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Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491303002008

OMB No 1545-0052

2017

#### **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.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2017, or tax year	r beginning 01-01-20	017	, ar	nd en	iding 12-31-	2017		
		indation					A Employer ide	entification numbe	er	
		FOUNDATION UR STATE BANK					58-6338488			
	ber and D BOX 4	l street (or P O box number ıf maıl ıs n 181	ot delivered to street address)	Room/suite			<b>B</b> Telephone nu	mber (see instructio	ns)	
							(864) 938-4133			
	City or town, state or province, country, and ZIP or foreign postal code CLINTON, SC 293250481						<b>C</b> If exemption	application is pendin	ig, check here	
<b>G</b> Ch	neck al	l that apply 🔲 Initial return	$\square$ Initial return of a	former publi	c charity		<b>D 1.</b> Foreign org	ganizations, check h	ere 📘 🗍	
		☐ Final return	Amended return					ganizations meeting		
		Address chan	ige 🔲 Name change				test, checi	k here and attach co	mputation 🕨 🔝	
H Ch	eck ty	pe of organization 🗹 Section	501(c)(3) exempt private	foundation				indation status was n 507(b)(1)(A), chec		
	Section	1 4947(a)(1) nonexempt charitable			ndation		4.145. 555.15.	(2)(1)()		
I Fai	r mark	ket value of all assets at end		<b>✓</b> Cash	☐ Accru	ıal	<b>F</b> If the founda	ition is in a 60-mont	h termination	
		from Part II, col (c), \$ 5,787,693	Other (specify) (Part I, column (d) must	be on cash :	basis )		under sectioi	n 507(b)(1)(B), ched	ck here	
Pa	rt I	Analysis of Revenue and	Expenses (The total	T					(d) Disbursements	
	-	of amounts in columns (b), (c), and	•		ue and ses per	(b)	Net investment	(c) Adjusted net	for charitable purposes	
		equal the amounts in column (a) (se	e instructions) )	bo	oks		income	income	(cash basis only)	
	1	Contributions, gifts, grants, etc , schedule)	, received (attach		891,768					
	2	Check ▶ ☐ If the foundation is Sch. B	not required to attach							
	3	Interest on savings and tempora	ary cash investments							
	4	Dividends and interest from secu	urities		103,494		103,494			
	5a	Gross rents								
	b	Net rental income or (loss)								
<u>e</u>	6a	Net gain or (loss) from sale of as	ssets not on line 10		502,317					
Reverkie	b	Gross sales price for all assets of								
Zev	7	Capital gain net income (from Pa	1,329,751 art IV line 2)				502,317			
_	8	Net short-term capital gain .	•				302,317		<del> </del>	
	9	Income modifications								
	10a	Gross sales less returns and allo	1							
	b		wances							
	С	Gross profit or (loss) (attach sch	nedule)							
	11	Other income (attach schedule)		<b>9</b>	2,727	1	2,727			
	12	Total. Add lines 1 through 11			1,500,306		608,538			
	13	Compensation of officers, director	ors, trustees, etc		27,567		27,567		0	
	14	Other employee salaries and was	ges							
Ş	15	Pension plans, employee benefit	s							
ารย	16a	Legal fees (attach schedule) .								
Expenses	ь	Accounting fees (attach schedule	e)	<b>%</b> J	1,800		1,800		0	
Ω c	С	Other professional fees (attach s	schedule)	<b>9</b> 2J	28,676		28,676		0	
and Administrative	17	Interest								
stra	18	Taxes (attach schedule) (see ins	tructions)	<b>%</b> J	2,979		1,052		0	
E S	19	Depreciation (attach schedule) a	ind depletion							
Ē	20	Occupancy								
₹ E	21	Travel, conferences, and meeting	gs							
anc	22	Printing and publications								
	23	Other expenses (attach schedule	e)							
Operatıng	24	Total operating and administ	rative expenses.							
ber		Add lines 13 through 23			61,022		59,095		0	
0	25	Contributions, gifts, grants paid			183,500				183,500	
	26	Total expenses and disburser 25	ments. Add lines 24 and		244,522		59,095		183,500	
	27	Subtract line 26 from line 12			,		,-30		111,100	
	а	Excess of revenue over exper	nses and		1,255,784					
	ь	disbursements  Net investment income (if neg	ative. enter -0-1				549,443		<del> </del>	
	c	Adjusted net income(if negative	•				5,		<del> </del>	
F		work Doduction Act Notice so	,			L			000 PE (2217)	

1,845

589,715

169,711

1,389,542

2,313,106

150.633

2,162,473

2,313,106

2,313,106

1,800

578,605

969,121

1,689,468

3,568,890

150,633

3,418,257

3,568,890

3,568,890

2,313,106

1,255,784

3,568,890

3,568,890

Form 990-PF (2017)

0

1

2

3

4

5 6 1,800

1,172,486

3,340,087

5,787,693

943,424

disqualified persons (attach schedule) (see instructions) . . . . . Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule)

Accounts payable and accrued expenses . . . . . . . . . . . .

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

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

Foundations that follow SFAS 117, check here ▶ □

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

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds . . . . . . . . .

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

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶ \_ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule) ▶

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

Investments—other (attach schedule) . . . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -\_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . .

Other increases not included in line 2 (itemize) -

Less allowance for doubtful accounts ▶ Inventories for sale or use . . . . .

	5
	6
	7
S	8
Assets	8 9
As	10
	11

12

13

14

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16

17 18

19

20 21

22

23

24

25

26

28

29 Net 30

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Page **3** 

Part IV Capital Gains	and Losses for Tax on Investm	ent Income			
	<b>(a)</b> the kınd(s) of property sold (e g , real ehouse, or common stock, 200 shs  Ml		<b>(b)</b> How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1aSee Additional Data Tabl	e				
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or d	g) other basis ense of sale	Gain	<b>(h)</b> or (loss) f) minus (g)
a See Additional Data Tabl	e				
b					
c					
d					
e					
Complete only for assets	s showing gain in column (h) and owne	ed by the foundation o	on 12/31/69		(I)
(i) F M V as of 12/31/69	( <b>j)</b> Adjusted basis as of 12/31/69	Excess	<b>k)</b> of col(ı) (j), ıf any	col (k), but no	(h) gain minus t less than -0-) <b>or</b> rom col (h))
a See Additional Data Tabl	e				
b					
С					
d					
e					
2 Capital gain net income	e or (net capital loss)	gain, also enter in Pa (loss), enter -0- in P		2	502,317
·	gain or (loss) as defined in sections 12: ort I, line 8, column (c) (see instruction	s) If (loss), enter -0-	· }	3	
Part V Qualification	Under Section 4940(e) for Red	uced Tax on Net	Investment Ir	come	
-	private foundations subject to the section				
(Tor optional use by domestic p	orivate roundations subject to the section	on 4540(a) tax on he	t investment incor	iie <i>)</i>	
If section 4940(d)(2) applies, le	eave this part blank				
	ne section 4942 tax on the distributable ot qualify under section 4940(e) Do no		in the base period	۱۶ 🔲 ،	Yes 🔽 No
	nount in each column for each year, se	e instructions before	making any entri		
(a) Base period years Calendar year (or tax year beginning in)		(c) Net value of noncharitable		( <b>d)</b> Distribution ra (col (b) divided by	col (c))
2016	175,000		3,475,927		0 050346
2015	188,901		3,603,721		0 052418
2014	229,432		3,781,925		0 060665
2013 2012	166,000 156,000		3,552,070 3,279,247		0 046733 0 047572
	· · ·			T	
2 Total of line 1, column (	d)  .   .   .   .   .   .		2	+	0 257734
	o for the 5-year base period—divide the ndation has been in existence if less th		or by the		0 051547
	ncharitable-use assets for 2017 from F		4		4,841,609
<b>5</b> Multiply line 4 by line 3			5		249,570
<b>6</b> Enter 1% of net investm	ent income (1% of Part I, line 27b) $oldsymbol{.}$		6		5,494
<b>7</b> Add lines 5 and 6			7		255,064
	ions from Part XII, line 4 ,		8		183,500
If line 8 is equal to or gre instructions	eater than line 7, check the box in Part	VI, line 1b, and com	plete that part us	ng a 1% tax rate S	ee the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

Down WIII	Information About Officers,	Directors,	Trustees,	Foundation Managers,	Highly Paid Employees,
bart ATTT	and Contractors				

List all officers, directors, truste	es, f	oundation managers ar	nd their compensation	(see instructions).	
(a) Name and address		Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ARTHUR STATE BANK		TRUSTEE	14,523	0	0
205 JACOBS HIGHWAY CLINTON, SC 29325	10 0	10			
ESTELLE J WOOD			1,429	0	0
PO BOX 5031			,		
ANDERSON, SC 29623 PARNELL WOOD BUHLMAN	CO .	TRUSTEE	11.615	0	
41 MURRAY HILL CIRCLE	2 00		11,615	U	0
BALTIMORE, MD 212121026					
2 Compensation of five highest-pa	id e	mployees (other than t	hose included on line 1	<del></del>	ne, enter "NONE."
(a) Name and address of each employee p more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		-			
		-			
Total number of other employees paid ov	er \$5	50,000	<del></del>		0
3 Five highest-paid independent c					E".
(a) Name and address of each perso	n pai	d more than \$50,000	<b>(b)</b> Typ	e of service	(c) Compensation
NONE					
			_		
			-		
			-		
			1		
Total number of others receiving over \$5	0,000	ofor professional services			0
Part IX-A Summary of Direct					
List the foundation's four largest direct charitable	e activ	vities during the tax year Incl	ude relevant statistical inform	nation such as the number of	Expenses
organizations and other beneficiaries served, cor	nteren	ces convened, research paper	s produced, etc		
1					
-					
2					
3					
4					
-					
Part IX-B Summary of Progra	m-R	elated Investments	(see instructions)		
Describe the two largest program-related inv				and 2	Amount
1			,		
2					
All other programs welsted	C -	Inches of a			
All other program-related investments  3	>ee	mstructions			
~					
Total. Add lines 1 through 3 .			<u></u>		C

2

3

4

5

Amounts set aside for specific charitable projects that satisfy the

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

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

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

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

183.500

2

3a 3h

4

5

2

183,500

47,591

# Part XIIII Undistributed Income (see instructions)

di C AIII	Olidistributed Income (See Instruc	cionsy			
		(a) Corpus	(b) Years prior to 2016	(c) 2016	<b>(d)</b> 2017
Distributab	ole amount for 2017 from Part XI, line 7				231,091
Undistribut	ted income, if any, as of the end of 2017				
<b>1</b> Enter amo	unt for 2016 only			0	
Total for p	rior years 20		0		

55.797

47,591

8,206

8,206

5.206 3.000

a Ente **b** Total for prior years Excess distributions carryover, if any, to 2017

41 884

a From 2012. . . . . **b** From 2013. . . . . c From 2014. . .

10.913

3,000

d From 2015. . . . . e From 2016. . . . . f Total of lines 3a through e. . . . . . . .

4 Qualifying distributions for 2017 from Part

XII, line 4 🕨 \$

(Election required—see instructions). . . . .

a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years c Treated as distributions out of corpus (Election

required—see instructions). . . . . . . . . .

same amount must be shown in column (a) )

6 Enter the net total of each column as

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . .

d Excess from 2016. . . e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a . . . . . .

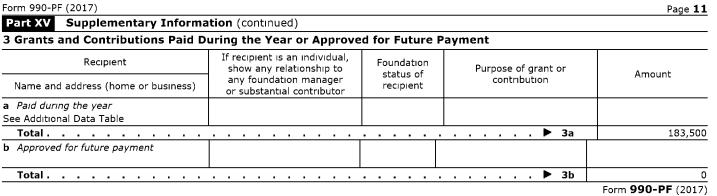
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

indicated below:

**d** Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors NONE



nter gross amounts unless otherwise indicated		Unrelated bus	siness income	Excluded by section	(e) Related or exempt	
_	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions
	and contracts from government agencies					
	rship dues and assessments store on savings and temporary cash					
ınvesti	ments			14		
	ds and interest from securities			14	103,494	
	tal income or (loss) from real estate					
	ebt-financed property					
	ntal income or (loss) from personal property					
Other in	nvestment income			14	2,727	
	r (loss) from sales of assets other than					
	ory			18	502,317	
	rofit or (loss) from sales of inventory					
Other r	evenue a					
b						
c						
c d						
b c d e Subtota	al Add columns (b), (d), and (e).		0		608,538	
b c d e Subtota Total.			0	13	608,538	
b c d e Subtota Total. /	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculated.  Relationship of Activities to th	ations ) e Accomplishr	nent of Exem	pt Purposes	3	608,538
c  d  Subtota  Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify calcul	ations ) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes  Part XVI-A contribu	ted importantly to	608,53
b c d Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes  Part XVI-A contribu	ted importantly to	608,53
b c d e Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes  Part XVI-A contribu	ted importantly to	608,53
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b c d e Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes  Part XVI-A contribu	ted importantly to	608,538
b c d Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes  Part XVI-A contribu	ted importantly to	608,53
b c d e Subtota Total. / (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	ations ) e Accomplishr income is reported	ment of Exempled in column (e) of	pt Purposes  Part XVI-A contribu	ted importantly to	608,538

orm 990	)-PF (2	.017)											Pa	ge <b>13</b>
Part X	VII	Information Re Exempt Organi		ransf	ers To a	and Trans	actio	ns and	Relatio	nships With	Nonchari	table		
		anization directly or in ode (other than sectio									section 501		Yes	No
a Trans	fers fr	om the reporting foun	dation to a r	nonchar	ıtable exe	empt organı	zation	of						
(1)	Cash.											1a(1)		No
(2)	Other	assets										1a(2)		No
<b>b</b> Other	r trans	actions												
(1)	Sales	of assets to a nonchar	ıtable exemp	t organ	nization.							1b(1)		No
(2)	Purcha	ases of assets from a r	noncharitable	exemp	ot organiz	ation						1b(2)		No
(3)	Rental	of facilities, equipmen	nt, or other a	ssets.								1b(3)		No
(4)	Reımb	ursement arrangemen	its									1b(4)		No
(5)	Loans	or loan guarantees.										1b(5)		No
<b>(6)</b> P	erforn	nance of services or m	embership o	r fundr	aısıng sol	icitations.						1b(6)		No
<b>c</b> Shari	ng of t	facilities, equipment, r	nailing lists,	other a	ssets, or	paid employ	ees.					1c		No
of the	good y trans	er to any of the above s, other assets, or ser saction or sharing arra (b) Amount involved	vices given b ingement, sh	y the r low in c	eporting to	foundation	If the for the	foundation goods, o	on receive other asse	d less than fair	market valu eceived	ie	ngomor	ate.
(a) Lille N	10	(b) Amount involved	(C) Name of	ПОПСПА	illable exel	inpt organizat	1011	(u) De	scription of	transiers, transac	tions, and sna	iring arra	ngemei	11.5
3- I- +b-				ماخيين لم		d 4.2 2.2 2.2								
descr	rbed in	dation directly or indire in section 501(c) of the mplete the following s	Code (other									☐ Yes	<b>✓</b>	No
		(a) Name of organization	on		(E	) Type of org	anızatıo	n		(c) Descri	ption of relati	onship		
		r penalties of perjury, knowledge and belief												
Sign		preparer has any kno		,		1			•	. , . ,				
Here	*	****				2018-10-1	.9	).	*****		returr	he prepa		
	<b>7</b> s	ignature of officer or t	rustee			Date			Title			nstr )? 🖣	✓ Yes	□No
		Print/Type preparer's	name	Prepa	rer's Sıgr	nature		Date		Check if self-	PTIN			
Paid		J JAY PEAY CPA								employed ▶ □	]	P01370	)389	

Preparer | Firm's name ► SWAIMBROWN PA Firm's EIN ▶57-0783795 Firm's address ▶ PO BOX 299 Phone no (864) 833-4450 CLINTON, SC 293250299

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation ONEOK PARTNERS - 25,000 Р 2017-09-01 2016-10-24 US TSY BD FED STR - 200,000 Ρ 2017-08-08 2017-11-15 ALERIAN MLP ETF - 9 200 Р 2015-08-13 2017-09-19 PEPSICO INC NC - 250 Р 2015-05-08 2017-09-19 ALTRIA GROUP INC - 812 Р 2006-04-21 2017-09-19 Ρ BANK OF AMERICA - 25,000 2008-11-06 2017-09-01 Р BECKTON DICKINSON & CO - 600 2006-04-21 2017-09-19 Р DOWDUPONT INC - 2,020 432 2008-09-12 2017-09-14 Ρ HONEYWELL INTERNATIONAL INC - 250 2000-01-31 2017-09-19 ISHARES DOW JONES US ETF - 100 Р 2008-09-12 2017-09-19 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 25.000 25,017 -17 200,000 200,000 0 103,511 115,847 -12,33628,662 24,146 4,516 50,566 13,305 37,261 25,000 25,000 116,150 38,850 77,300 141,089 61,998 79,091 34,423 10,382 24,041 12,577 6,165 6,412 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -17 -12,3364,516 37,261 77,300 79,091 24,041 6,412

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo , day, yr ) D-Donation Р ISHARES GLOBAL HEALTHCARE ETF - 200 2008-09-12 2017-09-19 ISHARES MSCI ACWI ETF - 4,360 Р 2008-09-12 2017-09-19 NATL RURAL UTIL 5450 - 25,000 Р 2009-05-05 2017-04-10 PHILIP MORRIS INTL INC - 740 P 2006-04-21 2017-09-19 Ρ S & P 500 INDEX FUND - 100 2010-01-29 2017-09-19 Ρ TEXAS INSTRUMENTS - 700 2008-09-12 2017-09-19 WALT DISNEY CO HLDG CO - 750 2007-02-28 2017-09-19 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 22.483 10.610 11,873 105,898 300,005 194,107 25,000 25,000 85.410 27,630 57,780 25.293 10,907 14,386 60,789 14,854 45,935 73.793 23,616 50.177 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 11,873 105,898 0 57.780 14,386 45,935 50,177

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
ANDERSON FREE CLINICPO BOX 728 ANDERSON, SC 29622	NONE	EXEMPT	DONATION	
		The state of the s		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

ANDERSON MOOSE FAMILY CENTER 3871 HIGHWAY 24 ANDERSON, SC 29626	NONE	EXEMPT	DONATION	

3871 HIGHWAY 24 ANDERSON, SC 29626				
ARCH BISHOP BORDERS SCHOOL	NONE	EXEMPT	DONATION	

3a

ARCH BISHOP BORDERS SCHOOL 3500 FOSTER AVE	NONE	EXEMPT	DONATION	6,000
BALTIMORE, MD 21224				

500

15,000

—				
BALTIMORE, MD 21224				ĺ
3500 FOSTER AVE				I
ARCH DISHUP BURDERS SCHOOL	NONE	LYCMAI	DONATION	6,00

3500 FOSTER AVE BALTIMORE, MD 21224		-,
Total	 	183,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CALVARY HOME FOR CHILDREN NONE **EXEMPT** DONATION 2.000 110 CALVARY HOME CIRCLE ANDERSON, SC 29621 CATHOLIC CHARITIES OF THE NONE DONATION 36 000 EVEMBT

ARCHDIOCESE OF BALTIMORE 320 CATHEDRAL STREET THIRD FLOOR BALTIMORE, MD 212014421	NONE	EXEMPT	DONATION	30,000
CHILDRENS SCHOLARSHIP FUND 1000 ST PAUL ST BALTIMORE ND 21202	NONE	EXEMPT	DONATION	10,000

183,500 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHURCH OF THE IMMACULATE NONE **EXEMPT** DONATION 5,000 CONCEPTION 200 WARE AVE TOWSON, MD 21204

EMERSON ROSE HEART FOUNDATION PO BOX 935 CLEMSON, SC 29633	NONE	EXEMPT	DONATION	5,000
ENOCH PRATT FREE LIBRARY 400 CATHEDRAL ST	NONE	EXEMPT	DONATION	7,500

CLEMSON, SC 29633				
ENOCH PRATT FREE LIBRARY 400 CATHEDRAL ST BALTIMORE, MD 21201	NONE	EXEMPT	DONATION	7,5

За

183,500

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **EVERAS COMMUNITY SERVICES** NONE **EXEMPT** DONATION 10,000 24K WORLDS FAIR DRIVE SOMERSET, NJ 08873

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

GBMC FOUNDATION 6701 NORTH CHARLES ST BALTIMORE, MD 21204	NONE	EXEMPT	DONATION	7,500
GILCHRIST HOSPICE 11311 MCCORMICK RD SUITE 350	NONE	EXEMPT	DONATION	5,000

6701 NORTH CHARLES ST BALTIMORE, MD 21204				
GILCHRIST HOSPICE 11311 MCCORMICK RD SUITE 350 HUNT VALLEY, MD 21031	NONE	EXEMPT	DONATION	5,0

	GILCHRIST HOSPICE	NONE	EXEMPT	DONATION	5,0
	11311 MCCORMICK RD SUITE 350				•
	HUNT VALLEY, MD 21031				
-11					

Total . 183,500

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GOOD NEIGHBOR CUPBOARD NONE **EXEMPT** DONATION 2,000 313 S TOWERS STREET ANDERSON, SC 29621

HABITAT FOR HUMANITY 210 SOUTH MURRAY AVENUE ANDERSON, SC 29624	NONE	EXEMPT	DONATION	2,000
HOUSE OF RUTH - MARYLAND 2201 ARGONNE DRIVE	NONE	EXEMPT	DONATION	3,000

ANDERSON, SC 29624				
HOUSE OF RUTH - MARYLAND 2201 ARGONNE DRIVE BALTIMORE, MD 21218	NONE	EXEMPT	DONATION	3,00

HOUSE OF RUTH - MARYLAND	NONE	EXEMPT	DONATION	3,
2201 ARGONNE DRIVE				
BALTIMORE, MD 21218				

Total		•	183 500
BALTIMORE, MD 21218			

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				1
IMMACULATE CONCEPTION SCHOOL 112 WARE AVENUE TOWSON.MD 21204	NONE	EXEMPT	DONATION	

TOWSON, MD 21204				
MARYVALE PREPARATORY SCHOOL 11300 FALLS ROAD LUTHERVILLE, MD 21093	NONE	EXEMPT	DONATION	

MARYVALE PREPARATORY SCHOOL 11300 FALLS ROAD LUTHERVILLE, MD 21093	NONE	EXEMPT	DONATION	
MIDLAND FOUNDATIONPO BOX 5026	NONE	EXEMPT	DONATION	

3a

LUTHERVILLE, MD 21093				
MIDLAND FOUNDATIONPO BOX 5026 NORTH BRANCH, NJ 08876	NONE	EXEMPT	DONATION	

EOTHERVILLE, MD 21093				]
MIDLAND FOUNDATIONPO BOX 5026 NORTH BRANCH, NJ 08876	NONE	EXEMPT	DONATION	5,0

MIDLAND FOUNDATIONPO BOX 5026 NORTH BRANCH, NJ 08876	NONE	EXEMPT	DONATION	5,000
Total				183,500

10.000

30,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MOSS CREEK MARINES INC NONE **EXEMPT** DONATION 3,000 91 SAW TIMBER DRIVE HILTON HEAD, SC 29926

MOVEABLE FEAST 901 N MILTON AVENUE BALTIMORE, MD 21205	NONE	EXEMPT	DONATION	2,000
NEXT ONE UP FOUNDATION PO BOX 22503	NONE	EXEMPT	DONATION	2,000

183,500

BALTIMORE, MD 21205				
NEXT ONE UP FOUNDATION PO BOX 22503 BALTIMORE, MD 21205	NONE	EXEMPT	DONATION	2,0

Total .

За

, , , , , , , , , , , , , , , , , , ,				
NEXT ONE UP FOUNDATION	NONE	EXEMPT	DONATION	2,00
PO BOX 22503				
BALTIMORE, MD 21205				

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST JAMES AND JOHN SCHOOL NONE **EXEMPT** DONATION 6,000 2012 SOMERSET ST BALTIMORE, MD 21202

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

THE ARC MONMOUTH INC 1158 WAYSIDE ROAD TINTON FALLS, NJ 07712	NONE	EXEMPT	DONATION	6,000
UNIVERSITY LUTHERAN CHURCH BOX 1337	NONE	EXEMPT	DONATION	3,000

183,500

TINTON FALLS, NJ 0//12				
UNIVERSITY LUTHERAN CHURCH BOX 1337 CLEMSON, SC 29633	NONE	EXEMPT	DONATION	3,0

Total .

За

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -		DLN: 93491303002008
TY 2017 Accounting Fe	es Sch	edule			
	Name:	THE WPV	V FOUNDATION		
	C/O ARTHUR STATE BANK				
	EIN:	58-63384	488		
Accounting Fees Schedule			,		
Category	Ame	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX RETURN PREP FEE		1,800	1,800		0

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -	DLN: 9349130300200	8

### **TY 2017 Investments Corporate Bonds Schedule**

Name: THE WPW FOUNDATION

C/O ARTHUR STATE BANK

<b>EIN:</b> 58-6338488		
Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value
1000 EQUITY COMMONWEALTH RIET 5.75% 8-1-2042	24,596	254
25000 CISCO SYSTEMS INC 4.95% 2/15/19	24,966	25,811
25000 DIAGEO CAPITAL PLC 4.85% 5/15/18	24,703	25,258
25000 GOLDMAN SACHS 6.15% 4-1-18	22,576	25,263
25000 WALMART ST INC 4.125% 2/1/19	24,606	25,558
100000 SHS - ALLERGAN INC NT 1.35% 3-15-18	99,970	99,874
99000 SHS - ALLY BK MIDVALE UTAH 1.60% 3-14-19	98,990	98,772
100000 SHS - AMERICAN EXP FED SVGS BK 1.95% 9-8-20	99,850	99,136
100000 SHS CISCO SYS INC NT 1.40% 9-20-19	99,562	98,957
85000 SHS COMPASS BK ALA CD 1.45% 9-21-18	84,915	84,911
15000 FED HOME LOAB NANKS BOND 1.125% 9-14-18	14,981	14,937
101000 FORD MOTOR CREDIT COMP MTN 2.60% 9-20-21	100,293	98,063
100000 SHS GOLDMAN SACHS BANK CD 1.80% 3-23-21	98,990	99,052
25000 SHS MB FINL BANK CD CHICAGO .90% 7-27-18	25,000	24,911
25000 SHS SUMITOMO MITSUI BANKING CORP 1.50% 1-18-18	25,038	24,996
101000 SHS TEVA PHARMACEUTICAL 2.25% 3-18-20	100,085	97,671

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303002008

## **TY 2017 Investments Corporate Stock Schedule**

Name: THE WPW FOUNDATION

C/O ADTUID STATE BANK

C/O ARTHUR S	STATE BANK	
<b>EIN:</b> 58-6338488		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
750 SH PEPSICO	72,439	89,940
1000 SH. JP MORGAN CHASE STOCK	63,688	106,940
740 SH. PHILIP MORRIS INTL	30,539	78,181
700 SH. TEXAS INSTRS	12,699	73,108
1500 SH. MERCK & CO INC	52,080	84,405
1800 SH. BB&T CORPORATION STOCK	64,561	89,496
1136 SH CONOCOPHILLIPS	49,321	62,355
800 SH. SCHLUMBERGER LTD	41,007	53,912
900 SH MICROSOFT CORP STOCK	46,422	76,986
1112 SH. ALTRIA GROUP	21,290	79,408
700 SH. HONEYWELL INTERNATIONAL	26,181	107,352
900 SHS BANK NEW YORK MELLON CORP	33,692	48,474
1000 SHS HALLIBURTON COMPANY	23,520	48,870
300 SHS HERSHEY CO	14,601	34,053
600 SHS HOME DEPOT INC	19,276	113,718
250 SHS PHILLIPS 66	7,289	25,288

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491303002008

### **TY 2017 Investments - Other Schedule**

Name: THE WPW FOUNDATION

C/O ARTHUR STATE BANK

<b>EIN:</b> 58-6338488						
Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
638 UTILITIES SETOPR TR	AT COST	20,288	33,610			
1500 SH ISHARES FTSE EPRA REAL ESTATE FD	AT COST	33,742	45,000			
12615 SH ISHARES MSCI ACWI	AT COST	438,166	909,415			
1800 SH ISHARES S&P GLOBAL CONS STAPLES	AT COST	93,204	190,692			
1700 SH ISHARES S&P GLOBAL HEALTHCARE	AT COST	79,632	191,284			
1900 SH ISHARES S&P GLOBAL IT SECT	AT COST	86,158	291,954			
3650 SH ISHARES S&P EUR 350	AT COST	135,024	172,499			
650 ISHARES S&P 500 INDEX	AT COST	70,426	174,753			
4100 SH ISHARES S&P GLOBAL INFRASTR	AT COST	134,677	185,402			
8800 SH POWERSHARES GLOBAL WATER PORT	AT COST	133,864	229,152			
1400 SH. ISHARES TRUST S&P SMALLCAP 600 INDEX FUND	AT COST	75,311	107,534			
7955 SHS ISHARES COMEX GOLD TRUST	AT COST	99,987	99,517			
1045 SHS ISHARES RUSSELL 2000 INDEX	AT COST	46,078	159,321			
3142 SHS ISHARES US TOTAL MKT INDEX FUND	AT COST	157,709	419,834			
2605 SHS ISHARES TR MSCI ACWI EX US INDEX FUND	AT COST	85,202	130,120			

Name: THE WPW FOUNDATION

C/O ARTHUR STATE BANK

**EIN:** 58-6338488

OTHER INCOME

Other Income Schedule

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

2,727

Net Investment

2,727

Income

**Adjusted Net Income** 

DLN: 93491303002008

Revenue And

2,727

Description

**Expenses Per Books** 

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DL	N: 93491303002008		
TY 2017 Other Professional Fees Schedule						
Name: THE WPW FOUNDATION						
	C/O ARTHUF	R STATE BANK				
<b>EIN:</b> 58-6338488						
Category	Amount	Net Investment	Adjusted Net	Disbursements		

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

28,676

28,676

INVESTMENT ADMIN FEES

efile GRAPHIC print - DO NOT I	PROCESS	As Filed Data	-	DLI	N: 93491303002008	
TY 2017 Taxes Schedule						
	Name:	THE WPW FO	OUNDATION			
		C/O ARTHUF	R STATE BANK			
	EIN:	58-6338488	}			
Category	Am	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXCISE TAX		1,927	0		0	
FOREIGN TAX		1,052	1,052		0	

efile GRAPHIC print - DO N	IOT PROCESS	As Filed Data -				DLN: 93491303002008
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at   www irs gov/form990					
Name of the organization THE WPW FOUNDATION					Employer id	lentification number
C/O ARTHUR STATE BANK  Organization type (check of	ne)				58-6338488	
organization type (oncon c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)(	) (enter number) o	rganization			
	☐ 4947(a)(1	l) nonexempt char	ritable trust <b>not</b> treated a	s a private founda	tion	
	☐ 527 politie	cal organization				
Form 990-PF	<b>☑</b> 501(c)(3)	exempt private fo	undation			
	☐ 4947(a)(1	I) nonexempt char	ritable trust treated as a	private foundation		
	☐ 501(c)(3)	taxable private fo	undation			
			PF that received, during omplete Parts I and II S			
Special Rules						
under sections 509(a	a)(1) and 170(b) ne contributor, d	(1)(A)(vı), that che urıng the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year, total	l contributions of	more than \$1,000	or (10) filing Form 990 o exclusively for religious animals Complete Part	s, charitable, scient		
during the year, conf If this box is checked purpose Don't comp	tributions <i>exclus</i> d, enter here the plete any of the p	ively for religious, total contributions parts unless the <b>G</b> o	or (10) filing Form 990 of charitable, etc., purpose is that were received duri eneral Rule applies to the or more during the year	s, but no such con ng the year for an nis organization be	tributions tota exclusively re cause it recei	aled more than \$1,000 digious, charitable, etc.,
Caution. An organization th 990-EZ, or 990-PF), but it m Form 990-EZ or on its Form 990-EZ, or 990-PF)	i <b>ust</b> answer "No	on Part IV, line 2	, of its Form 990, or che	ck the box on line	H of its	
For Paperwork Reduction Act N for Form 990, 990-EZ, or 990-PF		ructions	Cat No 30613X	Schedu	ile B (Form 990	, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number THE WPW FOUNDATION 58-6338488 C/O ARTHUR STATE BANK Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (a) (d) (b) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 WILFRID P WOOD CHARITABLE REMAINDER UNITRUST Person **Payroll** PO BOX 481 \$891,768 Noncash CLINTON, SC 29325 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions)

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)		Page 4
Name of organizat THE WPW FOUNDAT. C/O ARTHUR STATE	ION		Employer identification number 58-6338488
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) throu of exclusively religious, charit actions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift 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
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferee's name, address, and	(e) Transfer of gift	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
	Transferrate name and	(e) Transfer of gift	
	Transferee's name, address, and	ZIP 4 F	Relationship of transferor to transferee

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