

Return of Private Foundation

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

2949100902917 1
OMB No 1545-0047

2004

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning

5/1/2019

, and ending

4/30/2020

- 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.

Name of foundation DOBSON TAPE MINISTRY, INC		A Employer identification number 57-0852580			
		B Telephone number (see instructions) 864-284-6042			
Number and street (or P O box number if mail is not delivered to street address) 1207 PELHAM ROAD		C If exemption application is pending, check here ► <input checked="" type="checkbox"/> 60			
City or town, state or province, country, and ZIP or foreign postal code GREENVILLE SC 29615		D 1 Foreign organizations, check here ► <input type="checkbox"/>			
Foreign country name Foreign province/state/county Foreign postal code		2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>			
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation 04 <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 1,892,392 (Part I, column (d), must be on cash basis)		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
03		1 Contributions, gifts, grants, etc., received (attach schedule)	10,325		
04		2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B			
Revenue		3 Interest on savings and temporary cash investments	128,836	128,836	
SCANNED JAN 13 2022		4 Dividends and interest from securities	7,730	7,730	
Operating and Administrative Expenses		5a Gross rents			
		b Net rental income or (loss)			
		6a Net gain or (loss) from sale of assets not on line 10			
		b Gross sales price for all assets on line 6a			
		7 Capital gain net income (from Part IV, line 2)			
		8 Net short-term capital gain			
		9 Income modifications			
		10a Gross sales less returns and allowances			
		b Less Cost of goods sold			
		c Gross profit or (loss) (attach schedule)			
		11 Other income (attach schedule)	83,441	6,000	
		12 Total. Add lines 1 through 11	230,332	142,566	0
		13 Compensation of officers, directors, trustees, etc			
		14 Other employee salaries and wages			
		15 Pension plans, employee benefits			
		16a Legal fees (attach schedule)	1,531		
		b Accounting fees (attach schedule)	2,125		
		c Other professional fees (attach schedule)	8,678	8,678	
		17 Interest			
		18 Taxes (attach schedule) (see instructions)	1,125		
		19 Depreciation (attach schedule) and depletion			
		20 Occupancy			
		21 Travel, conferences, and meetings	10,025		
		22 Printing and publications			
		23 Other expenses (attach schedule)	18,414		
		24 Total operating and administrative expenses Add lines 13 through 23	41,898	8,678	0
		25 Contributions, gifts, grants paid	98,105		98,105
		26 Total expenses and disbursements. Add lines 24 and 25 OGDEN UT IRS-OSC	140,003	8,678	0
		27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	90,329		0
				133,888	
					0

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	72,218	85,902	85,902
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ►			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ►			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ►			
		Less allowance for doubtful accounts ►			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	449,734	526,379	526,379
	c	Investments—corporate bonds (attach schedule)	1,000,000	1,000,000	1,000,000
Liabilities	11	Investments—land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule) ►			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	254,411	254,411	254,411
	14	Land, buildings, and equipment basis ►	25,700		
		Less accumulated depreciation (attach schedule) ►	25,700	25,700	25,700
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,802,063	1,892,392	1,892,392
Net Assets or Fund Balances	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)	0	0	
	23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.		► <input type="checkbox"/>		
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.		► <input checked="" type="checkbox"/>		
	26	Capital stock, trust principal, or current funds	1,802,063	1,892,392	
	27	Paid-in or capital surplus, or land, bldg , and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds			
	29	Total net assets or fund balances (see instructions)	1,802,063	1,892,392	
	30	Total liabilities and net assets/fund balances (see instructions)	1,802,063	1,892,392	

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

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	1,802,063
2	Enter amount from Part I, line 27a	2	90,329
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	1,892,392
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	1,892,392

Part IV Capital Gains and Losses for Tax on Investment Income

a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g))		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	0	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) See instructions If (loss), enter -0- in Part I, line 8	{ }		3	0	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation doesn't qualify under section 4940(e) Do not complete this part Yes No

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	98,125	1,795,428	0 054653
2017	96,621	1,731,339	0 055807
2016	0	0	0 000000
2015	0	0	0 000000
2014	0	0	0 000000
2 Total of line 1, column (d)			2 0 110460
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			3 0 022092
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			4 1,794,206
5 Multiply line 4 by line 3			5 39,638
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,339
7 Add lines 5 and 6			7 40,977
8 Enter qualifying distributions from Part XII, line 4			8 98,105
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions			

3

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1
Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)

1 1,339

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► and enter 1% of Part I, line 27b

2 0

c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)

3 1,339

4 Subtitle A (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. If zero or less, enter -0-

6 Credits/Payments

a 2019 estimated tax payments and 2018 overpayment credited to 2019

6a

b Exempt foreign organizations—tax withheld at source

6b

c Tax paid with application for extension of time to file (Form 8868)

6c

d Backup withholding erroneously withheld

6d

7 Total credits and payments Add lines 6a through 6d

7 0

8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached

8 40

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

9 1,379

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

10 0

11 Enter the amount of line 10 to be Credited to 2020 estimated tax ► Refunded ►

11 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?

1a X

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 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

1b X

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 ► \$ _____ (2) On foundation managers ► \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities

2 X

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

3 X

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a X

b If "Yes," has it filed a tax return on Form 990-T for this year?

4b N/A

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by *General Instruction T*

5 X

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

6 X

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

7 X

8a Enter the states to which the foundation reports or with which it is registered See instructions ►
SC

8b X

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G*? If "No," attach explanation

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 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV

9 X

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

10 X

2

Part 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	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	13	X
14 The books are in care of ► DANIEL L. A. DOBSON Located at ► 1207 PELHAM ROAD GREENVILLE SC	Telephone no ► 864-284-6042	ZIP+4 ► 29615
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 ► 15	► □	
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

	Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
1b 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 Organizations relying on a current notice regarding disaster assistance, check here ►	► □	
1c 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 2019?	1c N/A	
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 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If "Yes," list the years ► 20____, 20____, 20____, 20____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019)	3b N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a X	
b 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 2019?	4b X	

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year, did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Yes	No
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ► <input type="checkbox"/>		5b	N/A	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	X	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		7b	N/A	
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ELIZABETH C DOBSON 1207 PELHAM ROAD GREENVILLE, SC 29615	CHAIRWOMAN 5 00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ►

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ►

Part IX-A **Summary of Direct Charitable Activities**

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 SUPPORT OF OTHER 501(c)(3) ORGANIZATIONS THAT ARE INVOLVED IN CHRISTIAN EVANGELISM AND FULFILLING CHRIST'S MANDATE OF HELPING THE SICK, POOR, AND HOMELESS 38 MINISTRIES or 501(c)(3) ORGANIZATIONS WERE SERVED DURING THE YEAR	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	
2	

All other program-related investments. See instructions

3	

Total. Add lines 1 through 3 ►

0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	1,488,057
b	Average of monthly cash balances	1b	79,061
c	Fair market value of all other assets (see instructions)	1c	254,411
d	Total (add lines 1a, b, and c)	1d	1,821,529
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,821,529
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see instructions)	4	27,323
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,794,206
6	Minimum investment return. Enter 5% of line 5	6	89,710

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6	1	89,710
2a	Tax on investment income for 2019 from Part VI, line 5	2a	1,339
b	Income tax for 2019 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	1,339
3	Distributable amount before adjustments Subtract line 2c from line 1	3	88,371
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	88,371
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	88,371

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	98,105
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	3a	
a	Suitability test (prior IRS approval required)	3b	
b	Cash distribution test (attach the required schedule)	4	98,105
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	5	1,339
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	6	96,766
6	Adjusted qualifying distributions. Subtract line 5 from line 4		

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				88,371
2 Undistributed income, if any, as of the end of 2019			0	
a Enter amount for 2018 only				
b Total for prior years: 20 ____, 20 ____				
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015				
c From 2016				
d From 2017	12,066			
e From 2018	10,514			
f Total of lines 3a through e	22,580			
4 Qualifying distributions for 2019 from Part XII, line 4 ► \$ 98,105				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2019 distributable amount				88,371
e Remaining amount distributed out of corpus	9,731			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	32,314			
b Prior years' undistributed income Subtract 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				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020		0		
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 2014 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	32,314			
10 Analysis of line 9				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017	12,066			
d Excess from 2018	10,514			
e Excess from 2019	9,734			

Part XIV: Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling .

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) OF 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c Qualifying distributions from Part XII, line 4, for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities.

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a. The name, address, and telephone number or email address of the person to whom applications should be addressed.

b. The form in which applications should be submitted and information and materials they should include

c. Any submission deadlines:

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CRU 100 Lake Hart Dr Orlando, FL 32831		PC	FUND OPER	2,200
CENTER FOR ACTION AND CONTEMPLATION 1207 Pelham Rd Greenville, SC 29615		NC	FUND OPER	100
ST FRANCIS FOUNDATION 1 St Francis Dr Greenville, SC 29601		PC	FUND OPER	5,000
LIMESTONE COLLEGE 1115 College Dr Gaffney, SC 29340		PC	FUND OPER	1,000
USC FOUNDATION 1027 Barnwell Street Columbia, SC 29201		PC	FUND OPER	1,000
TIM LEE MINISTRIES PO Box 461674 Garland, TX 75046		PC	FUND OPER	500
POINSETT CLUB FOUNDATION 807 E Washington St Greenville, SC 29601		POF	FUND OPER	500
FELLOWSHIP CHRISTIAN ATHLETES 8701 Leeds Rd Kansas City, MO 64129		PC	FUND OPER	1,000
AMERICAN RED CROSS 940 Grove Rd Greenville, SC 29605		PC	FUND OPER	1,000
NATURE CONSERVANCY 4245 N Fairfax Dr, Ste 100 Arlington, VA 22203		PC	FUND OPER	250
UNITED WAY OF GREENVILLE 105 Edinburgh Ct, Ste 2529 Greenville, SC 29607		PC	FUND OPER	10,000
Total . . . See Attached Statement				► 3a 98,105
b Approved for future payment				
Total . . .				► 3b 0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue.					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			01	128,836	
4 Dividends and interest from securities			01	7,730	
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					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a <u>BAD DEBT RECOVERY</u>			01	6,000	
b <u>UNREALIZED APPRECIATION</u>			01	77,441	
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		220,007	0
13 Total. Add line 12, columns (b), (d), and (e)	13				220,007

Part VI B Relationship of Activities to the Accomplishment of Exempt Purposes

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a Transfers from the reporting foundation to a noncharitable exempt organization of
 - (1) Cash
 - (2) Other assets
- b Other transactions
 - (1) Sales of assets to a noncharitable exempt organization
 - (2) Purchases of assets from a noncharitable exempt organization
 - (3) Rental of facilities, equipment, or other assets
 - (4) Reimbursement arrangements
 - (5) Loans or loan guarantees
 - (6) Performance of services or membership or fundraising solicitations
- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
1a(1)	X	
1a(2)	X	
1b(1)	X	
1b(2)	X	
1b(3)	X	
1b(4)	X	
1b(5)	X	
1b(6)	X	
1c		X

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? _____.

Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Sign
Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return
with the preparer shown below?
See instructions Yes No

Signature of officer or trustee		Date	Title		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	Peter R Rothfuss, CPA		Peter R Rothfuss, CPA	8/19/20	PTIN
	Firm's name ► Peter R Rothfuss CPA PC		Firm's EIN ► 20-1939809		Phone no
Firm's address ► 7 Inglewood Drive, Greenville, SC 29609				864-483-7660	

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

COMMUNITY FOUNDATION

Street

630 E Washington St

City

Greenville

State

SC

Zip Code

29601

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

3,000

Name

SEARCH MINISTRIES

Street

P O Box 165029

City

Fort Worth

State

TX

Zip Code

76161

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

3,000

Name

ELDERSOURCE SENIOR MINISTRIES

Street

P O Box 4848

City

Greenville

State

SC

Zip Code

29608

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

5,000

Name

ONE LIFE INSTITUTE

Street

625 2nd St

City

Lancaster

State

PA

Zip Code

17603

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

3,000

Name

HABITAT FOR HUMANITY

Street

3033 Wade Hampton Blvd

City

Taylors

State

SC

Zip Code

29687

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

3,000

Name

CHRIST CENTRAL MINISTRIES

Street

2801 Augusta Rd

City

West Columbia

State

SC

Zip Code

29170

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

12,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**Recipient(s) paid during the year****Name**

CAMPING MINISTRIES of CAROLINAS

Street

457 Camp Fellowship Rd

City Waterloo	State SC	Zip Code 29384	Foreign Country
------------------	-------------	-------------------	-----------------

Relationship	Foundation Status PC		
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Purpose of grant/contribution FUND OPER	Amount 500
--	---------------

Name

KAPPA SIGMA ENDOWMENT FUND

Street

1610 Scottsville Rd

City Charlottesville	State VA	Zip Code 22902	Foreign Country
-------------------------	-------------	-------------------	-----------------

Relationship	Foundation Status PC		
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Purpose of grant/contribution FUND OPER	Amount 11,000
--	------------------

Name

CHRISTIAN LEARNING CENTER

Street

410 Pelham Rd

City Greenville	State SC	Zip Code 29615	Foreign Country
--------------------	-------------	-------------------	-----------------

Relationship	Foundation Status PC		
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Purpose of grant/contribution FUND OPER	Amount 3,000
--	-----------------

Name

BOY SCOUTS BLUE RIDGE COUNCIL

Street

1 Park Plaza

City Greenville	State SC	Zip Code 29607	Foreign Country
--------------------	-------------	-------------------	-----------------

Relationship	Foundation Status PC		
--------------	-------------------------	--	--

Purpose of grant/contribution FUND OPER	Amount 500
--	---------------

Name

SC SCHOOL DEAF AND BLIND

Street

355 Cedar Springs Rd

City Spartanburg	State SC	Zip Code 29302	Foreign Country
---------------------	-------------	-------------------	-----------------

Relationship	Foundation Status PC		
--------------	-------------------------	--	--

Purpose of grant/contribution FUND OPER	Amount 3,000
--	-----------------

Name

ST JUDE HOSPITAL

Street

262 Danny Thomas Place

City Memphis	State TN	Zip Code 38105	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status PC		
--------------	-------------------------	--	--

Purpose of grant/contribution FUND OPER	Amount 500
--	---------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

SCHOOL MINISTRIES

Street

101 Rice Bent Way

City

Columbia

State

SC

Zip Code

29229

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

2,000

Name

TRIUNE MERCY CENTER

Street

222 Rutherford Rd

City

Greenville

State

SC

Zip Code

29609

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

2,000

Name

CENTER DEVELOPMENTAL STUDIES

Street

29 N Academy St

City

Greenville

State

SC

Zip Code

29601

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

1,000

Name

INTERVARSITY CHRISTIAN FELLOWSHIP

Street

6500 Papermill Dr NW

City

Knoxville

State

TN

Zip Code

37919

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

1,000

Name

THORNWELL CHILDRENS HOME

Street

302 S Broad St

City

Clinton

State

SC

Zip Code

29325

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

2,000

Name

KB CHARITABLE TRUST

Street

28 Seth St

City

Greenville

State

SC

Zip Code

29605

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

4,500

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

A CHILDS HAVEN

Street

1124 Rutherford Rd

City

Greenville

State

SC

Zip Code

29609

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

1,000

Name

PEACE CENTER

Street

300 S Main St

City

Greenville

State

SC

Zip Code

29601

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

2,500

Name

CIRCLE 555

Street

198 White Star Point

City

Spartanburg

State

SC

Zip Code

29301

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

555

Name

NAMI

Street

1735 St Julian Pl, Ste 300

City

Columbia

State

SC

Zip Code

29204

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

1,000

Name

MITOCHONDRIAL DISEASE FOUNDATION

Street

8085 Saltsburg Rd, Ste 201

City

Pittsburgh

State

PA

Zip Code

15239

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

500

Name

WATER OF LIFE

Street

1607 Laurens Rd

City

Greenville

State

SC

Zip Code

29607

Foreign Country**Relationship****Foundation Status**

PC

Purpose of grant/contribution

FUND OPER

Amount

5,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

UNITED MINISTRIES

Street

503 Vardry St

City

Greenville

State

SC

Zip Code

29601

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

1,000

Name

GAIN USA

Street

2001 W Plano Pkwy, Ste 2200

City

Plano

State

TX

Zip Code

75075

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

3,000

Name

GATEWAY HOUSE

Street

415 Rutherford St

City

Greenville

State

SC

Zip Code

29609

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

FUND OPER

Amount

1,000

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2019

- Attach to Form 990, Form 990-EZ, or Form 990-PF.
- Go to www.irs.gov/Form990 for the latest information.

Name of the organization

DOBSON TAPE MINISTRY, INC

Employer identification number

57-0852580

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ► \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization DOBSON TAPE MINISTRY, INC	Employer identification number 57-0852580
---	--

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT A DOBSON III 1207 PELHAM RD GREENVILLE SC 29615 Foreign State or Province _____ Foreign Country _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Part I, Line 11 (990-PF) - Other Income

		83,441	6,000	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	UNREALIZED APPRECIATION OF INVESTMENTS	77,441	0	
2	BAD DEBT RECOVERY	6,000	6,000	

Part I, Line 16c (990-PF) - Other Professional Fees

		8,678	8,678	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	BROKER FEES	8,678	8,678		0

Part I, Line 23 (990-PF) - Other Expenses

		18,414	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	BANK CHARGES	197	0		
2	INSURANCE	17,428	0		
3	OFFICE	789	0		
4		0	0		
5		0	0		

Part II, Line 10b (990-PF) - Investments - Corporate Stock

		449,734	526,379	449,734	526,379
Description		Num Shares/ Face Value	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year
1	VARIOUS		449,734	526,379	449,734
					526,379

Part II, Line 10c (990-PF) - Investments - Corporate Bonds

Description	Interest Rate	Maturity Date	1,000,000		1,000,000		1,000,000	
			Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year		
1 INTEGRITY	11.00%		1,000,000	1,000,000	1,000,000	1,000,000		

Part II, Line 13 (990-PF) - Investments - Other

	Asset Description	Basis of Valuation	Book Value Beg. of Year	Book Value End of Year	FMV	End of Year
1	ANNUITY	FMV	254,411	254,411	254,411	254,411

Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

	Cost or Other Basis	Accumulated Depreciation Beg. of Year	Accumulated Depreciation End of Year	Book Value Beg. of Year	Book Value End of Year	FMV End of Year
1 FURN & FIXTURES	25,700			25,700	25,700	25,700

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
ELIZABETH C DOBSON		1207 PELHAM ROAD	GREENVILLE	SC	29615		CHAIRWOMAN	5.00	0	0	0