Form **990-PF** 

THE SE THE SECOND

# EXTENDED TO NOVEMBER 15, 2018 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information

	at of the Treasury venue Service			social security numbers on rs.gov/Form990PF for instri				Open to Public Inspection
		or tax year beginning			, and e			T Open to to the map oction.
Name o	f foundation				-		A Employer identification	number
		LY FOUNDATION,					58-2432024	
	BOX 4	28	steel a	ddress)		Room/suite	B Telephone number (864) 229-	5211
	own, state or pr	ovince, country, and ZIP or fore SC 29648	eign pi	ostal code			C if exemption application is pe	nding, check here
	all that apply:	Initial return		Initial return of a fo	ormer public o	charity	D 1. Foreign organizations	, check here
		Final return Address change		Amended return  Name change			Foreign organizations mee check here and attach cor	eting the 85% test,
	type of organiz	ation: X Section 501(c)	$\overline{}$	empt private foundation Other taxable private founda	tion	00	E If private foundation stat	
		<del></del>		ng method: X Cash	Accr	ual ,	under section 507(b)(1) F If the foundation is in a 6	•
	Part II, col. (c), I			her (specify)	- \	1	under section 507(b)(1)	
▶\$ Part I	Analysis of R	5,430,099. (Part I, evenue and Expenses ounts in columns (b), (c), and (d) may		(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equa	al the amounts in column (a) )		expenses per books 292,133.	inc	ome	income	(cash basis only)
1 2		gifts, grants, etc., received if the foundation is not required to attach Sch	ı В	494,133.				100-
3	Interest on saving	gs and temporary						
4		interest from securities		98,315.	9	<u>8,315.</u>		STATEMENT 1
	Gross rents Net rental income	or (loss)						
		from sale of assets not on line 10		3,474.				
nue b	Gross sales price	for all 205 //00	<u>) .</u>					
evenue 2	Capital gain net in	ncome (from Part IV, line 2)				3,474.	REI	追れ近回
8	Net short-term	, ,					(A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	
9	Income modifi Gross sales less							2010 8
10a	l and allowances Less Cost of goo	ods sold					ogr	
	Gross profit or							
11	Other income							
12	Total Add line	es 1 through 11		393,922.	10	1,789.	0.	
13	•	officers, directors, trustees, etc		0.		0.	0.	0.
14		e salaries and wages , employee benefits			<del></del>	<del></del>		
	Legal fees	, employee beliens				<del></del>		
	Accounting fee	es STMT	2	4,500.		2,250.	0.	2,250.
Expens	Other professi	onal fees						
9 17	Interest	am.m	_	F 0.1				
18 18	Taxes	STMT	3	591.		0.	0.	0.
Administr 05 15	Depreciation a Occupancy	по оерівноп					<del></del>	
19 21 19 21		ences, and meetings			<del></del> _			
9 22	Printing and pi							
	Other expense	STMT	4	52,544.	_ 5	2,544.	0.	0.
Operating 23		g and administrative		F	_	4 504	_	0.050
ope	•	d lines 13 through 23		57,635. 236,116.	5	4,794.	0.	2,250. 236,116.
25		gifts, grants paid s and disbursements		230,110.		<del></del>		430,110.
20	Add lines 24 a			293,751.	5	4,794.	0.	238,366.
27						<del></del>		,
a		e over expenses and disbursements		100,171.				
		ot income (if negative, enter -0-)			4	6,995.		
0	Adjusted net i	ncome (if negative, enter -0-)					0.	<u> </u>

Form 990-PF (2017)



4,047,109.

Form 990-PF (2017)

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

_			FOUNDATION,					5	8-243	2024	Page 3
	(a) List and describe th	e kınd(s) of prope	rty sold (for example, real en stock, 200 shs. MLC Co )	state,	(b)	How a	cquired chase		acquired Jay, yr )	( <b>d)</b> Da (mo., d	
1a	PUBLICLY TRADED	·			۲	_	P				
	CAPITAL GAINS D										
<u> </u>	<del></del>									_	
	<del></del>				╀						
<u>e</u>		(f) Depreciation	an allowed (a)	Cost or other bases	<u> </u>			/b) C	Sam or (lone	<u> </u>	
	(e) Gross sales price	(i) Depreciation (or allow		Cost or other basis is expense of sale					lain or (loss s (f) minus		
a	295,247.			291,92	6.				<del></del>	3	,321.
_b_	153.										153.
_ <u>c</u>											
<u>d</u>											
<u>e</u>	Complete only for assets showing	gain in column (h)	and owned by the foundati	on on 12/31/69.			(1)	Gains (C	Col. (h) gain	minus	
	(i) FMV as of 12/31/69	(j) Adjuster as of 12/3	d basis (k)	Excess of col (i) ver col. (j), if any				(k), but	not less that (from col. (	n -0-) or	
a										3	,321.
<u>b</u>											153.
<u> </u>											
_ <u>d</u> e									<del></del> -		
			f gain, also anter in David Liv	7	`						
	Capital gain net income or (net capi	tal loss) 🧗 [	f gain, also enter in Part I, Ii f (loss), enter -0- in Part I, I		}	2				3	<u>,474.</u>
	Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		ions 1222(5) and (6):		}				NT / 3		
	f (loss), enter -0- in Part I, line 8	der Section	4940(e) for Reduce	d Tax on Net	Inve	stm	ent Inco	me	N/A	-	
(For	optional use by domestic private f		· · · · · · · · · · · · · · · · · · ·								
			. ,			-,					
	ection 4940(d)(2) applies, leave this	•									
	the foundation liable for the section				iod?					Yes	X No
	es," the foundation doesn't qualify Enter the appropriate amount in ea		<u> </u>		ntries						
÷	(a)	1	(b)	outors making any si	(c)			T		(d) oution ratio	
С	Base periód years alendar year (or tax year beginning	in) Adjuste	ed qualifying distributions	Net value of no			use assets		Distrit (col. (b) div	oùtion ratio ided by col.	(c))
_	2016		243,602				2,068				51047
	2015		261,977	•			2,763				52789
	2014		246,516 198,107				8,982. 1,719.				47234 39767
	2013 2012	-	186,292				$\frac{1}{2},395$				46085
	LUIZ			<u>•</u> 1		, 0 1	<u>4,333</u>	<del>`</del>			±0003
2 1	Fotal of line 1, column (d)							2		2	36922
3 /	Average distribution ratio for the 5-	year base period -	divide the total on line 2 by	5.0, or by the number	er of y	/ears					
t	he foundation has been in existenc	e if less than 5 yea	rs					3		.0	47384
4 E	Enter the net value of noncharitable	-use assets for 20	17 from Part X, line 5					4		5,104	,280.
5 M	Multiply line 4 by line 3							5		241	,861.
6 E	Enter 1% of net investment income	(1% of Part I, line	27b)					6			470.
7 /	Add lines 5 and 6							7		242	,331.
8 E	enter qualifying distributions from F	art XII, line 4						8		238	,366.
	f line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the bo	x in Part VI, line 1b, and co	mplete that part usin	g a 1º	% tax r	ate				

1a Exempl operating foundations disco Ded in section 4940(s)(2), check here ▶ ☐ and enter 74/N° on hins 1 Date of ruling or determination letter: (attach easy) effect in excessivy-see instructions) of Part I, line 27b of Part I, line 27b All other dominations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b All other dominations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b All other domination anties 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (dominatic section 4947(s)) trusts and taxable foundations only, others, enter -0-) 2 A ded lines 1 and 2 3 Sequence 2 4 Substite A (income) tax (domestic section 4947(s)) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment ancience. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment ancience. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment ancience. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment ancience. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment ancience. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment ancience. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment ancience. Subtract line 1. In the second of the form 2220 is altached. Tax based on the control of the second of the control of the second of	Form 990-PF (2017) DAVIS FAMILY FOUNDATION, INC. 58-243 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4
Donestic Inordiations that meet the section 4940(e) requirements in Part V, check here   and enter 1% of Part I, line 12 to All other domestic foundations enter 2% of I me 27b Exempt foreign organizations, enter 4% of Part I, line 12, cot. (b)    2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   3 and lines 1 and 2    3 Add lines 1 and 2   3   940 .  4 Subtitat 6, morne) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   4   0 .  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-)   5   940 .  6 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-)   5   940 .  7 Tax distracted tax payments. Add one 8 to the volume of the second of				_,
b Domestic foundations had meet the section 4940(e) requirements in Part V, check here				
c All other domestic foundations enter 2% of the 27b Exempt foreign arganizations, enter 4% of Farl 1, the 12, col. (b)  2			9	40.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 3 Subtiliar (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax dead on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax dead on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax paid with application for extension of time to file (if orm 8868) 6 Tax deal in line 5 Tax deal in line	of Part I, line 27b	-		
3 Add lines 1 and 2  Subtilla 6, Noncompliars (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  1 Tax based on investment incemes. Subtract line 4 from line 3. If zero or less, enter -0-  5 Tax based on investment incemes. Subtract line 4 from line 3. If zero or less, enter -0-  5 Credition Payments  2017 estimated tax payments and 2016 overpayment credited to 2017  b Exempt foreign organizations - tax withhelds at source  1 Tax paid with application for extression of time to life (Form 8858)  2 Each group organizations - tax withheld at source  1 Tax paid with application for extression of time to life (Form 8858)  3 Each group penalty for underpoyment of estimated tax. Check here □ #Form 2220 is attached  5 Tax due. If the letal of lines 5 and 8 is more than line 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than line 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than line 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than line 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than line 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than life 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than life 7, enter amount over life organizations. If the letal of lines 5 and 8 is more than 10 is 760 .  11 Einter the amount of line 10 to be Credited to 2018 estimated tax. Payment over life organizations. If the answer is "Yes" to 1 are 1 bit, attach a detalled descriptor of the activities.  1 burning the saywar, did the foundation attempt to influence any national, state, or local legislation or did it participate or interviene in any political campaign.  1 burning the saywar, did the foundation attempt to mitience any national, state, or local legislation or did it participate or interviene in any political campaign.  1 but the saywar is "Yes" to 1 are 1 bit, attach a detailed description of t	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
4 Subtile A (income) Lax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Cedis/Payments a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations—saw withheld at source 6 Tax pad with application for extension of time to file (form 8868) 6 700. 6 Backup withholding reneroeusly withhold 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the lotal of lines 5 and 6 is more than the 10st of lines 5 and 6, enter the amount over 2 10 Overpayment. If line 7 is more than the lotal of lines 5 and 6, enter the amount overpaid 10 Overpayment. If line 7 is more than the lotal of lines 5 and 6, enter the amount overpaid 11 Enter the amount of line 10 line 7 credited ta 2018 estimated tax. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the amount is 100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the amount is 100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the farm 1120-POL for this year? 2 b Did the foundation (it any) and by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0. 2) On foundation managers. ► \$ 0. 2) The foundation managers is \$ 0. \$ 0. Either the remembersement (if any) and by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0. \$ 11 Yes, Sin at Iteration and the year of the state is the statement required by General Instruction 7 A ret th	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
5 Tax based on investment mome. Subtract lime 4 from line 3. If zero or less, enter -0- 6 Credits/Payments 2017 estimated tax payments and 2016 overpayment credited to 2017 be Exempt foreign organizations - tax withhold at source 6 Tax paid with application for extension of lime to life form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add hines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax fue. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax fue. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax fue. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax fue. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment, If line 7 is more than line 7, enter amount owed 11 Enter the amount of line 10 to be "Credited to 2018 estimated tax." 12 During the tax year, did the foundation attempts to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempts to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempts to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 During the tax year, did the foundation attempts to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 During the tax year, did the foundation attempts to influence any national, state, or local legislation or of the definition of the amount of any of tax on political descriptions of the activities. 16 During the foundation line form 1120-PCL for this year? 17 Enter the reimbursement (if any) paid by the foundation during the year for political puring participated or incorporation, or byteas, or other similar instru	3 Add lines 1 and 2		9	40.
6 CeditsPayments a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding ernoreacity withholding surface subject with the distribution of the companient of estimated tax. Check here if the form 2220 is attached Total credits and payments. Add lines Sa through 68 Enter any penalty for underpayment of estimated tax. Check here if the form 2220 is attached Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed To overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount of lines 1 is a line	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign or ganzations - tax withheld at source c Tax paid with application for extension of time to file (Form 8968) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 58 intough 6d 6d 0. 7 Total credits and payments. Add lines 56 intough 6d 7 Total credits and payments. Add lines 56 intough 6d 8 Enter any penalty for underpayment of estimated tax. Check here if it Form 2220 is attached 9 Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overapyment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax. ►  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 16 During the tax year, did the foundation than the activities of incorporation for the definition of the definition of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 2 During the answer is "Yes" to 1s or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 3 During the foundation	5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		9	40.
b Exempt foreign organizations - Tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Backup withholding erroneously withheld T Total credits and payments. Add lines So at through 6d c Better any pealty for undergrayment of estimated tax. Check here  if Form 2220 is attached T Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed T Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed T Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed T Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed T Tax due. If the company of the total of lines 5 and 8, enter the amount overpaid T Total Credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid T Total Credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid T Total Credits and payments. The manual overpaid T Total Credits and payments. The manual overpaid T Total Credits and payments. The manual overpaid to the form 12 is a total credits and payments. The manual overpaid overpaid to the form 12 is a total credits and payments. The manual overpaid of the form 12 is a credit set of the form 12 is a credit se				
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withhold 1 Total credits and payments. Add filens 58 through 6d 8 Enter any penalty for underpayment of estimated tax. Check here  d form 220 is attached 9 Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be **Credited to 2018 estimated tax**	a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,000.			
A Backup withholding erroneously withhold  7 Total credits and payments. Add hines 6a through 6d  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment. Illi ne? is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶  760. Refunded 11  0. Part VIII-A Statements Regarding Activities  1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1 During the tax year, did the foundation of the survivines and copies of any materials published or distributed by the foundation in connection with the activities.  2 Did the foundation in Enter 120-POL for this year?  3 Enter the amount (if any) of tax on political expenditure is section 4955) imposed during the year;  (1) On the foundation in № S				
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than him 7, enter amount owed 10 Overpayment. If line 7 is more than the lotal of lines 5 and 8, enter the amount owed 11 Enter the amount of line 7 is more than the lotal of lines 5 and 8, enter the amount owerpaid 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Dud it spend more than \$100 during the year (either directly) or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 15 Did the foundation like Form 1120-POL for this year? 16 Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. S				
8 Elter any penalty for underpayment of estimated tax. Check here		-		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credated to 2018 estimated tax			1,7	
10 Overpayment. If line 7 is more than the total of limes 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited to 2018 estimated tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited tax ▶ 76.0 ⋅ Retunded ▶ 11 0.0 ⋅ Credited tax ▶ 76.0 ⋅ Retunded ▶ 12 0.0 ⋅ R	<del></del>			0.
Part VII-A   Statements Regarding Activities   10 to be credited to 2018 estimated tax   76 0				
Part VII-A Statements Regarding Activities  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition II the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.  c Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. P \$ 0 (2) On foundation managers. ► \$ 0  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0  1 Has the foundation engaged in any activities that have not previously been reported to the IRS?  1 H "Yes," attach a detailed description of the activities  3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  N/A  b If "Yes," has it flied a tax return on Form 990-1 for this year?  If "Yes," has it flied a tax return on Form 990-1 for this year?  If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  b ly language in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part III, col. (c), and Part XV  7 X   8a Enter the states to which the foundation reports or with which it is registered. See instructions.  ENC  b If the answer is "Yes" to line 7, has the foundation f			7	
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of each state as required by General Instruction G? If "No," attach explanation  SEE STATEMENT 8  Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? if "Yes" attach a schedule listing their names and addresses  STMT 9  10 X				
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses STMT 9 10 X		8b		X
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses  STMT 9 10 X			<b>†</b>	<u> </u>
10 Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses STMT 9 10 X		9		x
	10 Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses STMT 9			

	990-PF (2017) DAVIS FAMILY FOUNDATION, INC. 56-2432	024		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 1		
	If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<u>X</u> _	
	Website address ► N/A			
14	The books are in care of ► MARCIE TURNER  Telephone no. ► 864-22		<u> 211</u>	
	Located at ▶ PO BOX 428, GREENWOOD, SC ZIP+4 ▶29	648		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year		<u>/A</u> _	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	<u> </u>		
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			,
	(5) Transfer any income or assets to a disqualified person (or make any of either available			·
	for the benefit or use of a disqualified person)? $igspace X$ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b_		
	Organizations relying on a current notice regarding disaster assistance, check here			,
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	1c_		_X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes $\overline{X}$ No			
	If "Yes," list the years $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	<u>2b</u> _		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes $\overline{X}$ No		'	
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	'		
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.)	3b		<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
p	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,		
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b_		<u> </u>
	Fo	rm <b>99</b> 0	)-PF	(2017)

orm 990-PF (2017) DAVIS FAMILY FOUNDATION,			<u>58-24320</u>	24	P	age 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be Re	equired (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Ye	es X No	- 1		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire	•		-	1	
any voler registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purpose		Ye	es X No	1	1	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section					
4945(d)(4)(A)? See instructions		Ye	s X No	- 1	1	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or fo		_			
the prevention of cruelty to children or animals?		Ye	es X No	- 1	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify up	nder the exceptions described in	n Regulations				
section 53 4945 or in a current notice regarding disaster assistance? See inst	ructions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check	here		▶∟」│			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				1	1	
expenditure responsibility for the grant?	N	/A Y	es L No [			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			İ	- 1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			l	- [	
a personal benefit contract?		Ye	es X No	ļ		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		Ļ	6b		<u>_x</u> _
If "Yes" to 6b, file Form 8870.		r		ļ		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Man	agers, Highly				
List all officers, directors, trustees, and foundation managers and	their compensation					
Elst all officers, and colors, and foundation managers and	(b) Title, and average	(c) Compensation	(d) Contributions to	7	e) Eyne	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ac	e) Expe count, allowar	other
EMMETT I. DAVIS, JR. (DECEASED)	PRESIDENT	enter-0-j	Compensation	╁╌	anowai	1000
1319 REYNOLDS AVENUE	T	ĺ				
GREENWOOD, SC 29649	0.10	l o.	О.			0.
JENNIFER BRAGG	VICE CHAIRMAN			1		
PO BOX 428	1					
GREENWOOD, SC 29649	0.10	ĺ 0.	0.			0.
STEPHEN L. DAVIS	SECRETARY & T			1		
133 GATEWOOD DRIVE	7					
GREENWOOD, SC 29646	0.10	0.	٥.			0.
	7					
	]					
2 Compensation of five highest-paid employees (other than those in	<del></del>	enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	ac	e) Expe	ense other
	devoted to position	(C) compondation	and deferred compensation	1	allowan	ices
NONE NONE	4			1		
	<del>                                     </del>	<u> </u>		<del> </del>		
<del></del>	-			1		
	<del> </del>			-		
				1		
<del></del>	+	<del> </del>		+-		
	-			1		
<del></del>			<del></del>	+-		
	†	}		1		
otal number of other employees paid over \$50,000	<del></del>					0
			Forn	n 990	-PF	
				_	,	

	132024	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Com	pensation
NONE		
	1	
	Ì	
	1	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
<u> </u>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	;
1 N/A		
'		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1 N/A	Amount	
I N/ A		
2		
All other program-related investments See instructions.		
3		
<del></del>		<del></del>
Total. Add Innes 1 through 3	Form <b>990-F</b>	0. DE (2017)
	1-0cm 330-1	·• (2017)

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Form 990-PF (2017)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				254,274.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			235,566.	
b Total for prior years;		0		
3 Excess distributions carryover, if any, to 2017:		0.		
a From 2012				
b From 2013				
ç From 2014				
d From 2015				
e From 2016				
f Tota i of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4 ► \$ 238,366.				
a Applied to 2016, but not more than line 2a			235,566.	
<b>b</b> Applied to undistributed income of prior	-			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				2,800.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				0.
6 Enter the net total of each column as indicated below				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				<u> </u>
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Sub tract line 6c from line 6b. Taxable	<del></del>			
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must			1	
be distributed in 2018				251,474.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015	[		1	
d Excess from 2016				
e Excess from 2017				
				5 000 DE

Form 990-PF (2017) DAVIS F2 Part XIV   Private Operating Fc	oundations (see in		I-A, question 9)	N/A	32024 Page
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			· · · · ·
foundation, and the ruling is effective for			▶		,
b Check box to indicate whether the found:	ation is a private operatir	ig foundation described i	n section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for				1	
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,				· · · · · · · · · · · · · · · · · · ·	
line 4 for each year listed					
·				<del></del>	<b></b>
d Amounts included in line 2c not			1		
used directly for active conduct of exempt activities				,	
e Qualifying distributions made directly					
for active conduct of exempt activities			/		
Subtract line 2d from line 2c  Complete 3a, b, or c for the alternative test relied upon:			,		
"Assets" alternative test - enter     (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			,		
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed		/			
c "Support" alternative test - enter:		/			
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public	, ,				
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	<i>f</i>				
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information at any time during the			if the foundation	had \$5,000 or mo	re in assets
1 Information Regarding Foundation	n Managers:		•	.=	
List any managers of the foundation who year (but only if they have contributed m	have contributed more		ributions received by th	e foundation before the clos	se of any tax
EMMETT I. DAVIS, JR.	(DECEASED)				
b List any managers of the foundation who other entity) of which the foundation has	own 10% or more of th		(or an equally large port	tion of the ownership of a pa	artnership or
NONE	-				<del> </del>
2 Information Regarding Contribution	on, Grant, Gıft, Loan,	Scholarship, etc., Pr	ograms:		
Check here  if the foundation of the foundation makes gifts, grants, etc.,	•	•	•		ests for funds If
a The name, address, and telephone numb			<u> </u>	<del></del>	
SEE STATEMENT 10					
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they s	hould include		
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, o	r other factors:	<del></del>

Total	SEE CON	TINUATION	SHEET	r(S)	<b>▶</b> 3a	236,116.
b Approved for future payment		_				
NONE			ı			
						<u> </u>
			-			
Total					<u>▶ 3b</u>	0.

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelati	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Loue		0000		
a					<del> </del>
b			<u> </u>	<del></del>	<del></del>
c					
d					
e					
f				-	
g Fees and contracts from government agencies				· · · · · · · · · · · · · · · · · · ·	
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1		
investments			L		
4 Dividends and interest from securities			14	98,315.	·
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<del>                                     </del>	<u> </u>	
7 Other investment income	<u> </u>		<b>├</b> -		
8 Gain or (loss) from sales of assets other			_ ا		
than inventory	ļ		18	3,474.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue			l		
a					
b					
	<del></del>	<del> </del>	<b>-</b>	· · · · · · · · · · · · · · · · · · ·	<del></del>
d			<del> </del>		
e				101 000	
12 Subtotal. Add columns (b), (d), and (e)	L	0.		101,789.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	101,789.
(See worksheet in line 13 instructions to verify calculations )					
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	empt	Purposes	
Line No Explain below how each activity for which incom	ne is renorted	in column (e) of Part YVI-A	contrib	uited importantly to the accord	unlishment of
the foundation's exempt purposes (other than by			00111111	atou importantly to the accom	iphoninone or
N/A	y providing to	ndo for addit purposcoj.		<del></del>	
N/A		<del></del>			
		<del></del>		<del> </del>	
<del></del>		<del>_</del>		<del></del>	
				<del></del>	<del> </del>
<del></del>					

Pair XVII					ION, INC.	<del></del>	58-24		Pa	age 13
1 Did the organization describy or indescrib; emplage in any of the following with any other organization described in section 501(c) (other than section 501(c)) organizations of in section 527, relating to political organizations of (1) Cash (1) Cash (2) Other seats (3) Purchases of assets to a noncharitable exempt organization (3) Purchases of assets to an anocharitable exempt organization (3) Purchases of assets to an anocharitable exempt organization (3) Purchases of assets to an anocharitable exempt organization (3) Remidul calculates, equipment, or other assets (4) Remidulation discribes or membership or fundrissing solicitations (5) Loars or fixing genarities (6) Performance of services or membership or fundrissing solicitations (7) Performance of services or membership or fundrissing solicitations (8) Performance of services or membership or fundrissing solicitations (8) Performance of services or membership or fundrissing solicitations (9) Performance of services or membership or fundrissing solicitations (9) Performance of services or membership or fundrissing solicitations (1) Title (1) T	Pan.			nsters to ar	nd Transactions a	nd Relationsh	ips With Noncha	ıritable		
(a) the trans section 50 (c)(c)(3) organizations) or in section 527, relating to political organizations?  1 Transfer from the reporting foundation to a noncharidable evering organization of (1) Cash  10 Other transactions:  (1) Sales of assets to a noncharidable evering organization  (2) Pouchases a dassets from a noncharidable evering organization  (3) Rental of facilities, guipment, or other assets  (4) Remtal organization or the adverse organization or the second organization organization or the second organization or the second organization or the second organization or second organization organization or serving every bit emptyring foundation in the organization organization or serving expensive organization or serving expensive organization organiza					<del></del>	<del></del>			14.	1 80
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assests  1 Other transactions:  (2) Purchases of assest from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assests  (4) Rembursement arrangements  (5) Loads or foat grouteries  (6) Performance of services or membership or fundrasing selectations  (7) Performance of services or membership or fundrasing selectations  (8) Performance of services or membership or fundrasing selectations  (9) Performance of services or membership or fundrasing selectations  (1) Loads or load grouteries  (1) Example of the following selectations  (1) Performance of services or membership or fundrasing selectations  (1) Final or load ground the selection of the selection or services growers by the reporting foundation. If the following selectation or selection (2) Interest a required (2) Leaves or the selection or selection (3) Leaves or the selection of the selection or selection (3) Leaves or the selection of the selection or selection (3) Leaves or the selection of the selection or selection or selection (4) Amount involved (2) Rame of noncharitable exempt organization (4) Description of relationship  22 Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (a) first first an section 501(c) (a) or in section 501(c) (a) or i		•		•			ion 501(c)		res	NO
(1) Cash (2) Other assets b Other transactions: (1) Sales of assets to annocharitable exempt organization (2) Purchased assets from a noncharitable exempt organization (3) Remail of facilities, equipment, or other assets (4) Remailurement arrangement, or other assets (5) Loans or loan guisanness (6) Performance of services or membership or fundrasing solicitations (7) Purchased or loan guisanness (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (1) It is answer to any of the above is "ves," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or paid employees (1) It is answer to any of the above is "ves," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received. (2) Lines no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Lines no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of sharings arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Name of organization (c) N/A  (a) Name of organization (c) N/A  (b) Type of organization (d) Description of relationship  N/A  (a) Name of organization (c) N/A  (b) Type of organization (d) Description of relationship  N/A  (a) Name of organization (e) N/A  (b) Type of organization (e) Description of relationship  N/A  (a) Name of organization (e) N/A  (b) Type of organization (e) Description of relationship  N/A  (a) Name of organization (e) N/A  (b) Type of organization (e) Description of relationship  N/A  (b) Type of organization (e) Description of relationship  N/A  (c) Name of organization (e) N/A  (a) Name of organization (e) N/A  (b) Type organization (e) Desc			•	-	•	,		ĺ	1	1
(2) Other assacts  (3) Other assacts of assets to a noncharitable exempt organization  (3) Penil of Calcillas, expurpment, or other assets  (4) Remindursement arrangements  (5) Loans or loan guarantes  (6) Performance of services or membership or fundrasing solicitations  (7) Exemptor facilities, equipment, mailing lists, other assets, or paid employees  (8) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (1) Exemptor to stay of the above, or services serven by the reporting foundation. If the foundation received less than flar market value in any transaction or sharing arrangement, show in column (gl) the value of the geodes, other assets, or services servents  (2) Liman no  (3) Amount involved  (4) Name of organization  (5) Amount involved  (6) Amount involved  (7) Name of organization  (8) Amount involved  (9) Amount involved  (1) Name of organization  (1) Type of organization  (1) Description of relationship  (2) Description of relationship  (3) Warn of prophy, loading that have summed these services relevant to the load of the services or services o	a Tra	insfers from the reporting found	ation to a nonchari	itable exempt org	janization of:			1	Į	l
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Hear Discreption of relationship of survival (s) Loans or to an guarantees   Heart   X   Miss	(2)	Purchases of assets from a no	ncharitable exemp	t organization				1b(2)	L	_
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In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>								
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del>                                     </del>								
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del> -		<del></del>					
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>				<del> </del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>		· · · · · · · · · · · · · · · · · · ·					
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			<del> </del>							
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes			<del>                                     </del>		<del></del>					
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>				<del></del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>		<del></del>	<del></del>	<del></del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>			-+				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>		<del></del>	<del></del>	<del></del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>			<del>-  </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		<del></del>	<del> </del>				<del></del>			
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		- <del> </del>	<del> </del>		<del></del>	<del>-                                    </del>				
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		·}	<del> </del>							
In section 501(c) (other than section 501(c)(3)) or in section 527?    Yes	2a Ist	he foundation directly or indirec	tly affiliated with, c	or related to, one	or more tax-exempt organ	l nizations described				
(a) Name of organization  N/A  Under penalting of perpay, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it status, agreed and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Sign and belief it status, agreed and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Yes No  Signature of officer or trustee  Print/Type preparer's name  Preparer's signature  Preparer's signature  Paid  PATTERSON  PATTERSON  PO0445802  Preparer  Firm's name  ELLIOTT DAVIS, LLC/PLLC  Firm's EIN ► 57-0381582	ın s	section 501(c) (other than sectio	n 501(c)(3)) or in:	section 527?				Yes	X	No
N/A  Sign   Under penaltips of perply, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and before it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    Your   Red   Check   May the IRS discuss this return with the preparer shown below? See institution with the preparer shown b	b If "	Yes," complete the following sch	edule.							
Sign Here    Under penaltips of perputy, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it in true, correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below? See institute in the preparer shown below? See institute in the preparer shown below? See institute in the preparer signature of officer or trustee    Print/Type preparer's name   Preparer's signature   Date   Check   if   PTIN		(a) Name of org	janization		(b) Type of organization	}	(c) Description of relation	onship		
Sign   and belief it thrue, correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   Information of which preparer   Information		N/A				1				
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Print/Type preparer's name FRANCES M. Paid PATTERSON Preparer Firm's name ►ELLIOTT DAVIS, LLC/PLLC  Preparer's signature  Date Check if PTIN self- employed self- employed Firm's Firm's Film ► 57-0381582		1 1 V. U.	J	oreparer (other than	120 JUL 1	8 CHAIR	as any knowledge	return with the	See in	er str
Paid PATTERSON → Pattern 105/22/18 self-employed Preparer Firm's name ► ELLIOTT DAVIS, LLC/PLLC Firm's EIN ► 57-0381582				<del></del>	<del></del>	<del>-,</del>	· .			==
Preparer Firm's name ► ELLIOTT DAVIS, LLC/PLLC Firm's EIN ► 57-0381582		1 " ' '				Date	L	N		
Preparer Firm's name ► ELLIOTT DAVIS, LLC/PLLC Firm's EIN ► 57-0381582	Paid	ľ	Jr	rances M	Patterson	05/22/18		00445	802	
	Prepa	rer Firm's name ► ELL				100, 22, 10				

Firm's address ▶ P.O. BOX 6286

GREENVILLE, SC 29606-6286

Part XV Supplementary Information				
3 Grants and Contributions Paid During the \		<del>-</del>		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
BEAUFORT COUNTY OPEN LAND TRUST		PUBLIC CHARITY	TO FURTHER THE TAX  EXEMPT PURPOSE OF THE	
BEAUFORT, SC			PUBLIC CHARITY	1,000.
BEYOND ABUSE		PUBLIC CHARITY	TO FURTHER THE TAX	•
CD PENNAOOD SC	-		EXEMPT PURPOSE OF THE	1 000
GREENWOOD, SC			PUBLIC CHARITY	1,000.
BLUE RIDGE COUNCIL BSA		PURITC CHARITY	TO FURTHER THE TAX	
PAGE RIBOD COUNCIL BEIL		OBDIC CIMALIT	EXEMPT PURPOSE OF THE	
GREENVILLE, SC			PUBLIC CHARITY	1,500.
			1	
CHARLESTON ANIMAL SOCIETY		PUBLIC CHARITY	TO FURTHER THE TAX	
NORBU CUARI ECHON CC		1	EXEMPT PURPOSE OF THE	1 000
NORTH CHARLESTON, SC		<del> </del>	PUBLIC CHARITY	1,000.
CITADEL FOUNDATION		PUBLIC CHARTTY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
CHARLESTON, SC		<del> </del>	PUBLIC CHARITY	30,000.
CITY OF NORTH CHARLESTON - DANNY		PUBLIC CHARITY	TO FURTHER THE TAX	
JONES GYM FLOOR			EXEMPT PURPOSE OF THE	
NORMU CUARI ECMON CC			PUBLIC CHARITY	7 500
NORTH CHARLESTON, SC				7,500.
CLEMENT'S KINDNESS		PUBLIC CHARTTY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
GREENVILLE, SC		ļ	PUBLIC CHARITY	3,000.
			]	
CLEMSON UNIVERSITY FOUNDATION	-	PUBLIC CHARITY	TO FURTHER THE TAX	
CLEMSON, SC			EXEMPT PURPOSE OF THE PUBLIC CHARITY	7,500.
CHEMBON, BE		<del> </del>	FUBBLE CHARTIT	7,300.
COASTAL CONSERVATION LEAGUE		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
CHARLESTON, SC		<del> </del>	PUBLIC CHARITY	1,000.
COASTAL CRISIS CHAPLAINCY		PUBLIC CHARITY	TO FURTHER THE TAX	
CHARLESTON, SC			EXEMPT PURPOSE OF THE PUBLIC CHARITY	2,000.
Total from continuation sheets				214,016.

3 Grants and Contributions Paid During the Y	ear (Continuation)	·	<b>,</b>	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
CONNIE MAXWELL CHILDREN'S HOME		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENWOOD, SC	<u> </u>	<u> </u>	PUBLIC CHARITY	2,000
CORONACA VOLUNTEER FIRE DEPT		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENWOOD, SC			PUBLIC CHARITY	1,000
			}	
DARKNESS TO LIGHT (D2L)		PUBLIC CHARITY	TO FURTHER THE TAX	
	1	1	EXEMPT PURPOSE OF THE	
CHARLESTON, SC	+	<del> </del>	PUBLIC CHARITY	2,500
EPWORTH CHILDREN'S HOME		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
COLUMBIA, SC	<del> </del>	<del> </del>	PUBLIC CHARITY	3,221
ETV ENDOWMENT		PUBLIC CHARITY	TO FURTHER THE TAX	
COLUMBIA, SC			EXEMPT PURPOSE OF THE PUBLIC CHARITY	1,000
FAITH HOME		PUBLIC CHARITY	TO FURTHER THE TAX	
GREENWOOD, SC			EXEMPT PURPOSE OF THE PUBLIC CHARITY	3,000
FIRST PRESBYTERIAN CHURCH		PUBLIC CHARITY	TO FURTHER THE TAX	
and the same of th		1	EXEMPT PURPOSE OF THE	400
GREENWOOD, SC	<del></del>	ļ	PUBLIC CHARITY	100
FOOD BANK OF GREENWOOD COUNTY		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
GREENWOOD, SC		<u> </u>	PUBLIC CHARITY	1,000
GHS GREENVILLE CHILDREN'S		PUBLIC CHARITY	TO FURTHER THE TAX	
HOSPITAL-BI-LO CHARITIES CHILDREN'S CANCER CENTER			EXEMPT PURPOSE OF THE PUBLIC CHARITY	
GREENVILLE, SC			}	4,000
GREENWOOD COMMUNITY THEATER		PUBLIC CHARITY	TO FURTHER THE TAX	
CHEENWOOD CC			EXEMPT PURPOSE OF THE	2 522
Total from continuation sheets	<del></del>	<u> </u>	PUBLIC CHARITY	2,500

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient GREENWOOD MIRACLE LEAGUE PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE 1,000. GREENWOOD, SC PUBLIC CHARITY HARRY HAMPTON FUND - THE SC MEMORIAL PUBLIC CHARITY TO FURTHER THE TAX REEF EXEMPT PURPOSE OF THE PUBLIC CHARITY CHARLESTON, SC 5,000. HARVEST HOPE FOOD BANK PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY COLUMBIA, SC 2,500. HISTORIC COLUMBIA FOUNDATION PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY COLUMBIA, SC 4,500. HOSPICE CARE OF GREENVILLE PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY GREENVILLE, SC 2,500. HOSPICE CARE OF THE PIEDMONT PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE GREENWOOD, SC PUBLIC CHARITY 5,000. JENKINS INSTITUTE (ORPHANAGE) PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE NORTH CHARLESTON, SC PUBLIC CHARITY 2,500. LAKELANDS FCA PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY GREENWOOD, SC 2,000. LANDER FOUNDATION - THE DROP PUBLIC CHARITY TO FURTHER THE TAX SPONSORSHIP EXEMPT PURPOSE OF THE PUBLIC CHARITY GREENWOOD, SC 500. LANDER FOUNDATION PUBLIC CHARITY TO FURTHER THE TAX EXEMPT PURPOSE OF THE GREENWOOD, SC PUBLIC CHARITY 4,500. Total from continuation sheets

Part XV Supplementary Information	(Continuation)		<del></del>	
3 Grants and Contributions Paid During the Yo	If recipient is an individual,	<del></del>	<del> </del>	
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
LOW COUNTRY OPEN LAND TRUST		PUBLIC CHARITY	TO FURTHER THE TAX	
CHARLESTON, SC			EXEMPT PURPOSE OF THE PUBLIC CHARITY	2,500
CHRISTON, DC			TOBBIC CHARTIT	2,300
LOWCOUNTRY FOOD BANK		DIDLIC CUADITY	TO FURTHER THE TAX	
BONCOUNTRY TOOK DAMA		COBBIC CHARTIT	EXEMPT PURPOSE OF THE	
CHARLESTON, SC			PUBLIC CHARITY	2,500.
LOWCOUNTRY ORPHAN RELIEF		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
NORTH CHARLESTON, SC	<u> </u>		PUBLIC CHARITY	2,500
MAKE A WISH FOUNDATION OF SOUTH		PUBLIC CHARITY	TO FURTHER THE TAX	
CAROLINA			EXEMPT PURPOSE OF THE	
			PUBLIC CHARITY	
GREENVILLE, SC				1,000
MEALS ON WHEELS - PIEDMONT AGENCY ON		PUBLIC CHARITY	TO FURTHER THE TAX	
AGING			EXEMPT PURPOSE OF THE	
			PUBLIC CHARITY	
GREENWOOD , SC	<u> </u>			5,000
MEALS ON WHEELS OF GREENVILLE COUNTY		PUBLIC CHARITY	TO FURTHER THE TAX	
OD TOWARD I E. O.O.			EXEMPT PURPOSE OF THE	4 000
GREENVILLE, SC			PUBLIC CHARITY	4,000
MEG'S HOUSE		DUDI TO CUADITA	TO PURMUED MUE MAY	
MEG 5 HOUSE		FUBLIC CHARITI	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENWOOD, SC			PUBLIC CHARITY	500
MUSC CHILDREN'S FOUNDATION		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
CHARLESTON, SC			PUBLIC CHARITY	10,000
NORTH CHARLESTON DREAM CENTER		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
NORTH CHARLESTON, SC	<del> </del>		PUBLIC CHARITY	2,000
NORTHWEST VOL FIRE AND RESCUE		PUBLIC CHARITY	TO FURTHER THE TAX	
CDPENIACOD CC			EXEMPT PURPOSE OF THE	1 000
Total from continuation sheets	<u></u>	I	PUBLIC CHARITY	1,000

Part XV Supplementary Information	(Ch		I	<u> </u>
3 Grants and Contributions Paid During the Ye		<del></del>	· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
ONE 80 PLACE		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	2 500
CHARLESTON, SC			PUBLIC CHARITY	2,500
PIEDMONT TECHNICAL COLLEGE FOUNDATION		PUBLIC CHARITY	TO FURTHER THE TAX	
GREENWOOD, SC			EXEMPT PURPOSE OF THE PUBLIC CHARITY	3,000
PROMISED LAND VOLUNTEER FIRE DEPT		PUBLIC CHARITY	TO FURTHER THE TAX	
GREENTOWN, PA			EXEMPT PURPOSE OF THE PUBLIC CHARITY	1,000
RONALD MCDONALD HOUSE OF GREENVILLE		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENVILLE, SC			PUBLIC CHARITY	2,020
S,C, INDEPENDENT COLLEGES AND		PUBLIC CHARITY	TO FURTHER THE TAX	
UNIVERSITIES			EXEMPT PURPOSE OF THE PUBLIC CHARITY	
COLUMBIA, SC				2,500
s.C. WILDLIFE FEDERATION		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
COLUMBIA, SC			PUBLIC CHARITY	1,000
1				
SAR - SONS OF THE AMERICAN REVOLUTION		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
CHARLESTON, SC			PUBLIC CHARITY	2,000
SC CARES		DIIRI.TC CUARTTY	TO FURTHER THE TAX	
		TOBBIC CHARTIT	EXEMPT PURPOSE OF THE	
COUMBIA , SC			PUBLIC CHARITY	5,000
SC FESTIVAL OF FLOWERS		PUBLIC CHARITY	TO FURTHER THE TAX	
CHARLESTON, SC			EXEPMT PURPSOE OF THE PUBLIC CHARITY	4,500
				2,300
SC GOVERNORS SCHOOL FOR MATH & SCIENCE		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
HARTSVILLE SC			PUBLIC CHARITY	3 000
Total from continuation sheets	<u> </u>	1	+	3,000

Part XV Supplementary Information			<del> </del>	
3 Grants and Contributions Paid During the Ye	If recipient is an individual,	T	T	<del></del>
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (name or business)	or substantial contributor	recipient	-	<del></del>
SC HISTORICAL SOCIETY		PUBLIC CHARITY	TO FURTHER THE TAX	
CHARLESTON, SC	_		EXEMPT PURPOSE OF THE PUBLIC CHARITY	2,000.
SC JUNIOR ACHIEVEMENT (SC BUSINESS HALL OF FAME - EID)		PUBLIC CHARITY	TO FURTHER THE TAX	
HALL OF FAME - EID)			EXEMPT PURPOSE OF THE PUBLIC CHARITY	
GREENVILLE, SC			l de la	1,125.
SCCCMA - MAX HOLLAND AND MITCH		DIRLIC CHARITY	TO FURHTER THE TAX	
SIZEMORE SCHOLARSHIP FUND		FUBBLIC CHARITI	EXEMPT PURPOSE OF THE	
			PUBLIC CHARITY	
CHARLESTON, SC			ļ	_1,000.
	<u> </u>			
SELF REGIONAL HEALTHCARE FOUNDATION		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
GREENWOOD, SC		<del> </del>	PUBLIC CHARITY	7,500.
SHRINER'S HOSPITAL		PUBLIC CHARITY	TO FURTHER THE TAX	
CONTRICTAL OF			EXEMPT PURPOSE OF THE	1 700
GREENVILLE, SC			PUBLIC CHARITY	1,700.
GWIDTO D		DUDI IG GUNDIMY	TO DIMENSED BUT BAY	
STUDIO B		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENWOOD, SC			PUBLIC CHARITY	350.
TAU BETA PI		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
KNOXVILLE, TN			PUBLIC CHARITY	1,000.
TEAM RUBICON		PUBLIC CHARITY	TO FURTHER THE TAX	
			EXEMPT PURPOSE OF THE	
COLUMBIA, SC			PUBLIC CHARITY	1,000.
THE ARTS CENTER OF GREENWOOD		PUBLIC CHARITY	TO FURTHER THE TAX	
CREENWOOD SC			EXEMPT PURPOSE OF THE	2 000
GREENWOOD, SC			PUBLIC CHARITY	2,000.
TUD MICHAEL		DUDI IA CUIDITI	To Firm with the same of the s	
THE MUSEUM		LORPIC CHYLLLA	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENWOOD, SC			PUBLIC CHARITY	3,000.
Total from continuation sheets	·	·		

3 Grants and Contributions Paid During the Y		· · · · · · · · · · · · · · · · · · ·	<del>,                                     </del>	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
TROY CEMETARY ASSOC		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
TROY, SC			PUBLIC CHARITY	1,50
UNITED WAY OF GREENWOOD & ABBEVILLE COUNTIES		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY	
GREENWOOD, SC				10,00
UPPER SAVANNAH LAND TRUST GREENWOOD , SC		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY	10,00
WATER MISSIONS INTERNATIONAL NORTH CHARLESTON, SC		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY	2,50
NORTH CHARDESTON, SC			TOBBIC CHECKITI	2,30
WOUNDED WARRIOR PROJECT TOPEKA, KS		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY	2,50
УМСА		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE	
GREENWOOD, SC			PUBLIC CHARITY	2,00
YOUNG LIFE GREENWOOD, SC		PUBLIC CHARITY	TO FURTHER THE TAX EXEMPT PURPOSE OF THE PUBLIC CHARITY	1,50
Total from continuation sheets				

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

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

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

DA	AVIS FAMILY FOUNDATION, INC.	58-2432024				
Organization type (check o	ne)					
Filers of:	Section:					
Farm 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation					
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions				
	(r), (d), or (10) organization can check boxes for both the deneral ridie and a opecial ridie	, oee mandonons				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support t and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, line 1 Complete Parts I and II	or 16b, and that received from				
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals Complete Parts I, II, and III					
year, contributions is checked, enter h purpose Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section section section section from a section religious, charitable, etc., purposes, but no such contributions totaled manner the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it is e, etc. contributions totaling \$5,000 or more during the year.	ore than \$1,000 If this box s, charitable, etc				
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

<u>DAVIS</u>	FAMILY FOUNDATION, INC.		-2432024
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EMMETT I. DAVIS, JR.  1319 REYNOLDS AVENUE  GREENWOOD, SC 29649	s101,430.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	EMMETT I. DAVIS, JR.  1319 REYNOLDS AVENUE  GREENWOOD, SC 29649	\$ 190,703.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions )

Employer identification number

## DAVIS FAMILY FOUNDATION, INC.

58-2432024

	FAMILY FOUNDATION, INC.	<del></del>	-2432024
art II	Noncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	3000 SHARES UNITED STATES STL CORP		·
1			
		\$\$\$	_03/01/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u></u>		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	<del></del>
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a)		(c)	
No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
		\$	00 000 F7 000 DF) /

מוט וט אוי	3 (Form 990, 990-EZ, or 990-PF) (2017) anization		Pa Employer identification number
	FAMILY FOUNDATION, INC		58-2432024 section 501(c)(7), (8), or (10) that total more than \$1,000 for
art III	the year from any one contributor. Complete completing Part III, enter the total of exclusively religion	columns (a) through (e) and the followi is, charitable, etc., contributions of \$1,000 or les	NO LINE EDITY. For organizations
) No.	Use duplicate copies of Part III if addition	hai space is needed	
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
}		(e) Transfer of gift	
		(-,	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-			
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
_	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
rom	Transferee's name, address, a	(c) Use of gift	Relationship of transferor to transferee  (d) Description of how gift is held
rom			
rom			
rom			
a) No. from Part I		(c) Use of gift  (e) Transfer of gift	
rom	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
) No.	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
rom	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
) No.	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
) No.	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	TTIES ST	ATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ACC INT PAID COUNTY BANK - CAPITAL GAIN	<1,113.	>	0.	<1,113.>	<1,113.>	<1,113.
DISTRIBUTION COUNTY BANK -	153.	15	3.	0.	0.	0.
DIVIDENDS COUNTY BANK -	74,475.		0.	74,475.		
INTEREST	24,953.		0.	24,953.	24,953.	24,953.
TO PART I, LINE 4	98,468.	15	3.	98,315.	98,315.	98,315.
FORM 990-PF	<del>-</del>	ACCOUNTI	NG F	EES	ST	CATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- IT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES		4,500.		2,250.	0.	2,250.
TO FORM 990-PF, PG	1, LN 16B	4,500.		2,250.	0.	2,250.
FORM 990-PF		TAX	ES		S7	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) 'INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX ON INVES	TMENT	591.		0.	0.	0.
TO FORM 990-PF, PG	1, LN 18	591.		0.	0.	0.
			: ===	<del></del>		

FORM 990-PF	OTHER E	XPENSES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT FEES TRUSTEE SERVICE FEES ADR FEE	3,217. 49,021. 306.	49,021.	0. 0. 0.	0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	52,544.	52,544.	0.	0.	

FORM 990-PF C	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
THE COUNTY BANK - INV ACC 1747	-	2,081,802.	3,342,863.
TOTAL TO FORM 990-PF, PART II, LI	INE 10B	2,081,802.	3,342,863.
FORM 990-PF C	CORPORATE BONDS	****	STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
THE COUNTY BANK - INV ACC 1747	-	577,087.	568,746.
TOTAL TO FORM 990-PF, PART II, LI	INE 10C	577,087.	568,746.
FORM 990-PF 07	THER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
THE CLIFFS INVESTMENT GROUP, LLC THE COUNTY BANK - INV ACC 1747	COST COST	979,607. 281,819.	1,000,000. 391,696.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B STATEMENT 8

#### EXPLANATION

SC ATTORNEY GENERAL NO LONGER REQUIRES A COPY TO BE FILED

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 9
NAME OF CONTRIBUTOR	ADDRESS	
MONA R DAVIS	1319 REYNOLDS AVENUE GREENWOOD, SC 29649	
EMMETT I DAVIS JR	1319 REYNOLDS AVENUE GREENWOOD, SC 29649	
DAVIS & FLOYD, INC	POST OFFICE BOX 428 GREENWOOD, SC 29648	

58-2432024

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

HILLARY CRAIGO P.O. BOX 428 GREENWOOD, SC 29648

TELEPHONE NUMBER

864-229-5211

FORM AND CONTENT OF APPLICATIONS

REQUESTS FOR CONTRIBUTIONS ARE NOT SOLICITED. THEREFORE, THERE ARE NOT ANY FORMS AVAILABLE OR DEADLINES.

ANY SUBMISSION DEADLINES

SAME AS ABOVE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE