

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2017)

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 MISSION OF THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA IS TO ENCOURAGE AND PROMOTE PHILANTHROPY THROUGH EDUCATION, RESPONSIBLE MANAGEMENT OF CHARITABLE CONTRIBUTIONS AND THE DISTRIBUTION OF THESE FUNDS, AND TO PROVIDE THE STRUCTURE FOR THIS TO BE ACCOMPLISHED BY INDIVIDUALS, COMPANIES, PRIVATE FOUNDATIONS AND ORGANIZATIONS

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 \$ 7,418,717 including grants of \$ 7,374,925) (Revenue \$) |
| | See Additional Data |

| | |
|-----------|---|
| 4b | (Code) (Expenses \$ including grants of \$) (Revenue \$) |
|-----------|---|

| | |
|-----------|---|
| 4c | (Code) (Expenses \$ including grants of \$) (Revenue \$) |
|-----------|---|

| | | |
|-----------|--|---|
| 4d | Other program services (Describe in Schedule O) | (Expenses \$ including grants of \$) (Revenue \$) |
|-----------|--|---|

| | | |
|-----------|----------------------------------|-----------|
| 4e | Total program service expenses ▶ | 7,418,717 |
|-----------|----------------------------------|-----------|

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)? <i>If "Yes," complete Schedule A</i> | 1 Yes | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? | 2 | No |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i> | 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? <i>If "Yes," complete Schedule C, Part III</i> | 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? <i>If "Yes," complete Schedule D, Part I</i> | 6 Yes | |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | 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? <i>If "Yes," complete Schedule D, Part IV</i> | 9 | No |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | 10 Yes | |
| 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? <i>If "Yes," complete Schedule D, Part VI</i> | 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? <i>If "Yes," complete Schedule D, Part VII</i> | 11b Yes | |
| 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? <i>If "Yes," complete Schedule D, Part VIII</i> | 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? <i>If "Yes," complete Schedule D, Part IX</i> | 11d | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | 11e Yes | |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | 11f Yes | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | 12a | No |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | 12b | No |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> | 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> | 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> | 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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i> | 18 | No |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | 19 | No |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|--|-----|----|
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |
| 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? <i>If "Yes," complete Schedule I, Parts I and II</i> | 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? <i>If "Yes," complete Schedule I, Parts I and III</i> | | No |
| 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? <i>If "Yes," complete Schedule J</i> | | 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | | No |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| 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? | | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 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? <i>If "Yes," complete Schedule L, Part I</i> | | 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? <i>If "Yes," complete Schedule L, Part I</i> | | 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? <i>If "Yes," complete Schedule L, Part II</i> | | 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? <i>If "Yes," complete Schedule L, Part III</i> | | 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? <i>If "Yes," complete Schedule L, Part IV</i> | | No |
| b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | | 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? <i>If "Yes," complete Schedule L, Part IV</i> | | No |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | | No |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | | No |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | | No |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | | 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? <i>If "Yes," complete Schedule R, Part I</i> | | No |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | Yes | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | 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? <i>If "Yes," complete Schedule R, Part VI</i> | | 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 | 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 | 1a2 | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | 1b0 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | |
| 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 | 2a7 | | |
| 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 | | No |
| 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 | | |
| 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 | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 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 | | |
| 9a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 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 | | |
| 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 | | |
| 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 | 22 | |
| | 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 | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 22 | |
| 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? | Yes | |
| 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? | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | No |
| 6 | Did the organization have members or stockholders? | | 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? | Yes | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a | The governing body? | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 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. | | 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? | | 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? | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 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. | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 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. | Yes | |
| 13 | Did the organization have a written whistleblower policy? | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 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 | Yes | |
| b | Other officers or key employees of the organization | 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? | | 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? | | |

Section C. Disclosure

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

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:
 ▶ SHELL K BERRY 1450 GREENE STREET SUITE 228 AUGUSTA, GA 30901 (706) 724-1314

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) | | | | | | (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 |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) ABRAM SEROTTA BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (2) BARRY L STOREY BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (3) BRAYE C BOARDMAN BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (4) BRIAN J MARKS BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (5) C LAFAYE HARGROVE BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (6) CHARLES PETE CAYE JR BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (7) R LEE SMITH JR BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (8) CLAYTON P BOARDMAN III BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (9) DUNCAN N JOHNSON JR BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (10) E G MEYBOHM BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (11) H M OSTEN JR BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (12) JAMES B TROTTER BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (13) JAMES J BERNSTEIN BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (14) JAMES M HULL BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (15) KENNETH USRY BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (16) MASON H MCKNIGHT III BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (17) N TURNER SIMKINS BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |

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 (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (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 |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (18) RUSSELL V MOBLEY ESQ BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (19) SUSAN NICHOLSON BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (20) THOMAS M BLANCHARD JR BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (21) WILLIAM H TUCKER BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (22) ZACK O DAFFIN BOARD OF DIRECTORS | 1 00 | X | | | | | | 0 | 0 | 0 |
| (23) SHELL KNOX BERRY PRESIDENT/CEO | 40 00 | | | X | | | | 113,300 | 0 | 0 |
| (24) KELLY D MERCIER DIR OF FINANCE/ADMIN | 40 00 | | | X | | | | 64,375 | 0 | 0 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Sub-Total | | | | | | | | | | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | | | |
| d Total (add lines 1b and 1c) | | | | | | | | 177,675 | 0 | 0 |

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 ► 1

| | 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 | | 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 | | 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 | | 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 ☐

Contributions, Gifts, Grants
and Other Similar Amounts

| | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---|----------------------|--|---|--|
| 1a Federated campaigns | 1a | | | |
| b Membership dues | 1b | | | |
| c Fundraising events | 1c | | | |
| d Related organizations | 1d | | | |
| e Government grants (contributions) | 1e | | | |
| f All other contributions, gifts, grants, and similar amounts not included above | 1f | 5,491,905 | | |
| g Noncash contributions included in lines 1a-1f \$ | | | | |
| h Total. Add lines 1a-1f | | 5,491,905 | | |

Program Service Revenue

| | Business Code | | | |
|--|---------------|--|--|--|
| 2a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| f All other program service revenue | | | | |
| g Total. Add lines 2a-2f | | | | |

Other Revenue

| | | | | | |
|--|----------------|---------------|---------|---|------------|
| 3 Investment income (including dividends, interest, and other similar amounts) | | 885,377 | | | 885,377 |
| 4 Income from investment of tax-exempt bond proceeds | | | | | |
| 5 Royalties | | | | | |
| 6a Gross rents | (i) Real | (ii) Personal | | | |
| | 224,533 | | | | |
| b Less rental expenses | 79,525 | | | | |
| c Rental income or (loss) | 145,008 | | | | |
| d Net rental income or (loss) | | 145,008 | | | 145,008 |
| 7a Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | |
| | 21,130,863 | | | | |
| b Less cost or other basis and sales expenses | 22,651,028 | | | | |
| c Gain or (loss) | -1,520,165 | | | | |
| d Net gain or (loss) | | -1,520,165 | | | -1,520,165 |
| 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 | | | | | |
| 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 | | | | | |
| 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 | | | | | |
| Miscellaneous Revenue | Business Code | | | | |
| 11a DONOR ADMINISTRATIVE FEES | 900099 | 231,817 | 231,817 | | |
| b | | | | | |
| c | | | | | |
| d All other revenue | | | | | |
| e Total. Add lines 11a-11d | | 231,817 | | | |
| 12 Total revenue. See Instructions | | 5,233,942 | 231,817 | 0 | -489,780 |

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 ☐

| | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | | | |
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21. | 7,374,925 | 7,374,925 | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22. | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16. | | | | |
| 4 Benefits paid to or for members. | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees. | 177,675 | | 177,675 | |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). | | | | |
| 7 Other salaries and wages. | 141,525 | 27,715 | 113,810 | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). | | | | |
| 9 Other employee benefits. | | | | |
| 10 Payroll taxes. | 19,561 | | 19,561 | |
| 11 Fees for services (non-employees): | | | | |
| a Management. | | | | |
| b Legal. | | | | |
| c Accounting. | 25,391 | | 25,391 | |
| d Lobbying. | | | | |
| e Professional fundraising services. See Part IV, line 17. | | | | |
| f Investment management fees. | 390,022 | 16,077 | 373,945 | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O). | | | | |
| 12 Advertising and promotion. | 6,898 | | 6,898 | |
| 13 Office expenses. | 8,860 | | 8,860 | |
| 14 Information technology. | | | | |
| 15 Royalties. | | | | |
| 16 Occupancy. | 49,153 | | 49,153 | |
| 17 Travel. | 908 | | 908 | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. | | | | |
| 19 Conferences, conventions, and meetings. | | | | |
| 20 Interest. | | | | |
| 21 Payments to affiliates. | | | | |
| 22 Depreciation, depletion, and amortization. | 3,256 | | 3,256 | |
| 23 Insurance. | 5,284 | | 5,284 | |
| 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 DUES AND SUBSCRIPTIONS | 20,099 | | 20,099 | |
| b TRAINING AND CONFERENCE | 596 | | 596 | |
| c FEES AND LICENSES | 232 | | 232 | |
| d | | | | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e. | 8,224,385 | 7,418,717 | 805,668 | 0 |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance SheetCheck 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 | | | 1 | |
| | 2 | Savings and temporary cash investments | | 2,550,347 | 2 | 812,298 |
| | 3 | Pledges and grants receivable, net | | | 3 | |
| | 4 | Accounts receivable, net | | 18,829 | 4 | 0 |
| | 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 | |
| | 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 | |
| | 7 | Notes and loans receivable, net | | | 7 | |
| | 8 | Inventories for sale or use | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 9 | |
| | 10a | Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D | 10a | 94,878 | | |
| | b | Less: accumulated depreciation | 10b | 78,760 | 14,176 | 10c 16,118 |
| | 11 | Investments—publicly traded securities | | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 67,287,194 | 12 | 74,291,155 |
| | 13 | Investments—program-related. See Part IV, line 11 | | | 13 | |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 15 | |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | 69,870,546 | 16 | 75,119,571 | |
| Liabilities | 17 | Accounts payable and accrued expenses | | 2,586 | 17 | |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | 0 | 19 | 30,884 |
| | 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 | | 26,361,842 | 23 | 28,802,575 |
| | 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 | | 44,188 | 25 | 54,948 |
| | 26 | Total liabilities. Add lines 17 through 25 | | 26,408,616 | 26 | 28,888,407 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | |
| | 27 | Unrestricted net assets | | 40,682,178 | 27 | 43,291,164 |
| | 28 | Temporarily restricted net assets | | 388,899 | 28 | 522,228 |
| | 29 | Permanently restricted net assets | | 2,390,853 | 29 | 2,417,772 |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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 | | 43,461,930 | 33 | 46,231,164 |
| 34 | Total liabilities and net assets/fund balances | | 69,870,546 | 34 | 75,119,571 | |

Part XI Reconciliation of Net AssetsCheck 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 | 5,233,942 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 8,224,385 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | -2,990,443 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 43,461,930 |
| 5 | Net unrealized gains (losses) on investments | 5 | 5,759,677 |
| 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 | 0 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 46,231,164 |

Part XII Financial Statements and ReportingCheck 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | No |
| b Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | Yes | |
| 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | Yes | |
| 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? | | 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 | | |

Additional Data

Software ID:

Software Version:

EIN: 58-2184345

Name: THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC

Form 990 (2017)

Form 990, Part III, Line 4a:

TO PROVIDE CONTRIBUTIONS AND GRANTS TO OTHER NONPROFIT ORGANIZATIONS

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

2017

Open to Public Inspection

Name of the organization

THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC

Employer identification number

58-2184345

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), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(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) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ") | 8,740,084 | 5,771,222 | 7,423,460 | 10,034,407 | 5,491,905 | 37,461,078 |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 8,740,084 | 5,771,222 | 7,423,460 | 10,034,407 | 5,491,905 | 37,461,078 |
| 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) | | | | | | 16,136,076 |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 21,325,002 |

| Section B. Total Support | | | | | | | |
|--|---|-----------|-----------|-----------|------------|-----------|--------------------------|
| Calendar year (or fiscal year beginning in) ► | | (a)2013 | (b)2014 | (c)2015 | (d)2016 | (e)2017 | (f)Total |
| 7 | Amounts from line 4 | 8,740,084 | 5,771,222 | 7,423,460 | 10,034,407 | 5,491,905 | 37,461,078 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 1,249,894 | 1,785,828 | 1,969,772 | 1,081,270 | 1,030,385 | 7,117,149 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) | 192,114 | 193,939 | 204,818 | 214,249 | 231,817 | 1,036,937 |
| 11 | Total support. Add lines 7 through 10 | | | | | | 45,615,164 |
| 12 | Gross receipts from related activities, etc (see instructions) | | | | | 12 | |
| 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 | | | | | | <input type="checkbox"/> |

| Section C. Computation of Public Support Percentage | | |
|---|--|--------------------|
| 14 | Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) | 14 46.750 % |
| 15 | Public support percentage for 2016 Schedule A, Part II, line 14 | 15 50.380 % |
| 16a | 33 1/3% support test—2017. 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. ▶ <input checked="" type="checkbox"/> | |
| b | 33 1/3% support test—2016. 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. ▶ <input type="checkbox"/> | |
| 17a | 10%-facts-and-circumstances test—2017. 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. ▶ <input type="checkbox"/> | |
| b | 10%-facts-and-circumstances test—2016. 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. ▶ <input type="checkbox"/> | |
| 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. ▶ <input type="checkbox"/> | |

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) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (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) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (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 2017 (line 8, column (f) divided by line 13, column (f)) | 15 | |
| 16 Public support percentage from 2016 Schedule A, Part III, line 15 | 16 | |

Section D. Computation of Investment Income Percentage

| | | |
|--|-----------|--|
| 17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) | 17 | |
| 18 Investment income percentage from 2016 Schedule A, Part III, line 17 | 18 | |

19a 33 1/3% support tests—2017. 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—2016. 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? <i>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.</i> | 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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i> | 2 | |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i> | 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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i> | 3b | |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i> | 3c | |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i> | 4a | |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i> | 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)? <i>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.</i> | 4c | |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i> | 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? <i>If "Yes," provide detail in Part VI.</i> | 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i> | 7 | |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i> | 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))? <i>If "Yes," provide detail in Part VI.</i> | 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? <i>If "Yes," provide detail in Part VI.</i> | 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? <i>If "Yes," provide detail in Part VI.</i> | 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)? <i>If "Yes," answer line 10b below.</i> | 10a | |
| b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i> | 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? | | |
| b A family member of a person described in (a) above? | | |
| c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i> | | |
| | 11a | |
| | 11b | |
| | 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? <i>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.</i> | | |
| | 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? <i>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.</i> | | |
| | 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)? <i>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).</i> | | |
| | 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> | | |
| | 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i> | | |
| | 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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). | | |
| 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? <i>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.</i> | | |
| | 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? <i>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.</i> | | |
| | 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? <i>Provide details in Part VI.</i> | | |
| | 3a | |
| b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i> | | |
| | 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 (explain in Part VI) **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 <input type="checkbox"/> 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 2017 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-2017 | (iii) Distributable Amount for 2017 |
|--|-------------------------------------|---|--|
| 1 Distributable amount for 2017 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions | | | |
| 3 Excess distributions carryover, if any, to 2017 | | | |
| a | | | |
| b From 2013. | | | |
| c From 2014. | | | |
| d From 2015. | | | |
| e From 2016. | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2017 distributable amount | | | |
| i Carryover from 2012 not applied (see instructions) | | | |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f | | | |
| 4 Distributions for 2017 from Section D, line 7 \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2017 distributable amount | | | |
| c Remainder Subtract lines 4a and 4b from 4 | | | |
| 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions | | | |
| 6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions | | | |
| 7 Excess distributions carryover to 2018. Add lines 3j and 4c | | | |
| 8 Breakdown of line 7 | | | |
| a Excess from 2013. | | | |
| b Excess from 2014. | | | |
| c Excess from 2015. | | | |
| d Excess from 2016. | | | |
| e Excess from 2017. | | | |

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 |
|------------------------------|
| |

| | | | | | |
|---|--|---|--|---|--|
| efile GRAPHIC print - DO NOT PROCESS | | As Filed Data - | | DLN: 93493135022278 | |
| <div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div> | | <div>Supplemental Financial Statements</div> <div>► 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.</div> | | | <div>OMB No 1545-0047</div> <div>2017</div> <div>Open to Public Inspection</div> |
| <div>Name of the organization THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC</div> | | | | <div>Employer identification number 58-2184345</div> | |
| <div>Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 6.</div> | | | | | |
| | | (a) Donor advised funds | | (b) Funds and other accounts | |
| 1 Total number at end of year | | 232 | | | |
| 2 Aggregate value of contributions to (during year) | | 5,862,091 | | | |
| 3 Aggregate value of grants from (during year) | | 7,374,925 | | | |
| 4 Aggregate value at end of year | | 74,291,155 | | | |
| 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? | | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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? | | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| <div>Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.</div> | | | | | |
| 1 Purpose(s) of conservation easements held by the organization (check all that apply) | | | | | |
| <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education)</div> <div><input type="checkbox"/> Preservation of an historically important land area</div> <div><input type="checkbox"/> Protection of natural habitat</div> <div><input type="checkbox"/> Preservation of a certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div> | | | | | |
| 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input type="checkbox"/> 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 | | | | | |
| <div>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 8.</div> | | | | | |
| 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 ► \$ | | | | | |
| For Paperwork Reduction Act Notice, see the Instructions for Form 990. | | | | | |
| | | Cat No 52283D | | Schedule D (Form 990) 2017 | |

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

| | Amount |
|----|--------|
| 1c | |
| 1d | |
| 1e | |
| 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 | 2,798,826 | 2,704,194 | 2,780,301 | 2,647,145 | 2,342,285 |
| b Contributions | 52,363 | 65,103 | 2,870 | 13,950 | 78,861 |
| c Net investment earnings, gains, and losses | 394,699 | 139,190 | 20,361 | 212,990 | 313,190 |
| d Grants or scholarships | 6,995 | 7,983 | 6,586 | 7,026 | 4,037 |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | 109,857 | 101,678 | 92,752 | 86,758 | 83,154 |
| g End of year balance | 3,129,036 | 2,798,826 | 2,704,194 | 2,780,301 | 2,647,145 |

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

(i) unrelated organizations

(ii) related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

| | Yes | No |
|--------|-----|----|
| 3a(i) | | No |
| 3a(ii) | | No |
| 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 | | 94,878 | 78,760 | 16,118 |
| e Other | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶ | | | | 16,118 |

Schedule D (Form 990) 2017

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) FIXED INCOME INVESTMENTS | 21,305,999 | F |
| (B) EQUITY SECURITIES AND EQUITY FUNDS | 41,076,669 | F |
| (C) MONEY MARKET FUNDS | 2,043,836 | F |
| (D) ALTERNATIVE INVESTMENTS | 9,264,735 | F |
| (E) CERTIFICATES OF DEPOSIT | 599,916 | F |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶ | 74,291,155 | |

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 | | |
| OTHER LIABILITIES | 54,948 | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ | 54,948 | |

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 | 11,073,144 |
| 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 | 5,759,677 |
| e | Add lines 2a through 2d | 2e | 5,759,677 |
| 3 | Subtract line 2e from line 1 | 3 | 5,313,467 |
| 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 | -79,525 |
| c | Add lines 4a and 4b | 4c | -79,525 |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12) | 5 | 5,233,942 |

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 | 8,303,910 |
| 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 | 79,525 |
| e | Add lines 2a through 2d | 2e | 79,525 |
| 3 | Subtract line 2e from line 1 | 3 | 8,224,385 |
| 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 | 0 |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18) | 5 | 8,224,385 |

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 | |
| | |
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| | |
| | |
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| | |

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

| Return Reference | Explanation |
|------------------|-------------|
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| | |

Additional Data

Software ID:
Software Version:
EIN: 58-2184345
Name: THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC

Supplemental Information

| Return Reference | Explanation |
|------------------|---|
| PART X, LINE 2 | THE FOUNDATION HAS EVALUATED THE EFFECT OF GAAP GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THE FOUNDATION IS TAX EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE FOUNDATION IS SUBJECT TO FEDERAL INCOME TAX ON UNRELATED BUSINESS INCOME MANAG EMENT BELIEVES THAT THE FOUNDATION CONTINUES TO SATISFY THE REQUIREMENTS OF A TAX-EXEMPT O RGANIZATION MANAGEMENT HAS EVALUATED ALL OTHER TAX POSITIONS THAT COULD HAVE A SIGNIFICAN T EFFECT ON THE CONSOLIDATED FINANCIAL STATEMENTS AND DETERMINED THE FOUNDATION HAD NO UNC ERTAIN INCOME TAX POSITIONS AT DECEMBER 31, 2017 AND 2016, RESPECTIVELY |

| Supplemental Information | |
|--------------------------------------|---|
| Return Reference | Explanation |
| PART XI, LINE 2D - OTHER ADJUSTMENTS | NET UNREALIZED/REALIZED LOSS ON INVESTMENTS 5,759,677 |

| Supplemental Information | |
|--------------------------------------|--|
| Return Reference | Explanation |
| PART XI, LINE 4B - OTHER ADJUSTMENTS | EXPENSES RELATED TO PROPERTY HELD FOR INVESTMENT -79,525 |

| Supplemental Information | |
|---------------------------------------|---|
| Return Reference | Explanation |
| PART XII, LINE 2D - OTHER ADJUSTMENTS | EXPENSES RELATED TO PROPERTY HELD FOR INVESTMENT 79,525 |

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

2017

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC

Employer identification number
58-2184345

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 noncash assistance | (h) Purpose of grant or assistance |
|--|---------|---------------------------------|--------------------------|-----------------------------------|---|---------------------------------------|------------------------------------|
| (1) See Additional Data | | | | | | | |
| (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 ▶

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

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 noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|----------------------------------|---|---------------------------------------|
| (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 |
|------------------|---|
| PART I, LINE 2 | THE FOUNDATION'S UNRESTRICTED GRANTS PROGRAM REQUIRES THAT GRANT RECIPIENTS BE AWARDED FUNDS THROUGH AN APPLICATION AND SELECTION PROCESS. ONCE FUNDS ARE AWARDED, AGENCIES ARE REQUIRED TO SUBMIT A 6-MONTH INTERIM AND 1-YEAR FINANCIAL REPORT DETAILING HOW THE FUNDS WERE SPENT AND THE OUTCOMES OF THE PROGRAM. DONOR ADVISED GRANT RECIPIENTS ARE REQUIRED TO RETURN A SIGNED AUTHORIZATION LETTER STATING THAT THE FUNDS ARE NOT TO BE USED FOR ANY PERSONAL BENEFIT. DONOR ADVISED GRANTS MUST BE APPROVED BY THE FOUNDATION'S GRANTS COMMITTEE WITH NOTIFICATION AND APPROVAL OF THE FULL BOARD OF DIRECTORS. ALL DONOR ADVISED AND UNRESTRICTED GRANT RECIPIENTS ARE VERIFIED AS HAVING PUBLIC CHARITY OR 501(C)(3) STATUS THROUGH AN ANNUAL SUBSCRIPTION TO GUIDESTAR, INC. IF AGENCIES CANNOT BE VERIFIED VIA GUIDESTAR, THE IRS' NON-PROFIT DIVISION CAN BE CONTACTED AT 1-877-829-5500. |

Additional Data

Software ID:
Software Version:
EIN: 58-2184345
Name: THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC

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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| 100 BLACK MEN OF AUGUSTA PO BOX 12275 AUGUSTA, GA 30914 | 58-2095878 | 501(C)(3) | 6,000 | | | | 2017 ANEG GRANT |
| 221 B RESOURCES LLC 250 WEST 40TH STREET 3RD FLOOR NEW YORK, NY 10018 | | | 9,999 | | | | SEPTEMBER DAF GRANT |

| 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 |
| ACTIVITIES COUNCIL OF THOMSON PO BOX 674 THOMSON, GA 30824 | 58-1281909 | | 500 | | | | 2017 ANEG GRANT |
| AGAPE YOUTH AND FAMILY CENTER 2353 BOLTON ROAD NW SUITE 100 ATLANTA, GA 30318 | 58-2372950 | | 23,600 | | | | DECEMBER DAF GRANTS |

| 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 |
| AIKEN CENTER FOR THE ARTS 122 LAURENS STREET SW AIKEN, SC 29801 | 23-7249651 | | 500 | | | | 2017 ANEG GRANT |
| AIKEN CENTER FOR THE ARTS 122 LAURENS STREET SW AIKEN, SC 29801 | 23-7249651 | | 500 | | | | NOVEMBER DAF GRANTS |

| 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 |
| AIKEN CENTER FOR THE ARTS 122 LAURENS STREET SW AIKEN, SC 29801 | 23-7249651 | | 15,000 | | | | 2016 URG GRANT |
| AIKEN COUNTY PUBLIC LIBRARY 314 CHESTERFIELD ST SOUTH AIKEN, SC 29801 | | | 3,000 | | | | NOVEMBER DAF GRANTS |

| 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 |
| AIKEN HIGH SCHOOL ALL SPORTS BOOSTER CLUB PO BOX 1649 AIKEN, SC 29802 | 46-1064684 | | 5,000 | | | | 2017 MAY DAF GRANT |
| AIKEN LAND CONSERVANCY PO BOX 3096 AIKEN, SC 29803 | 57-0932943 | | 100 | | | | NOVEMBER DAF GRANTS |

| 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 |
| AIKEN-AUGUSTA SWIM LEAGUE INC PO BOX 2896 AUGUSTA, GA 30914 | | | 500 | | | | 2017 ANEG GRANT |
| ALL GOD'S CREATURES VETERINARY HOSPITAL 2703 PEACH ORCHARD RD AUGUSTA, GA 30906 | | | 2,000 | | | | CORRECTED SEPTEMBER DAF |

| 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 |
| ALL GOD'S CREATURES VETERINARY HOSPITAL 2704 PEACH ORCHARD RD AUGUSTA, GA 30906 | | | 5,000 | | | | NOVEMBER DAF GRANTS |
| ALZHEIMER'S ASSOCIATION 106 SRP DRIVE SUITE A EVANS, GA 30809 | 58-1492046 | 501(C)(3) | 2,500 | | | | 2017 ANEG GRANT |

| 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 |
| ALZHEIMERS RESEARCH FOUNDATION INC 3152 LITTLE RD TRINITY, FL 34655 | 32-0399565 | | 3,000 | | | | SEPTEMBER DAF GRANT |
| AMERICA'S WARRIOR PARTNERSHIP 1190 INTERSTATE PARKWAY AUGUSTA, GA 30909 | 47-1606321 | | 328,564 | | | | 2017 JUNE DAF GRANT |

| 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 |
| AMERICAN HEART ASSOCIATION 516 WEST AVENUE NORTH AUGUSTA, SC 29841 | | 501(C)(3) | 5,000 | | | | 2017 FEB DAF GRANTS |
| AMERICAN RED CROSS PO BOX 37839 BOONE, IA 50037 | | | 2,000 | | | | OCTOBER DAF GRANT |

| 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 |
| AMERICAN RED CROSS PO BOX 37839 BOONE, IA 50037 | | | 500,000 | | | | SEPTEMBER OUT OF CYCLE GRANT |
| ANDERSON UNIVERSITY 316 BOULEVARD ANDERSON, SC 29621 | | | 1,000 | | | | 2017 JUN DAF GRANT |

| 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 |
| ANICIRA VETERINARY CENTER 9975 PENNSYLVANIA AVENUE MANASSAS, VA 20110 | 20-8358468 | | 200 | | | | 2017 MAR DAF GRANTS |
| APPALACHIAN MOUNTAIN CLUB 5 JOY STREET BOSTON, MA 02108 | 04-6001677 | 501(C)(3) | 200 | | | | 2017 MAR DAF GRANTS |

| 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 |
| AQUINAS HIGH SCHOOL 1920 HIGHLAND AVENUE AUGUSTA, GA 30904 | 58-0572408 | | 15,000 | | | | 2017 JUNE DAF GRANT |
| AQUINAS HIGH SCHOOL 1920 HIGHLAND AVENUE AUGUSTA, GA 30904 | 58-0572408 | | 20,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| AREA CHURCHES TOGETHER SERVING 340 PARK AVENUE SW AIKEN, SC 29801 | 57-0826271 | 501(C)(3) | 3,500 | | | | NOVEMBER DAF GRANTS |
| AREA CHURCHES TOGETHER SERVING 340 PARK AVENUE SW AIKEN, SC 29801 | 57-0826271 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| ARMSTRONG ATLANTIC STATE UNIVERSITY 11935 ABERCORN STREET SAVANNAH, GA 31419 | 58-6000063 | | 750 | | | | AUGUST 2017 DAF |
| ARTS & HERITAGE CENTER OF NORTH AUGUSTA PO BOX 6462 NORTH AUGUSTA, SC 29861 | 56-2588020 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |

| 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 |
| AUGUSTA BALLET INC 1301 GREENE STREET AUGUSTA, GA 30901 | 58-0944828 | 501(C)(3) | 125 | | | | DECEMBER DAF GRANTS |
| AUGUSTA CANAL NATIONAL HERITAGE CENTER PO BOX 2367 AUGUSTA, GA 30903 | 04-3640043 | 501(C)(3) | 500 | | | | 2017 JULY DAF GRANTS |

| 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 |
| AUGUSTA CARE PREGNANCY CENTER 1298 1/2 BROAD STREET AUGUSTA, GA 30901 | 58-1461982 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |
| AUGUSTA CHORAL SOCIETY PO BOX 1402 AUGUSTA, GA 30903 | 23-7009009 | 501(C)(3) | 375 | | | | 2017 JULY DAF GRANTS |

| 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 |
| AUGUSTA CHORAL SOCIETY PO BOX 1402 AUGUSTA, GA 30903 | 23-7009009 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |
| AUGUSTA CHORAL SOCIETY PO BOX 1402 AUGUSTA, GA 30903 | 23-7009009 | 501(C)(3) | 500 | | | | 2017 JAN DAF GRANT |

| 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 |
| AUGUSTA FEDERATION OF JEWISH CHARITIES 898 WEINBERGER WAY EVANS, GA 30809 | 58-6044144 | 501(C)(3) | 110,000 | | | | NOVEMBER DAF GRANTS |
| AUGUSTA LOCALLY GROWN 1301 WATERS EDGE DRIVE AUGUSTA, GA 30901 | 45-3581329 | | 500 | | | | 2017 MAY DAF GRANT |

| 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 |
| AUGUSTA LOCALLY GROWN 1301 WATERS EDGE DRIVE AUGUSTA, GA 30901 | 45-3581329 | | 10,000 | | | | OCTOBER DAF GRANT |
| AUGUSTA LOCALLY GROWN 1301 WATERS EDGE DRIVE AUGUSTA, GA 30901 | 45-3581329 | | 3,500 | | | | 2017 ANEG GRANT |

| 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 |
| AUGUSTA MINI THEATRE INC 2548 DEANS BRIDGE ROAD AUGUSTA, GA 30906 | 58-1374032 | 501(C)(3) | 10,500 | | | | 2017 ANEG GRANT |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 100 | | | | NOVEBER DAF GRANTS |

| 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 |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 2,500 | | | | 2017 JULY DAF GRANTS |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 1,000 | | | | SEPTEMBER DAF GRANT |

| 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 |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 500 | | | | 2017 JULY DAF GRANTS |
| AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS STREET AUGUSTA, GA 30901 | 58-6000097 | 501(C)(3) | 500 | | | | 2017 JAN DAF GRANT |

| 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 |
| AUGUSTA PLAYERS INC PO BOX 2352 AUGUSTA, GA 30903 | 58-0535036 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| AUGUSTA PREPARATORY DAY SCHOOL 285 FLOWING WELLS ROAD MARTINEZ, GA 30907 | 58-1874724 | | 3,500 | | | | 2017 APR DAF GRANT |

| 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 |
| AUGUSTA REGIONAL COLLABORATION CORP 600 BROAD STREET BOX 1 AUGUSTA, GA 30901 | 46-4309024 | | 1,835 | | | | 2017 JAN DAF GRANT |
| AUGUSTA RESCUE MISSION INC 526 WALKER STREET AUGUSTA, GA 30901 | 58-0971161 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| AUGUSTA SYMPHONY GUILD PO BOX 40068 AUGUSTA, GA 30909 | 58-6044195 | | 1,000 | | | | SEPTEMBER DAF GRANT |
| AUGUSTA SYMPHONY ORCHESTRA 1301 GREENE STREET SUITE 200 AUGUSTA, GA 30901 | 58-1806334 | | 50,000 | | | | INSTALLMENT 2 OF 5 YEAR PLEDGE |

| 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 |
| AUGUSTA SYMPHONY ORCHESTRA 1301 GREENE STREET SUITE 200 AUGUSTA, GA 30901 | 58-1806334 | | 25,000 | | | | SEPTEMBER DAF GRANT |
| AUGUSTA SYMPHONY ORCHESTRA 1301 GREENE STREET SUITE 200 AUGUSTA, GA 30901 | 58-1806334 | | 50,000 | | | | INSTALLMENT 2 OF 5 YEAR PLEDGE |

| 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 |
| AUGUSTA SYMPHONY ORCHESTRA 1301 GREENE STREET SUITE 200 AUGUSTA, GA 30901 | 58-1806334 | | 562 | | | | 2017 JUNE DAF GRANT |
| AUGUSTA UNIVERSITY FOUNDATION - LITERACY CENTER 1401 MAGNOLIA DR AUGUSTA, GA 30909 | 58-6038134 | | 15,000 | | | | 2016 URG GRANT |

| 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 |
| AUGUSTA UNIVERSITY FOUNDATION - LITERACY CENTER 1401 MAGNOLIA DR AUGUSTA, GA 30909 | 58-6038134 | | 2,000 | | | | 2017 ANEG GRANT |
| AUGUSTA UNIVERSITY 2500 WALTON WAY PAYNE HALL AUGUSTA, GA 30904 | 58-6002053 | | 1,000 | | | | OCTOBER DAF GRANT |

| 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 |
| AUGUSTA UNIVERSITY FOUNDATION INC 1120 15TH STREET AUGUSTA, GA 30912 | 58-6038134 | | 1,000 | | | | AUGUST 2017 DAF |
| AUGUSTA UNIVERSITY FOUNDATION INC 1120 15TH STREET AUGUSTA, GA 30912 | 58-6038134 | | 15,000 | | | | 2017 JULY DAF GRANTS |

| 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 |
| AUGUSTA UNIVERSITY FOUNDATION INC 1120 15TH STREET AUGUSTA, GA 30912 | 58-6038134 | | 1,000 | | | | 2017 JULY DAF GRANTS |
| AUGUSTA UNIVERSITY FOUNDATION INC 1120 15TH STREET AUGUSTA, GA 30912 | 58-6038134 | | 250 | | | | 2017 JUNE DAF GRANT |

| 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 |
| AUGUSTA UNIVERSITY FOUNDATION INC 1120 15TH STREET AUGUSTA, GA 30912 | 58-6038134 | | 1,000 | | | | 2017 MAY DAF GRANT |
| AUGUSTA URBAN MINISTRIES PO BOX 14634 AUGUSTA, GA 30919 | 58-2070427 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |

| 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 |
| AUGUSTA WARRIOR PROJECT INC 701 GREENE STREET SUITE 104 AUGUSTA, GA 30901 | 26-1176267 | | 2,500 | | | | 2017 ANEG GRANT |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 689 | | | | 2017 MAR DAF GRANT |

| 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 |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 37,500 | | | | 2017 ANEG GRANT |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 1,949 | | | | 2017 FEB DAF GRANTS |

| 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 |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 3,483 | | | | 2017 JUNE DAF GRANT |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 775 | | | | 2017 JUNE DAF GRANT |

| 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 |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 4,785 | | | | 2017 JUNE DAF GRANT |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 1,500 | | | | NOVEMBER DAF GRANTS |

| 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 |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 975 | | | | DECEMBER DAF GRANTS |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 1,617 | | | | OCTOBER DAF GRANT |
| AUGUSTA WARRIOR PROJECT INC | 26-1176267 | 501(C)(3) | 100,000 | | | | DECEMBER OUT OF CYCLE GRANTS |

| 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 |
| AUGUSTA WELLNESS SOLUTIONS 3522 HILLTOP DRIVE AUGUSTA, GA 30906 | 45-5535396 | | 1,500 | | | | 2017 ANEG GRANT |
| AUGUSTA WESTOBOU FESTIVAL INC 1129 BROAD STREET AUGUSTA, GA 30901 | 26-3416729 | 501(C)(3) | 250 | | | | AUGUST 2017 DAF |

| 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 |
| AUGUSTA WESTOBOU FESTIVAL INC 1129 BROAD STREET AUGUSTA, GA 30901 | 26-3416729 | 501(C)(3) | 4,000 | | | | 2017 ANEG GRANT |
| AUGUSTA-CSRA HABITAT FOR HUMANITY INC PO BOX 657 AUGUSTA, GA 30903 | 58-1712416 | | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| AUGUSTA-CSRA HABITAT FOR HUMANITY INC PO BOX 657 AUGUSTA, GA 30903 | 58-1712416 | | 15,000 | | | | 2016 URG GRANT |
| BENEDICT COLLEGE 1600 HARDEN STREET COLUMBIA, SC 29204 | 57-0314365 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| BERRY FLEMING BOOK FESTIVAL 1427 ANTHONY ROAD AUGUSTA, GA 30904 | 58-1537764 | | 15,000 | | | | 2016 URG GRANT |
| BESTILL DISPLAYS 6321 SOUTHBROOM DR EVANS, GA 30809 | | | 830 | | | | NOVEMBER DAF GRANTS |

| 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 |
| BETHEL FAMILY CHURCH PO BOX 360384 DECATUR, GA 30036 | 58-2008296 | | 15,000 | | | | DECEMBER DAF GRANTS |
| BIG STEVENS CREEK BAPTIST 1850 MARTINTOWN ROAD NORTH AUGUSTA, SC 29860 | 57-0654983 | 501(C)(3) | 2,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| BOY SCOUTS OF AMERICA GA-CA COUNCIL 4132 MADELINE DRIVE AUGUSTA, GA 30909 | 58-0566185 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |
| BOY SCOUTS OF AMERICA GA-CA COUNCIL 4132 MADELINE DRIVE AUGUSTA, GA 30909 | 58-0566185 | 501(C)(3) | 2,500 | | | | 2017 ANEG GRANT |

| 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 |
| BOYS & GIRLS CLUBS OF CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904 | 58-0610382 | 501(C)(3) | 13,500 | | | | 2017 ANEG GRANT |
| BOYS & GIRLS CLUBS OF CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904 | 58-0610382 | 501(C)(3) | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| BOYS AND GIRLS CLUB OF THE CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904 | 13-5562976 | 501(C)(3) | 2,500 | | | | AUGUST 2017 REISSUE GRANT |
| BOYS AND GIRLS CLUB OF THE CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904 | 13-5562976 | 501(C)(3) | 2,500 | | | | AUGUST 2017 DAF |

| 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 |
| BOYS AND GIRLS CLUB OF THE CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904 | 13-5562976 | 501(C)(3) | 25,000 | | | | DECEMBER DAF GRANTS |
| BOYS AND GIRLS CLUB OF THE CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904 | 13-5562976 | 501(C)(3) | 10,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| BRAIN INJURY ASSOCIATION OF GA PO BOX 2817 WOODSTOCK, GA 30188 | | | 1,000 | | | | 2017 ANEG GRANT |
| BROAD STREET MINISTRY CENTER 20 BROAD STREET AUGUSTA, GA 30901 | 26-2087052 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| BROWN GROVE BAPTIST CHURCH 506 W 5TH STREET WAYNESBORO, GA 30830 | | | 500 | | | | 2017 APR DAF GRANT |
| CANINE RESCUE INC PO BOX 7025 NORTH AUGUSTA, SC 29861 | 27-0203699 | 501(C)(3) | 4,500 | | | | 2017 ANEG GRANT |

| 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 |
| CAT CLAWS INC 900 WEST CHURCH STREET MORRILTON, AR 72110 | | | 350 | | | | 2017 JUNE DAF GRANT |
| CATHOLIC DIOCESE OF SAVANNAH PO BOX 116633 ATLANTA, GA 30368 | 20-0184774 | | 2,000 | | | | 2017 MAR DAF GRANT |

| 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 |
| CENTRAL SAVANNAH RIVER LAND TRUST INC PO BOX 148 AUGUSTA, GA 30903 | 58-2632350 | 501(C)(3) | 15,000 | | | | 2016 URG GRANT |
| CENTRAL SAVANNAH RIVER LAND TRUST INC PO BOX 148 AUGUSTA, GA 30903 | 58-2632350 | 501(C)(3) | 250 | | | | 2017 APR DAF GRANTS |

| 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 |
| CENTRAL SAVANNAH RIVER LAND TRUST INC PO BOX 148 AUGUSTA, GA 30903 | 58-2632350 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| CHAMPIONS MADE FROM ADVERSITY INC PO BOX 980 EVANS, GA 30809 | 06-1823432 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |

| 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 |
| CHILD ADVOCACY CENTER OF AIKEN COUNTY PO BOX 1763 AIKEN, SC 29802 | 20-1565539 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| CHILD ADVOCACY CENTER OF AIKEN COUNTY PO BOX 1763 AIKEN, SC 29802 | 20-1565539 | 501(C)(3) | 500 | | | | 2017 MAY DAF GRANT |

| 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 |
| CHILD ENRICHMENT INC PO BOX 12036 AUGUSTA, GA 30914 | 58-1287799 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| CHILD ENRICHMENT INC PO BOX 12036 AUGUSTA, GA 30914 | 58-1287799 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |

| 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 |
| CHILD ENRICHMENT INC PO BOX 12036 AUGUSTA, GA 30914 | 58-1287799 | 501(C)(3) | 500 | | | | DECEMBER DAF GRANTS |
| CHILD EVANGELISM FELLOWSHIP OF AUGUSTA PO BOX 2553 EVANS, GA 30809 | 38-6091187 | | 10,000 | | | | DECEMBER DAF |

| 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 |
| CHILDREN'S PLACE INC 310 BARNWELL AVENUE NE AIKEN, SC 29801 | 57-0407808 | 501(C)(3) | 5,000 | | | | NOVEMBER DAF GRANTS |
| CHILDREN'S PLACE INC 310 BARNWELL AVENUE NE AIKEN, SC 29801 | 57-0407808 | 501(C)(3) | 25,166 | | | | DECEMBER DAF GRANTS |

| 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 |
| CHILDREN'S PLACE INC 310 BARNWELL AVENUE NE AIKEN, SC 29801 | 57-0407808 | 501(C)(3) | 1,000 | | | | AUGUST 2017 DAF |
| CHRIST CENTRAL MINISTRIES 3605 RICHLAND AVENUE W AIKEN, SC 29801 | 57-1113185 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| CHRIST COMMUNITY HEALTH SERVICES AUGUSTA PO BOX 2344 AUGUSTA, GA 30903 | 20-5404353 | 501(C)(3) | 6,500 | | | | 2017 ANEG GRANT |
| CHRIST COMMUNITY HEALTH SERVICES AUGUSTA PO BOX 2344 AUGUSTA, GA 30903 | 20-5404353 | 501(C)(3) | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| CHRIST COMMUNITY HEALTH SERVICES AUGUSTA PO BOX 2344 AUGUSTA, GA 30903 | 20-5404353 | 501(C)(3) | 100 | | | | DECEMBER DAF GRANTS |
| CHRIST COMMUNITY HEALTH SERVICES AUGUSTA PO BOX 2344 AUGUSTA, GA 30903 | 20-5404353 | 501(C)(3) | 25,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| CHRISTIAN LEARNING CENTERS OF AUGUSTA PO BOX 14786 AUGUSTA, GA 30919 | 58-2644784 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |
| CHURCH OF THE GOOD SHEPHERD 2230 WALTON WAY AUGUSTA, GA 30904 | | 501(C)(3) | 15,000 | | | | DECEMBER OUT OF CYCLE GRANT |

| 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 |
| CLAFLIN UNIVERSITY 400 MAGNOLIA STREET ORANGEBURG, SC 29115 | 57-0314374 | | 1,500 | | | | SEPTEMBER DAF GRANT |
| CLAFLIN UNIVERSITY 400 MAGNOLIA STREET ORANGEBURG, SC 29115 | 57-0314374 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| CLEMSON UNIVERSITY G-08 SIKES HALL - BOX 345307 CLEMSON, SC 29634 | 57-0426335 | 501(C)(3) | 3,000 | | | | 2017 JUNE DAF GRANT |
| COASTAL CAROLINA UNIVERSITY PO BOX 261954 CONWAY, SC 29528 | 57-0977955 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| COASTAL CAROLINA UNIVERSITY PO BOX 261954 CONWAY, SC 29528 | 57-0977955 | | 750 | | | | 2017 JULY DAF GRANTS |
| COLLEGE OF CHARLESTON FOUNDATION 66 GEORGE STREET CHARLESTON, SC 29424 | 23-7069236 | 501(C)(3) | 100 | | | | 2017 JULY DAF GRANTS |

| 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 |
| COLUMBIA COUNTY FOUNDATION FOR CHILDREN INC 7009 EVANS TOWN CENTER BLVD EVANS, GA 30809 | 58-2108503 | | 1,000 | | | | OCTOBER DAF GRANT |
| COLUMBIA COUNTY ORCHESTRA ASSOCIATION 3309 LLOYD PASCHAL RD APPLING, GA 30802 | 26-3183590 | | 500 | | | | 2017 ANEG GRANT |

| 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 |
| COMMUNIGRAPHICS 1400 GEORGIA AVE NORTH AUGUSTA, SC 29841 | | | 327 | | | | 2017 FEB DAF GRANTS |
| COMMUNITIES IN SCHOOLS PO BOX 1604 AUGUSTA, GA 30903 | 58-2246930 | 501(C)(3) | 1,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| COMMUNITY MEDICAL CLINIC OF AIKEN CO 244 GREENVILLE STREET NW AIKEN, SC 29801 | 57-1063263 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANTS |
| COMMUNITY MEDICAL CLINIC OF AIKEN CO 244 GREENVILLE STREET NW AIKEN, SC 29801 | 57-1063263 | | 2,500 | | | | NOVEMBER DAF GRANTS |

| 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 |
| COMMUNITY MINISTRY OF NORTH AUGUSTA PO BOX 7152 NORTH AUGUSTA, SC 29861 | 57-0928055 | | 1,500 | | | | 2017 ANEG GRANT |
| COMMUNITY OPTIONS INC 16 FABER ROAD PRINCETON, NJ 08540 | 22-2964056 | | 500 | | | | 2017 ANEG GRANT |

| 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 |
| CONVENTIONS SPORTS & LEISURE 61 BROADWAY SUITE 2400 NEW YORK, NY 10006 | | | 6,000 | | | | 2017 FEB DAF GRANT |
| COVENANT PRESBYTERIAN CHURCH 3131 WALTON WAY AUGUSTA, GA 30909 | | | 10,000 | | | | 2017 JULY DAF GRANTS |

| 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 |
| CRESTLINE PO BOX 2027 LEWISTON, ME 04241 | | | 1,001 | | | | NOVEMBER DAF GRANTS |
| CSRA ALLIANCE FOR FORT GORDON INC PO BOX 670 AUGUSTA, GA 30903 | 20-0109015 | 501(C)(3) | 5,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| CSRA ALLIANCE FOR FORT GORDON INC PO BOX 670 AUGUSTA, GA 30903 | 20-0109015 | 501(C)(3) | 400 | | | | 2017 APR DAF GRANT |
| CSRA ECONOMIC OPPORTUNITY AUTHORITY INC 1261 GREENE STREET AUGUSTA, GA 30901 | 58-0975667 | | 500 | | | | 2017 ANEG GRANT |

| 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 |
| CSRA HUMANE SOCIETY PO BOX 14667 AUGUSTA, GA 30919 | 58-6104064 | 501(C)(3) | 20,500 | | | | 2017 ANEG GRANT |
| CUMBEE CENTER TO ASSIST ABUSED PERSONS INC PO BOX 1293 AIKEN, SC 29802 | | | 2,000 | | | | NOVEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 AUGUST OUT OF CYCLE GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | NOVEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | 2017 AUGUST OUT OF CYCLE GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | NOVEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 AUGUST OUT OF CYCLE GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | NOVEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 400 | | | | AUGUST 2017 DAF |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,700 | | | | NOVEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | 2017 AUGUST OUT OF CYCLE GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | DECEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | AUGUST 2017 DAF |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | DECEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | AUGUST 2017 DAF |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | SEPTEMBER DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | AUGUST 2017 DAF |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | OCTOBER DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | AUGUST 2017 DAF |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,100 | | | | OCTOBER DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 150 | | | | AUGUST 2017 DAF |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 220 | | | | OCTOBER DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | OCTOBER DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | OCTOBER DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | OCTOBER DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | SEPTEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | SEPTEMBER DAF GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | SEPTEMBER DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | DECEMBER DAF GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | DECEMBER DAF OUT OF CYCLE |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 MAR DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 MAR DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | 2017 MAR DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 APR DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | 2017 JUNE DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 JUNE DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 APR DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | 2017 MAR DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | 2017 FEB DAF GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | 2017 FEB DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 FEB DAF GRANTS |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 FEB DAF GRANTS |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 JAN DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 1,275 | | | | 2017 APR DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | 2017 JAN DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,700 | | | | 2017 MAY DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | 2017 JAN DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 2,692 | | | | 2017 MAY DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 800 | | | | 2017 MAY DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 MAY DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 JUNE DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 5,192 | | | | 2017 APR DAF GRANT |

| 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 |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 3,321 | | | | 2017 JAN DAF GRANT |
| DALZELL DESIGN LANDSCAPING LLC 175 SWEETWATER ROAD NORTH AUGUSTA, SC 29860 | | | 900 | | | | 2017 JUNE DAF GRANT |

| 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 |
| DANCE AUGUSTA INC PO BOX 3348 AUGUSTA, GA 30914 | 01-0872738 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |
| DIAMONDS IN THE RUFF CSRA 3005 LEANING OAK WAY MARTINEZ, GA 30907 | 27-4614533 | | 500 | | | | 2017 ANEG GRANT |

| 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 |
| DOCTORS WITHOUT BORDERS USA INC PO BOX 1856 MARRIFIELD, VA 22116 | 13-3433452 | 501(C)(3) | 200 | | | | 2017 MAR DAF GRANTS |
| DOGWOOD PARK ANIMAL CLINIC 6100 COLUMBIA ROAD GROVETOWN, GA 30813 | | | 180 | | | | NOVEMBER DAF GRANTS |

| 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 |
| DOGWOOD PARK ANIMAL CLINIC 6100 COLUMBIA ROAD GROVETOWN, GA 30813 | | | 165 | | | | SEPTEMBER DAF GRANT |
| DOHNAVUR FELLOWSHIP CORPORATION 3737 WEST LAKE DRIVE AUGUSTA, GA 30907 | 26-0629860 | | 1,000 | | | | 2017 JULY DAF GRANTS |

| 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 |
| DREW PASSMORE BATTLEWON FOUNDATION 4102 TRENTON WAY MARTINEZ, GA 30907 | | | 1,000 | | | | NOVEMBER DAF GRANTS |
| EAST GEORGIA CANCER COALITION 315 RIVERBEND ROAD SUITE 306 ATHENS, GA 30602 | 20-3273703 | 501(C)(3) | 3,500 | | | | 2017 ANEG GRANT |

| 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 |
| EPISCOPAL DAY SCHOOL 2248 WALTON WAY AUGUSTA, GA 30904 | 58-0566215 | 501(C)(3) | 4,000 | | | | DECEMBER DAF GRANTS |
| EVANS HIGH SCHOOL 4550 COX ROAD EVANS, GA 30809 | | | 1,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| FAIRVIEW LIFE CHANGING MINISTRY INC 3105 MILLEDGEVILLE ROAD AUGUSTA, GA 30904 | 02-0702451 | 501(C)(3) | 3,500 | | | | 2017 ANEG GRANT |
| FAMILIES AND COMMUNITIES TOGETHER RELIEF-FACT RELIEF 1776 PEACHTREE ST NW STE 400S ATLANTA, GA 30309 | 47-2746306 | | 6,535 | | | | DECEMBER DAF GRANTS |

| 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 |
| FAMILY CONNECTION OF COLUMBIA COUNTY 5915 EUCHEE CREEK DRIVE GROVETOWN, GA 30813 | 58-2658852 | 501(C)(3) | 12,000 | | | | 2016 URG GRANT |
| FAMILY PROMISE OF AUGUSTA INC 2177 CENTRAL AVENUE AUGUSTA, GA 30904 | 58-2279801 | | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| FIRESIDE MINISTRIES & INDUSTRIES INC PO BOX 2525 AUGUSTA, GA 30903 | 84-1724041 | | 2,500 | | | | 2017 JULY DAF GRANTS |
| FIRST PRESBYTERIAN CHURCH AIKEN 224 BARNWELL AVENUE NW AIKEN, SC 29801 | | | 4,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| FIRST TEE OF AIKEN 901 HOUNSLAKE DRIVE AIKEN, SC 29803 | 26-4784141 | 501(C)(3) | 2,000 | | | | 2017 ANEG GRANT |
| FIRST UNITED METHODIST CHURCH OF THOMSON PO BOX 8 THOMSON, GA 30824 | 58-6012676 | 501(C)(3) | 20,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| FIRST UNITED METHODIST CHURCH OF THOMSON PO BOX 8 THOMSON, GA 30824 | 58-6012676 | 501(C)(3) | 3,000 | | | | OCTOBER DAF GRANT |
| FIX GEORGIA PETS INC 6300 POWERS FERRY ROAD SUITE 600-205 ATLANTA, GA 30339 | 45-5492739 | | 500 | | | | 2017 ANEG GRANT |

| 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 |
| FORE AUGUSTA FOUNDATION INC 3165 DAMASCUS ROAD AUGUSTA, GA 30909 | 58-2415361 | 501(C)(3) | 9,000 | | | | 2017 ANEG GRANT |
| FRAGILE KIDS FOUNDATION 3825 PRESIDENTIAL PARKWAY SUITE 103 103 ATLANTA, GA 30340 | 58-1915583 | 501(C)(3) | 2,500 | | | | 2017 ANEG GRANT |

| 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 |
| FRIENDS OF THE AIKEN RAILROAD DEPOT PO BOX 117 AIKEN, SC 29802 | 57-1089425 | | 10,920 | | | | AUGUST 2017 DAF |
| FRIENDS OF THE AIKEN RAILROAD DEPOT PO BOX 117 AIKEN, SC 29802 | 57-1089425 | | 16,800 | | | | 2017 JUNE DAF GRANT |

| 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 |
| FRIENDS OF THE AIKEN RAILROAD DEPOT PO BOX 117 AIKEN, SC 29802 | 57-1089425 | | 7,000 | | | | 2017 APR DAF GRANT |
| FRIENDS WITH BENEFITS 91839 CENTRAL AVE AUGUSTA, GA 30904 | | | 27,500 | | | | 2017 APR DAF GRANT |

| 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 |
| FRIENDS WITH BENEFITS 91839 CENTRAL AVE AUGUSTA, GA 30904 | | | 25,000 | | | | 2017 APR DAF GRANT |
| FRIENDSHIP COMMUNITY IMPROVEMENT CORPORATION PO BOX 587 AIKEN, SC 29802 | 54-2190777 | 501(C)(3) | 15,000 | | | | 2016 URG GRANT |

| 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 |
| GARDEN CITY RESCUE MISSION INC PO BOX 2493 AUGUSTA, GA 30903 | 74-3097004 | 501(C)(3) | 3,000 | | | | 2017 ANEG GRANT |
| GEM AIKEN HIGH SCHOOL SCHOLARSHIP PROGRAM 1604 HUNTSMAN DR AIKEN, SC 29803 | 46-2204827 | | 500 | | | | OCTOBER DAF GRANT |

| 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 |
| GEORGETOWN UNIVERSITY MEDICAL CENTER 3300 WHIETHAVEN STREET NW SUITE 4000 WASHINGTON, DC 20007 | | | 950,000 | | | | NOVEMBER DAF GRANTS |
| GEORGIA CENTER FOR NONPROFITS 100 PEACHTREE STREET SUITE 1500 ATLANTA, GA 30303 | 58-2554789 | 501(C)(3) | 4,125 | | | | SEPTEMBER DAF GRANT |

| 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 |
| GEORGIA CENTER FOR NONPROFITS 100 PEACHTREE STREET SUITE 1500 ATLANTA, GA 30303 | 58-2554789 | 501(C)(3) | 8,250 | | | | SEPTEMBER DAF GRANT |
| GEORGIA HEALTH SCIENCES FOUNDATION 1120 15TH STREET FL- 1000 AUGUSTA, GA 30912 | 35-2310573 | 501(C)(3) | 600,000 | | | | INSTALLMENT 3 OF 5 YEAR PLEDGE - CFCSRA |

| 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 |
| GEORGIA HEALTH SCIENCES FOUNDATION 1120 15TH STREET FL- 1000 AUGUSTA, GA 30912 | 35-2310573 | 501(C)(3) | 15,000 | | | | NOVEMBER DAF GRANTS |
| GEORGIA HEALTH SCIENCES FOUNDATION 1120 15TH STREET FL- 1000 AUGUSTA, GA 30912 | 35-2310573 | 501(C)(3) | 150,000 | | | | SEPTEMBER OUT OF CYCLE GRANT |

| 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 |
| GEORGIA HEALTH SCIENCES FOUNDATION 1120 15TH STREET FL- 1000 AUGUSTA, GA 30912 | 35-2310573 | 501(C)(3) | 15,000 | | | | NOVEMBER DAF GRANTS |
| GEORGIA HEALTH SCIENCES FOUNDATION 1120 15TH STREET FL- 1000 AUGUSTA, GA 30912 | 35-2310573 | 501(C)(3) | 250,000 | | | | OCTOBER OUT OF CYCLE GRANT |

| 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 |
| GEORGIA HEALTH SCIENCES FOUNDATION 1120 15TH STREET FL- 1000 AUGUSTA, GA 30912 | 35-2310573 | 501(C)(3) | 600,000 | | | | INSTALLMENT 3 OF 5 YEAR PLEDGE - ANGC |
| GEORGIA HISTORICAL SOCIETY 104 W GASTON STREET SAVANNAH, GA 31401 | | 501(C)(3) | 100 | | | | 2017 JULY DAF GRANTS |

| 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 |
| GEORGIA NATURAL RESOURCES FOUNDATION 2 MARTIN LUTHER KING JR DRIVE SE ATLANTA, GA 30334 | | | 5,000 | | | | NOVEMBER DAF GRANTS |
| GEORGIA RESEARCH ALLIANCE INC 191 PEACHTREE STREET NE SUITE 849 ATLANTA, GA 30303 | 58-1901815 | | 25,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| GIRL SCOUTS OF SOUTH CAROLINA 5 INDEPENDENCE POINT SUITE 120 GREENVILLE, SC 29615 | | | 500 | | | | NOVEMBER DAF GRANTS |
| GOLDEN HARVEST FOOD BANK 3310 COMMERCE DRIVE AUGUSTA, GA 30909 | 58-1466516 | 501(C)(3) | 10,500 | | | | 2017 ANEG GRANT |

| 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 |
| GOLDEN HARVEST FOOD BANK 3310 COMMERCE DRIVE AUGUSTA, GA 30909 | 58-1466516 | 501(C)(3) | 1,000 | | | | 2017 JAN DAF GRANT |
| GOODWILL INDUSTRIES OF MIDDLE GEORGIA INC 3145 WASHINGTON ROAD AUGUSTA, GA 30907 | 58-1249683 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| GREAT EXPECTATIONS OUTREACH CENTER INC 204 OLD MILL RD MARTINEZ, GA 30907 | 45-2818977 | | 500 | | | | 2017 ANEG GRANT |
| GREAT OAK AIKEN THERAPEUTIC RIDING CENTER PO BOX 1288 AIKEN, SC 29802 | | | 2,500 | | | | 2017 JULY DAF GRANT |

| 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 |
| GREAT OAK AIKEN THERAPEUTIC RIDING CENTER PO BOX 1288 AIKEN, SC 29802 | | | 1,000 | | | | NOVEMBER DAF GRANTS |
| GREATER AUGUSTA ARTS COUNCIL PO BOX 1776 AUGUSTA, GA 30903 | 58-6074146 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| GREATER AUGUSTA FELLOWSHIP OF CHRISTIAN ATHLETES PO BOX 204168 AUGUSTA, GA 30917 | 44-0610626 | | 500 | | | | 2017 ANEG GRANTS |
| GREATER AUGUSTA PARTNERSHIP FOR LITERACY PO BOX 16454 AUGUSTA, GA 30919 | 45-4676518 | | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| GREENVILLE HEALTH SYSTEM 407 BELMONT AVE GREENVILLE, SC 29601 | | | 250 | | | | NOVEMBER DAF GRANT |
| HALE FOUNDATION INC PO BOX 2843 AUGUSTA, GA 30914 | 58-1947946 | 501(C)(3) | 500 | | | | NOVEMBER DAF-REISSUE |

| 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 |
| HALE FOUNDATION INC PO BOX 2843 AUGUSTA, GA 30914 | 58-1947946 | 501(C)(3) | 100 | | | | NOVEMBER DAF GRANTS |
| HALE FOUNDATION INC PO BOX 2843 AUGUSTA, GA 30914 | 58-1947946 | 501(C)(3) | 500 | | | | 2017 JAN DAF GRANT |

| 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 |
| HALE FOUNDATION INC PO BOX 2843 AUGUSTA, GA 30914 | 58-1947946 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |
| HALE FOUNDATION INC PO BOX 2843 AUGUSTA, GA 30914 | 58-1947946 | 501(C)(3) | 9,750 | | | | 2016 URG GRANT |

| 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 |
| HANDS TO PAWS 1727 FOREST CREEK ROAD AUGUSTA, GA 30909 | 81-3544786 | | 6,500 | | | | 2017 ANEG GRANT |
| HARRISBURG FAMILY HEALTH CARE INC 309 CRAWFORD AVENUE AUGUSTA, GA 30904 | 26-4366421 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| HARRY JACOBS CHAMBER MUSIC SOCIETY PO BOX 15286 AUGUSTA, GA 30919 | 58-1917629 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| HEARTSONG ANIMAL RESCUE AND SANCTUARY INC 421 S BELAIR ROAD 5 MARTINEZ, GA 30907 | 11-3760901 | | 4,000 | | | | 2017 ANEG GRANT |

| 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 |
| HERITAGE ACADEMY 333 GREENE STREET AUGUSTA, GA 30901 | 31-1727988 | 501(C)(3) | 50,000 | | | | 2017 MAR DAF GRANT |
| HERITAGE ACADEMY 333 GREENE STREET AUGUSTA, GA 30901 | 31-1727988 | 501(C)(3) | 6,000 | | | | 2017 ANEG GRANT |

| 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 |
| HERITAGE ACADEMY 333 GREENE STREET AUGUSTA, GA 30901 | 31-1727988 | 501(C)(3) | 1,000 | | | | 2017 MAR DAF GRANT |
| HERITAGE ACADEMY 333 GREENE STREET AUGUSTA, GA 30901 | 31-1727988 | 501(C)(3) | 2,500 | | | | 2017 JULY DAF GRANTS |

| 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 |
| HERITAGE ACADEMY 333 GREENE STREET AUGUSTA, GA 30901 | 31-1727988 | 501(C)(3) | 50,000 | | | | DECEMBER OUT OF CYCLE GRANTS |
| HERITAGE ACADEMY 333 GREENE STREET AUGUSTA, GA 30901 | 31-1727988 | 501(C)(3) | 25,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| HISTORIC AUGUSTA ENDOWMENT TRUST PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 350 | | | | 2017 JULY DAF GRANTS |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 19,500 | | | | NOVEMBER OUT OF CYCLE GRANT |

| 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 |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 488 | | | | OCTOBER DAF |

| 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 |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 1,801 | | | | NOVEMBER DAF GRANTS |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 14,135 | | | | 2017 FEB DAF GRANTS |

| 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 |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 6,021 | | | | 2017 APR DAF GRANT |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |

| 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 |
| HISTORIC AUGUSTA INC PO BOX 37 AUGUSTA, GA 30903 | 58-6072126 | 501(C)(3) | 100 | | | | 2017 MAY DAF GRANT |
| HITCHCOCK HEALTHCARE REHABILITATION CENTER 690 MEDICAL PARK DRIVE AIKEN, SC 29801 | 57-0371732 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| HONDURAS AGAPE FOUNDATION PO BOX 6315 AIKEN, SC 29804 | 33-1046574 | | 1,800 | | | | DECEMBER DAF OUT OF CYCLE |
| HONDURAS AGAPE FOUNDATION PO BOX 6315 AIKEN, SC 29804 | 33-1046574 | | 200 | | | | DECEMBER DAF GRANTS |

| 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 |
| HOPE FOR AUGUSTA 624 GREENE STREET AUGUSTA, GA 30901 | 58-0566181 | | 2,500 | | | | 2017 ANEG GRANT |
| HOPE FOR AUGUSTA 624 GREENE STREET AUGUSTA, GA 30901 | 58-0566181 | | 15,000 | | | | 2016 URG GRANT |

| 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 |
| HOPE HOUSE INC PO BOX 3597 AUGUSTA, GA 30914 | 58-2074040 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |
| HOPE HOUSE INC PO BOX 3597 AUGUSTA, GA 30914 | 58-2074040 | 501(C)(3) | 1,000 | | | | 2017 MAR DAF GRANT |

| 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 |
| HOPE HOUSE INC PO BOX 3597 AUGUSTA, GA 30914 | 58-2074040 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |
| HOSPICE HOUSE FOUNDATION OF WNC INC PO BOX 815 FRANKLIN, NC 28744 | 81-0677399 | | 1,000 | | | | 2017 MAR DAF GRANTS |

| 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 |
| ICEBOX MINISTRIES INCORPORATED 1736 FENWICK ST AUGUSTA, GA 30904 | 46-3956333 | | 500 | | | | 2017 ANEG GRANT |
| IMPERIAL COMMUNITY THEATRE PO BOX 31126 AUGUSTA, GA 30903 | 58-1950583 | 501(C)(3) | 3,000 | | | | 2017 ANEG GRANT |

| 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 |
| JACOBS LAND MANAGEMENT 733 SCOTT NIXON MEMORIAL DRIVE AUGUSTA, GA 30907 | | | 2,500 | | | | AUGUST OUT OF CYCLE DAF 2017 |
| JACOBS LAND MANAGEMENT 733 SCOTT NIXON MEMORIAL DRIVE AUGUSTA, GA 30907 | | | 250 | | | | AUGUST 2017 DAF |

| 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 |
| JACOBS LAND MANAGEMENT 733 SCOTT NIXON MEMORIAL DRIVE AUGUSTA, GA 30907 | | | 250 | | | | SEPTEMBER DAF GRANT |
| JACOBS LAND MANAGEMENT 733 SCOTT NIXON MEMORIAL DRIVE AUGUSTA, GA 30907 | | | 250 | | | | OCTOBER DAF |

| 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 |
| JACOBS LAND MANAGEMENT 733 SCOTT NIXON MEMORIAL DRIVE AUGUSTA, GA 30907 | | | 250 | | | | DECEMBER DAF GRANTS |
| JACOBS LAND MANAGEMENT 733 SCOTT NIXON MEMORIAL DRIVE AUGUSTA, GA 30907 | | | 250 | | | | NOVEMBER DAF GRANTS |

| 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 |
| JENKINS COMMUNITY ENRICHMENT CENTER INC 4218 WINDSOR SPRING ROAD HEPHZIBAH, GA 30815 | 27-2486748 | | 9,750 | | | | 2016 URG GRANT |
| JENNY CLARK MEMORIAL SCHOLARSHIP 3508 GLOUCESTER COURT MARTINEZ, GA 30907 | 20-3598303 | 501(C)(3) | 8,000 | | | | 2017 ANEG GRANT |

| 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 |
| JESSYE NORMAN SCHOOL OF THE ARTS PO BOX 2182 AUGUSTA, GA 30903 | 31-1776667 | | 500 | | | | 2017 MAR DAF GRANT |
| JULIE'S HOUSE INC PO BOX 204235 MARTINEZ, GA 30907 | 33-1090837 | 501(C)(3) | 2,000 | | | | 2017 ANEG GRANT |

| 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 |
| KENNESAW STATE UNIVERSITY 585 COBB AVE MD 0119 KENNESAW, GA 30144 | 23-7034345 | | 750 | | | | AUGUST 2017 DAF |
| KENNESAW STATE UNIVERSITY 585 COBB AVE MD 0119 KENNESAW, GA 30144 | 23-7034345 | | 750 | | | | 2017 JULY DAF FUNDS |

| 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 |
| KIDS RESTART PO BOX 10001 AUGUSTA, GA 30903 | 58-2423659 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| KRUHU INC 1242 BROAD STREET AUGUSTA, GA 30901 | | | 4,374 | | | | 2017 JULY DAF GRANTS |

| 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 |
| KRUHU INC 1242 BROAD STREET AUGUSTA, GA 30901 | | | 734 | | | | AUGUST 2017 DAF |
| KRUHU INC 1242 BROAD STREET AUGUSTA, GA 30901 | | | 5,402 | | | | SEPTEMBER DAF GRANT |

| 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 |
| LACES4LOVE 302 GEORGIA AVENUE NORTH AUGUSTA, SC 29841 | 26-0462971 | | 1,000 | | | | 2017 ANEG GRANT |
| LANDER UNIVERSITY FOUNDATION 320 STANLEY AVE GREENWOOD, SC 29649 | 57-0327816 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| LE CHAT NOIR 304 EIGHTH STREET AUGUSTA, GA 30901 | 75-3256985 | 501(C)(3) | 500 | | | | 2017 ANEG GRAT |
| LEADERSHIP AUGUSTA PO BOX 1837 AUGUSTA, GA 30903 | | | 1,100 | | | | 2017 JUNE DAF GRANTS |

| 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 |
| LEADERSHIP GEORGIA FOUNDATION 270 PEACHTREE NW SUITE 2200 ATLANTA, GA 30303 | 58-1329285 | 501(C)(3) | 250 | | | | 2017 APR DAF GRANT |
| LOW COUNTRY LAND TRUST 43 WENTWORTH STREET CHARLESTON, SC 29401 | 57-0809313 | | 1,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| LUTHERAN CHURCH OF THE RESURRECTION 825 GREENE STREET AUGUSTA, GA 30901 | | 501(C)(3) | 8,000 | | | | 2017 JAN DAF GRANT |
| LUTHERAN CHURCH OF THE RESURRECTION 825 GREENE STREET AUGUSTA, GA 30901 | | 501(C)(3) | 8,000 | | | | AUGUST 2017 DAF |

| 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 |
| LYNNDAL INC 1490 EISENHOWER DRIVE AUGUSTA, GA 30904 | 58-1117170 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| MACH ACADEMY INC 1850 CHESTER AVENUE AUGUSTA, GA 30906 | 58-2013645 | 501(C)(3) | 250 | | | | DECEMBER DAF GRANTS |

| 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 |
| MAKE A WISH FOUNDATION GAALA 1775 THE EXCHANGE SE SUITE 200 ATLANTA, GA 30339 | 58-2146828 | 501(C)(3) | 10,500 | | | | 2017 ANEG GRANT |
| MARTINEZ EVANS LITTLE LEAGUE PO BOX 204935 MARTINEZ, GA 30907 | 58-1347733 | | 2,000 | | | | 2017 ANEG GRANT |

| 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 |
| MASTERS CITY LITTLE LEAGUE 2022 BLOOMINGDALE STREET AUGUSTA, GA 30906 | 58-2314662 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |
| MCDUFFIE MUSEUM INC PO BOX 539 THOMSON, GA 30824 | 01-0678012 | 501(C)(3) | 100,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| MCDUFFIE MUSEUM INC PO BOX 539 THOMSON, GA 30824 | 01-0678012 | 501(C)(3) | 4,000 | | | | OCTOBER DAF GRANT |
| MEDICAL UNIVERSITY OF SOUTH CAROLINA CHILDREN'S HOSPITAL FUND 59 BEE STREET MSC 201 CHARLESTON, SC 29425 | | | 50,000 | | | | 2017 JUNE DAF GRANT |

| 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 |
| MEGIDDO DREAM STATION 103 CANAL STREET GRANITEVILLE, SC 29829 | 45-5592497 | | 2,000 | | | | 2017 ANEG GRANT |
| MEMORIAL DRIVE PRESBYTERIAN CHURCH 11612 MEMORIAL DRIVE HOUSTON, TX 77024 | | | 1,000 | | | | SEPTEMBER DAF GRANT |

| 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 |
| MENTAL HEALTH AMERICA OF AIKEN COUNTY PO BOX 1074 AIKEN, SC 29802 | 57-6026607 | 501(C)(3) | 4,000 | | | | 2017 ANEG GRANT |
| MERCY MINISTRIES INC 1739 FENWICK STREET AUGUSTA, GA 30904 | 03-0391131 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |

| 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 |
| MINISTRY WITH EXCELLENCE 1785 EAST PARK PLACE BLVD 870523 STONE MOUNTAIN, GA 30087 | | | 2,500 | | | | DECEMBER DAF GRANTS |
| MIRACLE MAKING MINISTRIES INC PO BOX 10044 AUGUSTA, GA 30903 | 58-2358627 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| MISSION ON THE MOVE INC PO BOX 206 SPRINGFIELD, GA 31329 | 58-1681122 | | 1,000 | | | | SEPTEMBER DAF GRANT |
| MOLLY'S MILITIA PO BOX 6816 NORTH AUGUSTA, SC 29861 | 57-1120106 | 501(C)(3) | 200 | | | | 2017 MAR DAF GRANTS |

| 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 |
| MORRIS MUSEUM OF ART ONE 10TH STREET SUITE 320 AUGUSTA, GA 30901 | 58-6189260 | 501(C)(3) | 1,500 | | | | NOVEMBER DAF GRANTS |
| MORRIS MUSEUM OF ART ONE 10TH STREET SUITE 320 AUGUSTA, GA 30901 | 58-6189260 | 501(C)(3) | 250 | | | | 2017 MAY DAF GRANT |

| 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 |
| MORRIS MUSEUM OF ART ONE 10TH STREET SUITE 320 AUGUSTA, GA 30901 | 58-6189260 | 501(C)(3) | 10,000 | | | | NOVEMBER DAF GRANTS |
| MORRIS MUSEUM OF ART ONE 10TH STREET SUITE 320 AUGUSTA, GA 30901 | 58-6189260 | 501(C)(3) | 25,000 | | | | 2017 MAR DAF GRANT |

| 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 |
| MORRIS MUSEUM OF ART ONE 10TH STREET SUITE 320 AUGUSTA, GA 30901 | 58-6189260 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |
| NEW BETHLEHEM COMMUNITY CENTER 1336 CONKLIN AVE AUGUSTA, GA 30901 | 20-0479897 | 501(C)(3) | 2,500 | | | | 2017 ANEG GRANT |

| 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 |
| NEW COVENANT PRESBYTERIAN CHURCH 526 HITCHCOCK PARKWAY AIKEN, SC 29801 | 57-0765929 | | 1,800 | | | | 2017 FEB DAF GRANTS |
| NEW COVENANT PRESBYTERIAN CHURCH 526 HITCHCOCK PARKWAY AIKEN, SC 29801 | 57-0765929 | | 1,800 | | | | AUGUST 2017 DAF |

| 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 |
| NEW COVENANT PRESBYTERIAN CHURCH 526 HITCHCOCK PARKWAY AIKEN, SC 29801 | 57-0765929 | | 1,800 | | | | 2017 JUNE DAF GRANTS |
| NEW COVENANT PRESBYTERIAN CHURCH 526 HITCHCOCK PARKWAY AIKEN, SC 29801 | 57-0765929 | | 1,800 | | | | RELIGION |

| 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 |
| NEWFIRE MEDIA 43 CRYSTAL LAKE DRIVE SUITE 200 NORTH AUGUSTA, SC 29841 | | | 1,035 | | | | SEPTEMBER DAF GRANT |
| NEWFIRE MEDIA 43 CRYSTAL LAKE DRIVE SUITE 200 NORTH AUGUSTA, SC 29841 | | | 120 | | | | AUGUST 2017 DAF |

| 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 |
| NEWFIRE MEDIA 43 CRYSTAL LAKE DRIVE SUITE 200 NORTH AUGUSTA, SC 29841 | | | 120 | | | | AUGUST 2017 DAF |
| NORTH AUGUSTA FORWARD PO BOX 6067 NORTH AUGUSTA, SC 29861 | 57-1086318 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| O'KELLY CHAPEL BAPTIST CHURCH PO BOX 331 LOGANVILLE, GA 30052 | | | 2,500 | | | | 2017 APR DAF GRANT |
| ONE HUNDRED MILES PO BOX 2056 BRUNSWICK, GA 31521 | 45-5260656 | | 1,000 | | | | NOVEMBER DAF GRANTS |

| 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 |
| PARALYZED VETERANS OF AMERICA - SE 4010 DEANS BRIDGE ROAD HEPHZIBAH, GA 30815 | 58-6055069 | | 3,000 | | | | 2017 ANEG GRANT |
| PATIENCE AND LOVE INC 2580 MATTHEWS LANE MALABAR, FL 32950 | | | 144 | | | | 2017 MAY DAF GRANT |

| 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 |
| PETEDGE PO BOX 845451 BOSTON, MA 02284 | | | 302 | | | | 2017 APR DAF GRANT |
| PETSMART 225 ROBERT C DANIEL PARKWAY AUGUSTA, GA 30909 | | | 183 | | | | 2017 FEB DAF GRANTS |

| 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 |
| PETSMART 225 ROBERT C DANIEL PARKWAY AUGUSTA, GA 30909 | | | 428 | | | | OCTOBER DAF GRANT |
| PETSMART 225 ROBERT C DANIEL PARKWAY AUGUSTA, GA 30909 | | | 341 | | | | DECEMBER DAF GRANTS |

| 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 |
| PHINIZY CENTER FOR WATER SCIENCES 1858 LOCK DAM ROAD AUGUSTA, GA 30906 | 58-2247999 | 501(C)(3) | 1,000 | | | | 2017 APR DAF GRANT |
| PHINIZY CENTER FOR WATER SCIENCES 1858 LOCK DAM ROAD AUGUSTA, GA 30906 | 58-2247999 | 501(C)(3) | 500 | | | | DECEMBER DAF GRANTS |

| 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 |
| PHINIZY CENTER FOR WATER SCIENCES 1858 LOCK DAM ROAD AUGUSTA, GA 30906 | 58-2247999 | 501(C)(3) | 250 | | | | AUGUST 2017 DAF |
| PHINIZY CENTER FOR WATER SCIENCES 1858 LOCK DAM ROAD AUGUSTA, GA 30906 | 58-2247999 | 501(C)(3) | 250 | | | | IN MEMORY MRS LEE SMITH |

| 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 |
| PHINIZY CENTER FOR WATER SCIENCES 1858 LOCK DAM ROAD AUGUSTA, GA 30906 | 58-2247999 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |
| PHOENIX PRINTING 601 11TH STREET AUGUSTA, GA 30901 | | | 554 | | | | OCTOBER DAF GRANT |

| 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 |
| PRESBYTERIAN HOMES OF GEORGIA PO BOX 957267 DULUTH, GA 30095 | 58-1944849 | | 1,000 | | | | DECEMBER DAF GRANTS |
| PROJECT LIFESAVER OF NORTH AUGUSTA- AIKEN COUNTY PO BOX 6400 NORTH AUGUSTA, SC 29861 | 20-5689180 | | 500 | | | | 2017 ANEG GRANT |

| 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 |
| PROPET DISTRIBUTORS 2100 PRINCIPAL ROW SUITE ORLANDO, FL 32837 | | | 1,575 | | | | 2017 MAY DAF GRANT |
| PUBLIC EDUCATION PARTNERS PO BOX 3821 AIKEN, SC 29802 | 57-1030778 | 501(C)(3) | 9,750 | | | | 2016 URG GRANT |

| 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 |
| RANDOLPH COLLEGE 2500 RIVERMONT AVENUE LYNCHBURG, VA 24503 | 54-0505941 | | 350 | | | | 2017 JAN DAF GRANT |
| RANDOLPH COLLEGE 2500 RIVERMONT AVENUE LYNCHBURG, VA 24503 | 54-0505941 | | 500 | | | | AUGUST 2017 DAF |

| 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 |
| RAPE CRISIS & SEXUAL ASSAULT SERVICES - UNIVERSITY HOSPITAL 1350 WALTON WAY AUGUSTA, GA 30901 | 58-1581102 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |
| REID MEMORIAL PRESBYTERIAN CHURCH 2261 WALTON WAY AUGUSTA, GA 30904 | | 501(C)(3) | 5,000 | | | | 2017 MAR DAF GRANT |

| 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 |
| REID MEMORIAL PRESBYTERIAN CHURCH 2261 WALTON WAY AUGUSTA, GA 30904 | | 501(C)(3) | 200 | | | | NOVEMBER DAF GRANTS |
| REID MEMORIAL PRESBYTERIAN CHURCH 2261 WALTON WAY AUGUSTA, GA 30904 | | 501(C)(3) | 15,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| REID MEMORIAL PRESBYTERIAN CHURCH 2261 WALTON WAY AUGUSTA, GA 30904 | | 501(C)(3) | 5,000 | | | | SEPTEMBER DAF GRANT |
| RESTART AUGUSTA INC PO BOX 370 AUGUSTA, GA 30903 | 46-5201370 | | 7,500 | | | | 2016 URG GRANT |

| 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 |
| RESTART AUGUSTA INC PO BOX 370 AUGUSTA, GA 30903 | 46-5201370 | | 3,000 | | | | 2017 ANEG GRANT |
| RONALD MCDONALD HOUSE CHARITIES OF AUGUSTA 1442 HARPER STREET AUGUSTA, GA 30901 | 58-1509465 | 501(C)(3) | 6,500 | | | | 2017 ANEG GRANT |

| 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 |
| RONALD MCDONALD HOUSE CHARITIES OF AUGUSTA 1442 HARPER STREET AUGUSTA, GA 30901 | 58-1509465 | 501(C)(3) | 12,500 | | | | DECEMBER OUT OF CYCLE GRANTS |
| RONALD MCDONALD HOUSE CHARITIES OF AUGUSTA 1442 HARPER STREET AUGUSTA, GA 30901 | 58-1509465 | 501(C)(3) | 3,000 | | | | SEPTEMBER DAF GRANT |

| 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 |
| SACRED HEART CULTURAL CENTER 1301 GREENE STREET AUGUSTA, GA 30901 | 58-1750019 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |
| SAFE HOMES OF AUGUSTA INC PO BOX 3187 AUGUSTA, GA 30914 | 58-1708717 | 501(C)(3) | 8,500 | | | | 2017 ANEG GRANT |

| 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 |
| SAFE HOMES OF AUGUSTA INC PO BOX 3187 AUGUSTA, GA 30914 | 58-1708717 | 501(C)(3) | 500 | | | | NOVEMBER DAF GRANTS |
| SAFE HOMES OF AUGUSTA INC PO BOX 3187 AUGUSTA, GA 30914 | 58-1708717 | 501(C)(3) | 5,000 | | | | SEPTEMBER DAF GRANT |

| 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 |
| SAFE HOMES OF AUGUSTA INC PO BOX 3187 AUGUSTA, GA 30914 | 58-1708717 | 501(C)(3) | 1,000 | | | | NOVEMBER DAF GRANTS |
| SAFE HOMES OF AUGUSTA INC PO BOX 3187 AUGUSTA, GA 30914 | 58-1708717 | 501(C)(3) | 1,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| SAFE HOMES OF AUGUSTA INC PO BOX 3187 AUGUSTA, GA 30914 | 58-1708717 | 501(C)(3) | 562 | | | | 2017 JUNE DAF GRANT |
| SALVATION ARMY PO BOX 2523 AUGUSTA, GA 30903 | 13-2923701 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| SALVATION ARMY PO BOX 2523 AUGUSTA, GA 30903 | 13-2923701 | 501(C)(3) | 3,000 | | | | 2017 ANEG GRANT |
| SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607 | | 501(C)(3) | 200 | | | | 2017 MAR DAF GRANTS |

| 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 |
| SARATOGA WARHORSE FOUNDATION 517 SUMTER STREET SE AIKEN, SC 29801 | 46-2934258 | | 1,500 | | | | NOVEMBER DAF GRANTS |
| SAVANNAH RIVER CANCER FOUNDATION PO BOX 3694 AIKEN, SC 29802 | 20-0235245 | 501(C)(3) | 4,500 | | | | 2017 ANEG GRANT |

| 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 |
| SAVANNAH RIVER CLEAN WATER FUND INC PO BOX 2392 AUGUSTA, GA 30903 | 47-3773926 | | 5,000 | | | | OCTOBER DAF GRANT |
| SAVANNAH RIVER CLEAN WATER FUND INC PO BOX 2392 AUGUSTA, GA 30903 | 47-3773926 | | 1,000 | | | | 2017 APR DAF GRANT |

| 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 |
| SAVANNAH RIVERKEEPER PO BOX 60 AUGUSTA, GA 30903 | 58-2630660 | 501(C)(3) | 3,500 | | | | 2017 ANEG GRANT |
| SENIOR CITIZENS COUNCIL OF GREATER AUGUSTA 4210 COLUMBIA ROAD MARTINEZ, GA 30907 | 58-1519107 | 501(C)(3) | 2,500 | | | | 2017 ANEG GRANT |

| 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 |
| SIGNMA PHI EDUCATION FOUNDATION INC 163 RUGBY ROAD CHARLOTTESVILLE, VA 22903 | 13-3269746 | | 500 | | | | DECEMBER DAF GRANTS |
| SILVER BLUFF AUDUBON CENTER & SANCTUARY 4542 SILVER BLUFF ROAD JACKSON, SC 29831 | 13-1624102 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |

| 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 |
| SOCIETY OF SAINT VINCENT DE PAUL - GEORGIA 1326 WASHINGTON ROAD THOMSON, GA 30824 | 58-0967972 | | 500 | | | | 2017 ANEG GRANT |
| SOUTH UNIVERSITY-AMERICAN PHARMACISTS ASSOCIATION ACADEMY OF STUDENT PHARMA 709 MALL BOULEVARD SAVANNAH, GA 31406 | 20-4207564 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| SOUTHEASTERN BAPTIST THEOLOGICAL SEMINARY PO BOX 1889 WAKE FOREST, NC 27588 | 56-0649251 | 501(C)(3) | 2,000 | | | | 2017 MAY DAF GRANT |
| SOUTHEASTERN FIREFIGHTERS' BURN FOUNDATION 3614 J DEWEY GRAY CIRCLE BUILDING C C AUGUSTA, GA 30909 | 58-1804007 | 501(C)(3) | 3,000 | | | | 2017 ANEG GRANT |

| 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 |
| SOUTHEASTERN PARALYZED VETERANS OF AMERICA 4010 DEANS BRIDGE ROAD HEPHZIBAH, GA 30815 | 58-6055069 | | 5,000 | | | | 2016 URG GRANT |
| SOUTHERN SOULS ANIMAL RESCUE 3902 ADAMS CHAPEL ROAD HARLEM, GA 30814 | 45-5465934 | | 3,000 | | | | 2017 ANEG GRANT |

| 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 |
| SPCA ALBRECHT CENTER FOR ANIMAL WELFARE 199 WILLOW RUN ROAD AIKEN, SC 29801 | 57-0329782 | | 1,000 | | | | NOVEMBER DAF GRANTS |
| SPRINGFIELD VILLAGE PARK FOUNDATION INC PO BOX 16838 FERNANDINA, FL 32035 | 58-2092644 | | 10,000 | | | | 2017 JAN DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | DECEMBER DAF GRANTS |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 JAN DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | OCTOBER DAF GRANT |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 JUNE DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | SEPTEMBER DAF GRANT |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 MAY DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | NOVEMBER DAF GRANTS |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 MAY DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | NOVEMBER DAF GRANTS |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 APR DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | OCTOBER DAF GRANT |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 JUNE DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | SEPTEMBER DAF GRANT |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 JAN DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | DECEMBER DAF GRANTS |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 FEB DAF GRANTS |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 FEB DAF GRANTS |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 APR DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 MAR DAF GRANT |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 MAR DAF GRANT |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 500 | | | | AUGUST 2017 DAF |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | 2017 AUGUST OUT OF CYCLE GRANTS |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | 2017 AUGUST OUT OF CYCLE GRANTS |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 1,665 | | | | AUGUST 2017 DAF |

| 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 |
| SPRINGWOOD NURSERIES INC 4545 COX ROAD EVANS, GA 30809 | | | 3,760 | | | | AUGUST 2017 DAF |
| SRS HERITAGE FOUNDATION INC P O BOX 2226 AIKEN, SC 29802 | 20-1629370 | | 12,090 | | | | AUGUST 2017 DAF |

| 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 |
| SRS HERITAGE FOUNDATION INC P O BOX 2226 AIKEN, SC 29802 | 20-1629370 | | 18,600 | | | | 2017 JUNE DAF GRANT |
| SRS HERITAGE FOUNDATION INC P O BOX 2226 AIKEN, SC 29802 | 20-1629370 | | 7,750 | | | | 2017 APR DAF GRANT |

| 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 |
| ST FRANCIS CATHOLIC CHURCH 299 MAPLE STREET FRANKLIN, NC 28734 | | | 1,000 | | | | 2017 MAR DAF GRANTS |
| ST JOHN - CONCERTS WITH A CAUSE 731 GREENE STREET AUGUSTA, GA 30901 | | | 500 | | | | 2017 JAN DAF GRANT |

| 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 |
| ST JOHN UNITED METHODIST CHURCH PO BOX 444 AUGUSTA, GA 30903 | | 501(C)(3) | 5,000 | | | | 2017 JULY DAF GRANTS |
| ST JOHN UNITED METHODIST CHURCH PO BOX 444 AUGUSTA, GA 30903 | | 501(C)(3) | 5,000 | | | | 2017 FEB DAF GRANTS |

| 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 |
| ST JOHN UNITED METHODIST CHURCH PO BOX 444 AUGUSTA, GA 30903 | | 501(C)(3) | 25,000 | | | | DECEMBER DAF GRANTS |
| ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105 | 62-0646012 | | 500 | | | | DECEMBER DAF GRANTS |

| 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 |
| ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105 | 62-0646012 | | 130,806 | | | | SEPTEMBER OUT OF CYCLE GRANTS |
| ST LUKE UNITED METHODIST CHURCH 309 CRAWFORD AVE AUGUSTA, GA 30904 | | | 2,500 | | | | NOVEMBER DAF GRANTS |

| 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 |
| ST LUKE UNITED METHODIST CHURCH 309 CRAWFORD AVE AUGUSTA, GA 30904 | | | 1,000 | | | | 2017 MAY DAF GRANT |
| ST MARY'S CATHOLIC CHURCH 132 STONEHENGE CIRCLE EDGEFIELD, SC 29824 | | | 200 | | | | 2017 MAR DAF GRANTS |

| 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 |
| ST PAUL'S EPISCOPAL CHURCH 605 REYNOLDS STREET AUGUSTA, GA 30901 | 58-0684092 | 501(C)(3) | 2,975 | | | | 2017 JAN DAF GRANT |
| ST PAUL'S EPISCOPAL CHURCH 605 REYNOLDS STREET AUGUSTA, GA 30901 | 58-0684092 | 501(C)(3) | 2,975 | | | | 2017 APR DAF GRANT |

| 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 |
| ST PAUL'S EPISCOPAL CHURCH 605 REYNOLDS STREET AUGUSTA, GA 30901 | 58-0684092 | 501(C)(3) | 15,000 | | | | DECEMBER DAF GRANTS |
| ST PAUL'S EPISCOPAL CHURCH 605 REYNOLDS STREET AUGUSTA, GA 30901 | 58-0684092 | 501(C)(3) | 5,950 | | | | NOVEMBER DAF GRANTS |

| 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 |
| ST SIMONS LAND TRUST PO BOX 24615 ST SIMONS ISLAND, GA 31522 | 58-2598986 | 501(C)(3) | 1,000 | | | | 2017 MAY DAF GRANT |
| STORYLAND THEATRE INC PO BOX 14875 AUGUSTA, GA 30919 | 58-1802169 | 501(C)(3) | 1,500 | | | | 2017 ANEG GRANT |

| 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 |
| SUSAN G KOMEN BREAST CANCER FOUNDATION 5005 LBJ FREEWAY SUITE 250 DALLAS, TX 75244 | 75-1835298 | 501(C)(3) | 243 | | | | NOVEMBER DAF GRANTS |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 2,500 | | | | 2017 JULY DAF GRANTS |

| 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 |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 4,000 | | | | NOVEMBER DAF GRANTS |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 2,500 | | | | 2017 JULY DAF GRANTS |

| 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 |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 500,000 | | | | NOVEMBER DAF GRANTS |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 25,000 | | | | DECEMBER OUT OF CYCLE GRANTS |

| 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 |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 2,500 | | | | DECEMBER DAF GRANTS |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 150,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 7,000 | | | | SEPTEMBER DAF GRANT |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 50,000 | | | | 2017 JAN DAF GRANT |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 50,000 | | | | 2017 APR DAF GRANT |

| 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 |
| SYMPHONY ORCHESTRA AUGUSTA PO BOX 579 AUGUSTA, GA 30903 | 58-1806334 | 501(C)(3) | 1,000 | | | | 2017 JAN DAF GRANT |
| THAT'S WHAT FRIENDS ARE FOR INC 1707 HARROGATE PLACE AUGUSTA, GA 30906 | 26-2223839 | | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| THE 12 BANDS OF CHRISTMAS INC PO BOX 12623 AUGUSTA, GA 30914 | 26-3501540 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |
| THE AIKEN CORPORATION PO BOX 1177 AIKEN, SC 29802 | 57-1024216 | | 10,000 | | | | 2017 JAN DAF GRANT |

| 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 |
| THE AIKEN CORPORATION PO BOX 1177 AIKEN, SC 29802 | 57-1024216 | | 150,000 | | | | 2017 FEB DAF GRANTS |
| THE ANTIOCH PARTNERS 7132 PORTLAND AVE SUITE 136 RICHFIELD, MN 55423 | 26-2888198 | | 1,000 | | | | 2017 JAN DAF GRANT |

| 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 |
| THE BUILDING WORSHIP CENTER 1739 GORDON HIGHWAY AUGUSTA, GA 30904 | | | 9,000 | | | | AUGUST 2017 DAF |
| THE CENTER FOR AFRICAN AMERICAN HISTORY ART AND CULTURE 120 YORK ST NE AIKEN, SC 29801 | 80-0760009 | | 15,990 | | | | AUGUST 2017 DAF |

| 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 |
| THE CENTER FOR AFRICAN AMERICAN HISTORY ART AND CULTURE 120 YORK ST NE AIKEN, SC 29801 | 80-0760009 | | 10,250 | | | | 2017 APR DAF GRANT |
| THE CENTER FOR AFRICAN AMERICAN HISTORY ART AND CULTURE 120 YORK ST NE AIKEN, SC 29801 | 80-0760009 | | 24,600 | | | | 2017 JUNE DAF GRANT |

| 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 |
| THE CHILDREN'S ONCOLOGY GROUP FOUNDATION 3720 SPRUCE ST 506 PHILADELPHIA, PA 19104 | 45-3083156 | | 250,000 | | | | SEPTEMBER OUT OF CYCLE GRANTS |
| THE CLUBHOUSE 540 TELFAIR STREET AUGUSTA, GA 30901 | 46-2793987 | | 1,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| THE CLUBHOUSE 540 TELFAIR STREET AUGUSTA, GA 30901 | 46-2793987 | | 1,000 | | | | 2017 MAY DAF GRANT |
| THE COMMUNITY FOUNDATION FOR SARASOTA COUNTY 2635 FRUITVILLE RD SARASOTA, FL 34236 | | | 25,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| THE COMMUNITY FOUNDATION FOR THE CSRA 1450 GREENE STREET SUITE 228 AUGUSTA, GA 30901 | 58-2184345 | 501(C)(3) | 10,156 | | | | DAF GRANTS |
| THE CSRA FAMILY Y FOUNDATION INC 3570 WHEELER ROAD AUGUSTA, GA 30909 | 27-3667424 | 501(C)(3) | 2,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| THE FAMILY Y-CAMP IVEY 1050 CLAUSSEN ROAD SUITE 100 MARTINEZ, GA 30907 | | | 1,000 | | | | SEPTEMBER DAF GRANT |
| THE GEORGIA CONSERVANCY 817 WEST PEACHTREE STREET SUITE 200 200 ATLANTA, GA 30308 | 58-1027246 | 501(C)(3) | 500 | | | | 2017 MAY DAF GRANT |

| 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 |
| THE GEORGIA TRUST FOR HISTORIC PRESERVATION 1516 PEACHTREE STREET NW ATLANTA, GA 30309 | 23-7357226 | 501(C)(3) | 3,333 | | | | 2017 MAR DAF GRANT |
| THE GEORGIA TRUST FOR 1516 PEACHTREE STREET NW ATLANTA, GA 30309 | 23-7357226 | 501(C)(3) | 450 | | | | NOVEMBER DAF GRANTS |

| 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 |
| THE JO-NATHAN FOUNDATION PO BOX 85711 LEXINGTON, SC 29073 | 45-2592941 | | 500 | | | | 2017 ANEG GRANT |
| THE LYDIA PROJECT INC 1369 INTERSTATE PARKWAY AUGUSTA, GA 30909 | 30-0240036 | 501(C)(3) | 2,000 | | | | 2017 ANEG GRANT |

| 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 |
| THE OMSLIFE FOUNDATION PO BOX 2899 CYPRESS, TX 77410 | 45-4696128 | | 1,500 | | | | DECEMBER DAF GRANTS |
| THE RECING CREW PO BOX 7124 NORTH AUGUSTA, SC 29861 | 26-2858759 | 501(C)(3) | 3,500 | | | | 2017 ANEG GRANT |

| 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 |
| THE UNIVERSITY OF VIRGINIA FOUNDATION PO BOX 400218 CHARLOTTESVILLE, VA 22904 | 54-1682176 | | 1,000 | | | | 2017 MAY DAF GRANT |
| THORNWELL HOME PO BOX 60 CLINTON, SC 29325 | 57-0314418 | 501(C)(3) | 1,000 | | | | 2017 JAN DAF GRANT |

| 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 |
| THRIVE YOUTH DEVELOPMENT 4002 HIGHWAY 78 SUITE 530 165 SNELLVILLE, GA 30039 | 13-4252063 | | 500 | | | | 2017 MAY DAF GRANT |
| TREES FOR AUGUSTA INC PO BOX 40084 AUGUSTA, GA 30909 | 26-3994531 | | 500 | | | | 2017 MAY DAF GRANT |

| 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 |
| TRINITY ON THE HILL UNITED METHODIST CHURCH 1330 MONTE SANTO AVENUE AUGUSTA, GA 30904 | 45-3459828 | 501(C)(3) | 25,000 | | | | DECEMBER DAF GRANTS |
| TUESDAY'S MUSIC LIVE 605 REYNOLDS STREET AUGUSTA, GA 30901 | 58-1883886 | 501(C)(3) | 1,500 | | | | OCTOBER DAF GRANT |

| 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 |
| TURN BACK THE BLOCK PO BOX 3366 AUGUSTA, GA 30914 | 27-4686556 | | 25,000 | | | | 2017 MAR DAF GRANT |
| TURN BACK THE BLOCK PO BOX 3366 AUGUSTA, GA 30914 | 27-4686556 | | 2,498 | | | | NOVEMBER DAF GRANTS |

| 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 |
| TURN BACK THE BLOCK PO BOX 3366 AUGUSTA, GA 30914 | 27-4686556 | | 25,000 | | | | DECEMBER DAF GRANTS |
| TURN BACK THE BLOCK PO BOX 3366 AUGUSTA, GA 30914 | 27-4686556 | | 3,000 | | | | 2017 ANEG GRANT |

| 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 |
| TUTTLE-NEWTON HOME INC 2196 CENTRAL AVENUE AUGUSTA, GA 30904 | 58-0566249 | 501(C)(3) | 1,000 | | | | DECEMBER DAF GRANTS |
| UNITED WAY OF THE CSRA INC 1765 BROAD ST AUGUSTA, GA 30904 | 58-0566155 | 501(C)(3) | 500 | | | | 2017 ANEG GRANT |

| 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 |
| UNITED WAY OF THE CSRA INC 1765 BROAD ST AUGUSTA, GA 30904 | 58-0566155 | 501(C)(3) | 10,000 | | | | DECEMBER OUT OF CYCLE GRANTS |
| UNITED WAY OF THE CSRA INC 1765 BROAD ST AUGUSTA, GA 30904 | 58-0566155 | 501(C)(3) | 1,000 | | | | 2017 JAN DAF GRANT |

| 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 |
| UNITED WAY OF THE CSRA 1765 BROAD ST AUGUSTA, GA 30904 | 58-0566155 | 501(C)(3) | 134,250 | | | | 2017 MAR DAF GRANT |
| UNIVERSITY HEALTH CARE FOUNDATION 2100 CENTRAL AVENUE STE D-1 AUGUSTA, GA 30904 | 58-1343550 | 501(C)(3) | 500 | | | | 2017 JAN DAF GRANT |

| 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 |
| UNIVERSITY HEALTH CARE FOUNDATION 2100 CENTRAL AVENUE STE D-1 AUGUSTA, GA 30904 | 58-1343550 | 501(C)(3) | 10,000 | | | | 2017 JULY DAF GRANTS |
| UNIVERSITY OF GEORGIA 220 HOLMES/HUNTER ACADEMIC BUILDING ATHENS, GA 30602 | | 501(C)(3) | 750 | | | | AUGUST 2017 DAF |

| 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 |
| UNIVERSITY OF GEORGIA 220 HOLMES/HUNTER ACADEMIC BUILDING ATHENS, GA 30602 | | 501(C)(3) | 750 | | | | AUGUST 2017 DAF |
| UNIVERSITY OF GEORGIA 220 HOLMES/HUNTER ACADEMIC BUILDING ATHENS, GA 30602 | | 501(C)(3) | 200 | | | | OCTOBER DAF GRANT |

| 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 |
| UNIVERSITY OF SOUTH CAROLINA - COLUMBIA 516 MAIN STREET USC BURSARS OFFICE COLUMBIA, SC 29208 | | | 1,000 | | | | 2017 JUNE DAF GRANT |
| UNIVERSITY OF WEST GEORGIA 1601 MAPLE STREET CARROLLTON, GA 30118 | 58-6056464 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| UPSIDE OF DOWNS OF AIKEN 7 JULIE ANN COURT AIKEN, SC 29801 | 27-3358281 | | 1,500 | | | | 2017 ANEG GRANT |
| USC-AIKEN PARTNERSHIP 471 UNIVERSITY PARKWAY AIKEN, SC 29801 | 57-6017985 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| USC-AIKEN PARTNERSHIP | 57-6017985 | | 1,000 | | | | 2017 ANEG GRANT |
| USC-AIKEN PARTNERSHIP | 57-6017985 | | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| USC-AIKEN PARTNERSHIP | 57-6017985 | | 1,000 | | | | AUGUST 2017 DAF |
| USC-AIKEN PARTNERSHIP | 57-6017985 | | 10,000 | | | | 2017 APR DAF GRANT |

| 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 |
| VETERANS K9 SOLUTIONS INC 629 FIELDSTONE WAY EVANS, GA 30809 | 46-2304081 | | 8,000 | | | | 2017 ANEG GRANT |
| WALMART 260 BOBBY JONES EXPRESSWAY MARTINEZ, GA 30907 | | | 421 | | | | 2017 FEB DAF GRANTS |

| 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 |
| WALTON FOUNDATION FOR INDEPENDENCE INC 523 13TH STREET AUGUSTA, GA 30901 | 58-2408395 | 501(C)(3) | 3,000 | | | | AUGUST 2017 DAF |
| WESLEYAN COLLEGE 4760 FORSYTH ROAD MACON, GA 31210 | 58-0593438 | 501(C)(3) | 1,000 | | | | AUGUST 2017 DAF |

| 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 |
| WESLEYAN COLLEGE 4760 FORSYTH ROAD MACON, GA 31210 | 58-0593438 | 501(C)(3) | 10,000 | | | | 2017 MAY DAF GRANT |
| WESTMINSTER PRESBYTERIAN CHURCH 4303 WHEELER ROAD MARTINEZ, GA 30907 | 58-1465924 | | 10,000 | | | | DECEMBER DAF GRANTS |

| 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 |
| WESTMINSTER SCHOOLS OF AUGUSTA 3067 WHEELER ROAD AUGUSTA, GA 30909 | 58-1139804 | 501(C)(3) | 12,000 | | | | 2017 APR DAF GRANT |
| WESTMINSTER SCHOOLS OF AUGUSTA 3067 WHEELER ROAD AUGUSTA, GA 30909 | 58-1139804 | 501(C)(3) | 10,000 | | | | 2017 MAY DAF GRANT |

| 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 |
| WHEATON COLLEGE 501 COLLEGE AVENUE WHEATON, IL 60187 | 36-2182171 | | 1,500 | | | | DECEMBER DAF GRANTS |
| WHEN HELP CAN'T WAIT 3843 MARTINEZ BLVD SUITE 101 MARTINEZ, GA 30907 | 20-5733010 | 501(C)(3) | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| WHITE DOVE BILINGUAL CHRISTIAN SCHOOL SANTA CLARA STA BARB HO | | | 4,000 | | | | DECEMBER WIRE TRANSFER |
| WHITE DOVE BILINGUAL CHRISTIAN SCHOOL SANTA CLARA STA BARB HO | | | 5,000 | | | | AUGUST 2017 DAF |

| 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 |
| WHITE DOVE BILINGUAL CHRISTIAN SCHOOL SANTA CLARA STA BARB HO | | | 3,000 | | | | NOVEMBER DAF GRANTS |
| WHITE DOVE BILINGUAL CHRISTIAN SCHOOL SANTA CLARA STA BARB HO | | | 5,000 | | | | 2017 APRIL GRANT WIRE TRANSFER |

| 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 |
| WHITE DOVE BILINGUAL CHRISTIAN SCHOOL SANTA CLARA STA BARB HO | | | 5,000 | | | | 2017 FEB WIRE TRANSFER |
| WILLOWBROOK CEMETERY ASSOCIATION INC 395 MAIN STREET WESTPORT, CT 06880 | 52-2141941 | | 200 | | | | 2017 MAR DAF GRANTS |

| 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 |
| WOMEN IN PHILANTHROPY 1450 GREENE ST SUITE 228 AUGUSTA, GA 30904 | | 501(C)(3) | 1,000 | | | | 2017 FEB DAF GRANTS |
| YOUNG LIFE 2249 B WALTON WAY AUGUSTA, GA 30904 | 84-0385934 | 501(C)(3) | 11,000 | | | | 2017 JAN DAF GRANT |

| 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 |
| YOUNG LIFE 2249 B WALTON WAY AUGUSTA, GA 30904 | 84-0385934 | 501(C)(3) | 2,000 | | | | 2017 MAR DAF GRANT |
| YOUNG LIFE 2249 B WALTON WAY AUGUSTA, GA 30904 | 84-0385934 | 501(C)(3) | 500 | | | | OCTOBER DAF GRANT |

| 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 |
| YOUNG LIFE 2249 B WALTON WAY AUGUSTA, GA 30904 | 84-0385934 | 501(C)(3) | 1,000 | | | | SEPTEMBER DAF GRANT |
| YOUNG PEOPLE IN RECOVERY AUGUSTA CHAPTER 2217 CENTRAL AVENUE AUGUSTA, GA 30904 | 46-4109067 | | 1,000 | | | | 2017 ANEG GRANT |

| 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 |
| YOUTH FOR CHRIST P O BOX 4478 ENGLEWOOD, CO 80155 | 36-2193619 | | 4,000 | | | | 2017 JULY DAF GRANTS |
| ZUBLY CEMETERY ASSN 34 FORREST DRIVE BEECH ISLAND, SC 29831 | 41-2048413 | | 500 | | | | AUGUST 2017 DAF |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
THE COMMUNITY FOUNDATION FOR THE CENTRAL
SAVANNAH RIVER AREA INC

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

2017

**Open to Public
Inspection**

Employer identification number

58-2184345

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|---|--|
| FORM 990, PART VI, SECTION A, LINE 2 | ABRAM J SEROTTA, CPA IS A MEMBER OF THE EXECUTIVE AND INVESTMENT COMMITTEE FOR THE COMMUN ITY FOUNDATION FOR THE CSRA HIS COMPANY, SEROTTA MADDOCKS, EVANS, & CO , CPA'S, COMPLETES THE FORM 990 FOR THE FOUNDATION AS WELL AS OTHER ACCOUNTING SERVICES |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART VI, SECTION A, LINE 7A | THE FOUNDATION SHALL HAVE A SELF-PERPETUATING BOARD OF DIRECTORS WHICH SHALL CONSIST OF NO T LESS THAN FIVE (5) PERSONS AND NOT MORE THAN TWENTY-FIVE (25) PERSONS, EXCEPT THAT THE N UMBER OF DIRECTORS TO CONSTITUTE THE FIRST BOARD OF DIRECTORS SHALL BE FIVE (5) IF A VACA NCY OCCURS BY REASON OF DEATH, RESIGNATION, OR REMOVAL FROM OFFICE OR OTHERWISE A MAJORITY OF THE REMAINING DIRECTORS MAY ELECT A NEW DIRECTOR TO FILL THE VACANCY FOR THE UN-EXPIRE D TERM PROVIDED SUCH A NEW DIRECTOR WAS FIRST NOMINATED BY THE NOMINATING COMMITTEE THE N OMINATING COMMITTEE LOOKS FOR A DIVERSE MIX OF COMMUNITY LEADERS THAT ARE ACTIVELY INVOLVE D IN AND COMMITTED TO MAKING THE COMMUNITY A BETTER PLACE FOR ALL TO LIVE, LEARN AND WORK |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|---|---|
| FORM 990, PART VI, SECTION B, LINE 11B | A COPY OF THE FORM 990 WILL BE PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING WITH THE IRS |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|---|---|
| FORM 990, PART VI, SECTION B, LINE 12C | EACH BOARD MEMBER IS AWARE OF THEIR DUTIES TO DISCLOSE THE FACTS OF ANY POTENTIAL CONFLICT OF INTEREST TO THE FULL BOARD MEMBERS WITH CONFLICTS OF INTEREST SHALL BE EXCUSED FROM DISCUSSING OR VOTING ON ANY TRANSACTION INVOLVING THE POSSIBLE CONFLICT OF INTEREST |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART VI, SECTION B, LINE 15 | IT IS THE RESPONSIBILITY OF THE AUDIT/FINANCE COMMITTEE TO REVIEW STAFF SALARIES DURING THE ANNUAL BUDGET PREPARATION PROCESS BEGINNING THE NEXT CALENDAR YEAR |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|---|
| FORM 990, PART VI, SECTION C, LINE 19 | THE COMMUNITY FOUNDATION FOR THE CSRA RECORDS ARE AVAILABLE TO THE PUBLIC AND ARE PROVIDED UPON REQUEST OR CAN BE FOUND ON THE FOUNDATION'S WEBSITE THE FOUNDATION IS IN ACCORDANCE WITH GEORGIA OPEN RECORDS ACT AND GEORGIA SUNSHINE LAWS |

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.
► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION FOR THE CENTRAL SAVANNAH RIVER AREA INC

Employer identification number
58-2184345

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
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Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | |
|---|--|--|----------------------------|---|---------------------------------------|--|----|
| | | | | | | Yes | No |
| (1)CSRA FOUNDATION PROPERTY HOLDINGS INC PO BOX 31358 AUGUSTA, GA 30903 58-2446343 | TO HOLD PROPERTIES GIFTED TO THE CFCSRA | GA | 501 (C) (3) | 509 (A)(3) | THE COMMUNITY FOUNDATION FOR THE CSRA | | No |
| (2)CSRA PROPERTY HOLDINGS 2 INC 1246 JONES STREET AUGUSTA, GA 30901 16-1627615 | TO HOLD PROPERTIES GIFTED TO THE CFCSRA | GA | 501 (C) (3) | | THE COMMUNITY FOUNDATION FOR THE CSRA | | No |
| (3)CSRA FOUNDATION PROPERTY HOLDINGS 3 INC PO BOX 31358 AUGUSTA, GA 30903 54-2086102 | TO HOLD PROPERTIES GIFTED TO THE CFCSRA | GA | 501 (C) (3) | | THE COMMUNITY FOUNDATION FOR THE CSRA | | No |
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Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|----------------------------|---|--|--|---------------------------------|--|---|----|--|---|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of- year assets | (h) Percentage ownership | (i) Section 512(b) (13) controlled entity? | |
|--|-------------------------|---|-------------------------------------|--|---------------------------------|---|--------------------------------|---|----|
| | | | | | | | | Yes | No |
| | | | | | | | | | |
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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

| | Yes | No |
|--|-----------|-----|
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | 1a | No |
| b Gift, grant, or capital contribution to related organization(s) | 1b | No |
| c Gift, grant, or capital contribution from related organization(s) | 1c | No |
| d Loans or loan guarantees to or for related organization(s) | 1d | No |
| e Loans or loan guarantees by related organization(s) | 1e | No |
| f Dividends from related organization(s) | 1f | No |
| g Sale of assets to related organization(s) | 1g | No |
| h Purchase of assets from related organization(s) | 1h | No |
| i Exchange of assets with related organization(s) | 1i | No |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1j | No |
| k Lease of facilities, equipment, or other assets from related organization(s) | 1k | No |
| l Performance of services or membership or fundraising solicitations for related organization(s) | 1l | No |
| m Performance of services or membership or fundraising solicitations by related organization(s) | 1m | No |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | 1n | No |
| o Sharing of paid employees with related organization(s) | 1o | No |
| p Reimbursement paid to related organization(s) for expenses | 1p | No |
| q Reimbursement paid by related organization(s) for expenses | 1q | No |
| r Other transfer of cash or property to related organization(s) | 1r | No |
| s Other transfer of cash or property from related organization(s) | 1s | Yes |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|---|----------------------------------|------------------------|--|
| (1) CSRA FOUNDATION PROPERTY HOLDINGS INC | S | 207,000 | FAIR MARKET VALUE |
| | | | |
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Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)