activities during the tax year. Include relevant statistical information other beneficianes served, conferences convened, research papers produced, etc.	tion such as the number of	Expenses
1 EDUCA	ATION		
2			
			1
3			
4			
5 (1) 5		,	<u> </u>
Part IX-B	Summary of Program-Related Investments (see in		Т
1 N/A	argest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
1 M/A			
2			
-			}
All other program-	related investments. See instructions		
3			
			1
Total. Add lines	1 through 3	<u> </u>	

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

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn foundatio	ns,
	see instructions)		<u> </u>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	1	0
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 0		
_	· · · · · · · · · · · · · · · · · · ·	1 1	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	<u> </u>
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see	1.1	0
_	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	
6_	Minimum investment return. Enter 5% of line 5	[6]	0
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	g roundations	3
	and certain foreign organizations check here ▶X and do not complete this part.)	 	
1	Minimum investment return from Part X, line 6	1 1	
2a	Tax on investment income for 2016 from Part VI, line 5	- 1	
b	Income tax for 2016 (This does not include the tax from Part VI)	4 !	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	_
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	<u> 163,950</u>
b	Program-related investments – total from Part IX-B	1b	·
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	163,950
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	163,950
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	dation	

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<u>P</u>	rt XIII Undistributed Income (see instructions))			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
_	line 7				
2	Undistributed income, if any, as of the end of 2016				•
_	Enter amount for 2015 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2016				
	From 2011				
	From 2012				
-	From 2013				
_	From 2014				
e	From 2015				
f	Total of lines 3a through e				
4	Qualifying distributions for 2016 from Part XII,				
	line 4 ▶ \$163,950				
	Applied to 2015, but not more than line 2a				
þ	Applied to undistributed income of prior years				
	(Election required – see instructions)	-			<u> </u>
C	Treated as distributions out of corpus (Election				}
	required – see instructions)				
d	Applied to 2016 distributable amount				
е	Remaining amount distributed out of corpus	163,950		<u></u>	
5	Excess distributions carryover applied to 2016				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				Ì
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	163,950			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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			<u> </u>	
a	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount – see				
	Instructions			· - · · · · · · · · · · · · · · · · · ·	<u> </u>
T	Undistributed income for 2016 Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2017.				İ
7					
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)	İ			
9	Excess distributions carryover to 2017.				
5	Subtract lines 7 and 8 from line 6a				}
ın	Analysis of line 9				
10	Excess from 2012	ļ			1
a	Excess from 2013	ļ			ļ
b	Excess from 2014				
C C	Excess from 2014 Excess from 2015				
d	Excess from 2016]
-	LAUGAA HUHI ZUTU	1			

Pa	ert XIV Private Operating Fo	undations (see in	structions and Pa	rt VII-A, question 9	9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private operat	ting		
	foundation, and the ruling is effective for	2016, enter the date of	f the ruling	•		N/ <i>I</i>
b	Check box to indicate whether the found	ation is a private opera	iting foundation descri	bed in section X 49	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tabel
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for					
	each year listed	0	33,634	36,521	45,824	115,979
b	85% of line 2a		28,589		38,950	98,582
С	Qualifying distributions from Part XII					
	line 4 for each year listed	163,950	145,431	141,089	153,696	604,166
d	Amounts included in line 2c not used directly					<u> </u>
	for active conduct of exempt activities		,			
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c	163,950	145,431	141,089	153,696	604,166
3	Complete 3a, b, or c for the		2307131	//		
	alternative test relied upon.					
а	"Assets" alternative test – enter.					•
•	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	1				
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed		91,827	93,867	90,537	276,231
^	-		91,627	33,807	30,337	210,231
C	"Support" alternative test – enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					L
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in	n				
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization				L 	
	(4) Gross investment income		41-1		105.000	
Pa	art XV Supplementary Inform			the foundation h	ad \$5,000 or moi	e in assets at
	any time during the y		tions.)			
1	Information Regarding Foundation Ma	•				
а	List any managers of the foundation who				•	
	before the close of any tax year (but only	of they have contribute	ed more than \$5,000)	(See section 507(d)(2)).)	
	N/A		 			
ь	List any managers of the foundation who		•		portion of the	
	ownership of a partnership or other entity	r) of which the foundat	ion has a 10% or great	ter interest		
	N/A					
2	Information Regarding Contribution, C					
	Check here ► X if the foundation only					
	unsolicited requests for funds If the foun		ants, etc (see instructi	ons) to individuals or o	organizations under	
	other conditions, complete items 2a, b, c					
а	The name, address, and telephone number				addressed	
	THE JAMES F. BRYNES	FOUNDATION	803-254-93	25		
	2711 MIDDLEBURY STRE	ET COLUMBIA	A SC 29204			
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include:		
	See Statement 9		 			
С	Any submission deadlines					
-	March 15					
đ	Any restrictions or limitations on awards,	such as by geographi	cai areas, charitable fi	elds, kinds of institutio	ns, or other	
	factors 10					
	See Statement 10					

Form 990-PF (2016) JAMES F. BYRNES FOUNDATION

Total Agaroved for future payment Notal Approved for future payment Notal Notal Approved for future payment Notal Notal Approved for future payment Notal Approved for future payment Notal Not	Part XV Supplementary Information (co	ontinued)			
Name and address (home or business) a Paid during the year See Statement 11 Total b Approved for future payment N/A	3 Grants and Contributions Paid During the	e Year or Approved for F	uture Payment		
Name and address (home of business) or substants conceptor a Paid turn for year See Statement 11 Jotal Approved for future payment N/A		show any relationship to	status of		Amount
Total Approved for huture payment N/A 1000		or substantial contributor	recipient		
b Approved for future payment N/A	Recipient Name and address (home or business) a Paid dunng the year	e Year or Approved for F If recipient is an individual, show any relationship to any foundation manager	Foundation status of		Amount
Total 3b	Total b Approved for future payment N/A				91,000
	Total			▶ 3h	

	Analysis of Income-Producing A					
Enter gross amo	ounts unless otherwise indicated	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program se	rvice revenue			- Coule		(See instructions)
a		_				
b		_		1		
c		_		11		
d						
e						
f						
g Fees ar	d contracts from government agencies			7		
2 Membership	dues and assessments					
3 Interest on	savings and temporary cash investments			14	12,249	
	nd interest from securities			14	37,729	
5 Net rental in	come or (loss) from real estate.			1		
	anced property			1		
	t-financed property			1		
	come or (loss) from personal property					
7 Other invest				- 		
	s) from sales of assets other than inventory			14	132	128,408
	or (loss) from special events			+		
	or (loss) from sales of inventory			 		
	ue a			+		
		-		1		
		-		++		
ď	 	-		 		
		-		++		
	d columns (b) (d) and (c)	-		0	50,110	128,408
	d columns (b), (d), and (e)	L		011		
	ne 12, columns (b), (d), and (e)				13	178,518
Part XVI-B	in line 13 instructions to verify calculations) Relationship of Activities to the	Accomplish	ant of Evament	Durnage		
						
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur					una \
N/A	accomplishment of the roundation's exempt pur	poses (other than	by providing futius i	or such pu	rposes) (See instruction	115 /
						
						

WESTBARNE 06/16/20	118 3 07 PM						
orm 990-PF (20	16) JAMES F.	BYRNE	S FOUNDATION	**-***4756		Pag	ge 13
Part XVII	_	_	ransfers To and Transacti	ons and Relationships With Nonchar	itable		
	Exempt Organiz					· · · ·	
=			ge in any of the following with any	-		Yes	No
		er tnan secti	on 501(c)(3) organizations) or in s	ection 527, relating to political	i	} :	
organization		lation to a n	oncharitable exempt organization	-¢.			
(1) Cash	on the reporting round	ialion to a ni	onchantable exempt organization (or.	4-(4)		x
(1) Casii (2) Other a	ecote				1a(1) 1a(2)		X
b Other trans					14(2)		-
	of assets to a noncharit	able exempt	organization		1b(1)		X
	ses of assets from a no				1b(2)		X
	of facilities, equipment		•		1b(3)	-	X
	rsement arrangements				1b(4)		X
(5) Loans	or loan guarantees				1b(5)		X
	-	embership o	r fundraising solicitations		1b(6)		X
c Sharing of f	facılıties, equipment, m	ailing lists, d	other assets, or paid employees		1c		X
d If the answe	er to any of the above i	s "Yes," con	nplete the following schedule Colu	ımn (b) should always show the fair market	<u> </u>		
value of the	goods, other assets, o	or services g	oven by the reporting foundation. I	f the foundation received less than fair market			
value in any	transaction or sharing	arrangeme	nt, show in column (d) the value o	f the goods, other assets, or services received			
(a) Line no	(b) Amount involved	(c) Nam	e of noncharitable exempt organization	(d) Description of transfers, transactions, and shar	ing arrangeme	nts	
N/A	<u> </u>			<u> </u>			
		}		-			
							
	 	 		 			
		 		 			
	 	 		 			
		 			•		
	 	 		 			
	 	 		 			
	 	 		 			
	, 	ļ ———		<u> </u>			
	1						
	Ţ	1					
2a Is the found	lation directly or indirec	tly affiliated	with, or related to, one or more ta	x-exempt organizations			
described in	n section 501(c) of the	Code (other	than section 501(c)(3)) or in section	on 527?	Ye	es X	No
b If "Yes," cor	nplete the following sc	hedule					
	a) Name of organization		(b) Type of organization	(c) Description of relationship			
N/A			ļ	<u> </u>			
			 	 			
			i .	J.			

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		
Under penalties of perjury, I declare that I have exami correct, and complete Declaration of preparer (other	ned this return, including accompanying school than taxpayer) is based on all information of	edules and statements, and to the best of my knowledge and belief, it is true,

Sign
Here

Signature of officer or trustee

Preparer's signature

May the IRS discuss this return with the preparer shown below (see instructions)? Yes DIRECTOR

Print/Type preparer's name

Firm's address ▶

DANIEL J EMANUEL

Date	Check X n
l .	self-employed

Paid Preparer Use Only

DANIEL J EMANUEL Firm's name

Brown & Emanuel CPAs, LLC 721 Lowndes Hill Rd Ste C Greenville, SC 29607-2150

06/16/18 PTIN **-***4119 Firm's EIN ▶

864-271-9241 Phone no Form 990-PF (2016) Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

Employer identification number

2016

JAMES F. BY	RNES FOUNDATION	**-***4756
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foun	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion
	501(c)(3) taxable private foundation	
Note: Only a section 501(instructions	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and	i a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instruction contributions.	_
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ond that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1)
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re the year, total contributions of more than \$1,000 exclusively for religious, cha onal purposes, or for the prevention of cruelty to children or animals. Complet	arıtable, scientific,
contributor, during contributions total during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that resist the year, contributions exclusively for religious, charitable, etc., purposes, but ed more than \$1,000. If this box is checked, enter here the total contributions or an exclusively religious, charitable, etc., purpose. Don't complete any of the office to this organization because it received nonexclusively religious, charitable more during the year.	ut no such that were received parts unless the
Caution: An organization	that isn't covered by the General Rule and/or the Special Rules doesn't file So	chedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Page 1 of 1

Name of organization JAMES F. BYRNES FOUNDATION

Employer identification number **-***4756

Part I	Contributors (See instructions). Us	se duplicate copies of F	Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP	+ 4	(c) Total contributions	(d) Type of contribution
1	BARRON VAUGHAN 2221 ELLIS WALK DRIVE MARIETTA	GA 30064	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	•	(c)	(d)
2 2	Name, address, and ZIP WILLIAM E ROWE 1105 CONCORD STREET CHATTANOOGA	TN 37405	Total contributions \$ 6,330	Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP		(c) Total contributions	(d) Type of contribution
NO.	ivalite, address, and Eli		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP	+4	(c) Total contributions	(d) Type of contribution
NO.	ivalite, address, and zir		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP	1.4	(c) Total contributions	(d) Type of contribution
No.	riaine, address, and ZiP		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP	+4	(c) Total contributions	(d) Type of contribution
140.	ivaine, audiess, and zir	; 	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Form 990-PF	Capital Gains and Losses	for Tax on Investment In	i	2016
	alendar year 2016, or tax year beginning	07/01/16 , and ending	06/30/17	
Name			Employer Ider	tification Number
JAMES F. BYRNES	S FOUNDATION		**-**4	756
(a) List and de	escribe the kind(s) of property sold, e.g., real estate, ick warehouse, or common stock, 200 shs MLC Co	(b) How acquired P-Purchase O-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) STCG A/C 5390		P	08/01/16	11/28/16
(2) LTCL A/C 5390		P	08/01/15	11/28/16
(3) STCG A/C 5564		P	08/01/16	03/01/17
(4) LTCG A/C 5564 (5) MISC STCG A/C		P	08/01/15	03/01/17
(5) MISC STCG A/C (6) STCG A/C 533:			08/01/16	03/01/17
(7) LTCG A/C 533:		P	08/01/15	03/01/17
(8) WELLS FARGO	A/C 5333			
	A/C 5390			
	A/C 5564		ļ	
(11)			 	
(12) (13)			 	
(14)			 	
(15)				
·				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain (e) plus (f)	
(1) 23,119		23,004		115
(2) 27,799		27,958		<u>-159</u>
$\frac{(3)}{(4)}$ $\frac{316}{7,251}$	-	300 6,818	+	<u>16</u> 433
$ \begin{array}{ccc} (4) & 7,251 \\ (5) & 25,171 \end{array} $		6		25,165
(6) 443,545		430,144		13,401
(7) 677,431		587,994		89,437
(8)				
(9) 8				8
(10) 124				124
(11)				
(12)				
(14)		 		
(15)				
	nowing gain in column (h) and owned by the fo	oundation on 12/31/69		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (Co col (k), but not les Losses (from	(h) gain minus is than -0-) Of icol (h))
(1)				115
(2)		ļ ————————————————————————————————————	 	<u>-159</u>
(3)	- 	 		16
<u>(4)</u>				433 25,165
(5) (6)				13,401
(7)		 		89,437
(8)			 	
(9)				8
(10)				124
(11)				
(12)				· ———
(13)			 	
(14)				
(15)	1	L		

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JAMESFBARNE JAMES F. BYRNES FOUNDATION **-***4756

FYE: 6/30/2017

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description		Total	Inve	Net nvestment	Ad	Adjusted Net	0"	haritable Purpose
	တ	3,200	৵	800	ഗ	800	ჯ	2,400
Total	w W	3,200	w	800	φ	800	က က	2,400

JAMESFBARNE JAMES F. BYRNES FOUNDATION Federal Statements

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FYE: 6/30/2017

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Charitable Purpose	\$ 3,632 435 574 3,511	1, 10,	\$ 32,248	Fair Market	\$ 2,109,160 \$ 2,109,160		Fair Market Value	\$ 186,600 \$ 186,600
Adjusted Net	1,211 145 192 1,170	3,639 1,843	10,747	Investments Basis of	Cost	Investments	Basis of Valuation	Cost
Net Investment	1,211 \$ 145 192 1,170	13 9 5 5 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10,747 \$	-PF, Part II, Line 10b - Corporate Stock Investments Beginning End of Basis of	\$ 1,648,771	0c - Corporate Bond	End of Year	\$ 186,888
Total	\$ 4,843 \$ 580 766 4,681	, 306 , 662 , 557 , 371	\$ 42,995	n 990-PF, Part II, Line 1 Beginning	\$ 1,625,602 \$ 1,625,602	Statement 5 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments	Beginning of Year	\$ \$
Description	ONS FEE APPLICATION PROCESS	STUDENT FALL DINNER STUDENT LUNCHEON STUDENT SUPPER WEEKEND TRAVEL & MEETINGS	Total	Statement 4 - Form 990.	WACHOVIA SECURITIES 5333	Statement 5 - Forr	Description	WELLS FARGO CORPORATE BONDS Total

AMESFBARNE JAMES F. BYRNES FOUNDATION	Fede	
JAMESFBARNE JAMES	**-**4756	FYE: 6/30/2017

Federal Statements

6/12/2018 2:37 PM

Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments

Fair Market Value	\$ 542,051 61,190 161,629 \$ 764,870	
Basis of Valuation	Cost Cost Cost Cost	
End of Year	546,492 64,457 157,478 768,427	
	v v	
seginning of Year	569,744 68,528 159,370 6,820 804,462	
ш	w w	
Description	WELLS FARGO 5333 FIXED INC SEC WELLS FARGO 5333 MUTUAL FUNDS WELLS FARGO 5390 MUTUAL FUNDA WELLS FARGO 5564 MUTUAL FUNDS	

JAMESFBARNE JAMES F. BYRNES FOUNDATION **-***4756 FYE: 6/30/2017	Fe	deral Statements		/9	6/12/2018 2:37 PM
Statement 8 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	-PF, Part VIII, Line 1	- List of Offi	cers, Directors, Trı	ustees, Etc.	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
LOIS H. ANDERSON 210 SADDLEBROOK LANE HOPKINS SC 29061	DIRECTOR	4.00	0	0	0
WILLIAM E. ROWE 1105 CONCORD STREET CHATTANOOGA TN 37405	DIRECTOR	4.00	0	0	0
RORY PRIESTER 2670 RIVERS EDGE DRIVE NE ATLANTA GA 30324	DIRECTOR	4.00	0	0	0
DEVER MCCRAW 147 COUNTRY LAKES ROAD EASLEY SC 29642	DIRECTOR	4.00	0	0	0
DAL H. POSTON 14926 MIDDLETHROPE DRIVE HUNTERSVILLE NC 28078	PRESIDENT	4.00	0	0	0
PAM MCELVEEN 3382 WOODSTOCK LANE MURRELLS INLET SC 29576	VICE PRESIDE	4.00	0	0	0
KRISTINE HOBBS 203 FOREST DRIVE LEXINGTON SC 29072	DIRECTOR	4.00	0	0	0
JAMIE ROADES 500 B NORTH POPULAR CHARLOTTE NC 28202	TREASURER	4.00	0	0	0
MIKE ALLS 113 IVY WOODS DR EASLEY SC 29642	DIRECTOR	4.00	0	0	0
CARRIE PERGERSON	DIRECTOR	4.00	0	0	0
					8

JAMESFBARNE JAMES F. BYRNES FOUNDATION **-**4756 FYE: 6/30/2017	T. O	deral Statements	<u>s</u>	•	6/12/2018 2:37 PM
Statement 8 - Form 990-PF,	Par	ine 1 - List of	t VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)	s, Trustees,	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
409 SUMMERWALK SIMPSONVILLE SC 29681					
RYAN SNEED 107 OLD DISTILLERY ROAD HENDERSONVILLE NC 28739	DIRECTOR	4.00	0	0	0
					α

-*4756

Federal Statements

FYE: 6/30/2017

Statement 9 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

- 1. Applicant must be an orphan or half orphan (one or both parents deceased)
- 2. Application must be submitted at the end of the fall term. Deadline for filing is March 15, no exceptions.
- 3. Application must be completed by applicant not parent or teacher/counselor.
- 4. High school students: Have a transcript sent by your your school including fall term grades for your senior college board scores and rank in your class. College students: Have a transcript sent by the registrar, including fall term grades and have a Transcript sent from your high school.
- 5. Attach a recent photograph to the application.
- 6. Complete all blanks. Write non where necessary.
- 7. Give complete and accurate information regarding finances, including annual income (for the family) as well information you feel will help in determing need. The more information furnished, the quicker a determination can be made in your case.
- 8. Write a brief autobiography, including a description of your educational and career objectives.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

March 15

Statement 10 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

Scholarship awards are limited to orphans or half orphans, one or both parents deceased.

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JAMESFBARNE JAMES F. BYRNES FOUNDATION **_***4756 FYE: 6/30/2017

Federal Statements

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the

Name		Ad	Address			
Address	Rela	Relationship	Status		- Purpose	Amount
CHARLESTON SOUTHERN UNIVERSITY		OFFICE OF F	[AL	AID		
NORTH CHARLESTON SC 29406 NONE			ACTIVE	EDUCATION		3,500
CLEMSON UNIVERSITY		OFFICE OF F	FINANCIAL A	AID		
CLEMSON SC 29634	NONE	A,	ACTIVE	EDUCATION		26,250
FRANCIS MARION		OFFICE OF F	FINANCIAL A	AID		
FLORENCE SC 29506	NONE	ď	ACTIVE	EDUCATION		2,000
METHODIST UNIVERSITY		OFFICE OF F	AL	AID		
FAYETTEVILLE NC 28311	NONE	ď	ACTIVE	EDUCATION		3,500
NORTH GREENVILLE UNIVERSITY		OFFICE OF F	AL	AID		
TIGERVILLE SC 29688	NONE	æ	ACTIVE	EDUCATIOIN		8,750
PRESBYTERIAN COLLEGE		OFFICE OF F	FINANCIAL A	AID		
CLINTON SC 29325	NONE			EDUCATION		1,000
THE CITADEL		OFFICE OF F	FINANCIAL A	AID		
CHARLESTON SC 29404	NONE	ď	ACTIVE	EDUCATION		7,000
USC AIKEN		OFFICE OF F	FINANCIAL A	AID		
AIKEN SC 29801	NONE	₹.	ACTIVE	EDUCATION		3,500
USC COLUMBIA		OFFICE OF F	FINANCIAL A	AID		
COLUMBIA SC 29208	NONE	ď	ACTIVE	EDUCATION		10,500
WINTHORP UNIVERSITY		OFFICE OF F	FINANCIAL A	AID		
ROCKHILL SC 29733	NONE	A,	ACTIVE	EDUCATION		3,500
WOFFORD UNIVERSITY		OFFICE OF F.	AL	AID		
SPARTANBURG SC 29303	NONE	K.	ACTIVE	EDUCATION		3,500
USC UPSTATE	•	OFFICE OF F	FINANCIAL A	AID		
SPARTANBURG SC 29303	NONE	Ą	ACTIVE	EDUCATION		3,500
FURMAN UNIVERSITY		OFFICE OF F	FINANCIAL A	AID		
GREENVILLE SC 29615	NONE	e.	ACTIVE	EDUCATION	'	3,500
Total					"	91,000

7