

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

2022

Open to Public Inspection

A For the **2022** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SPARTANBURG COUNTY FOUNDATION		D Employer identification number 57-0351398
	Doing business as		E Telephone number (864) 582-0138
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	424 E KENNEDY STREET		G Gross receipts \$ 21,556,964.
	City or town, state or province, country, and ZIP or foreign postal code SPARTANBURG, SC 29302		
F Name and address of principal officer: TROY M HANNA SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.SPCF.ORG

K Form of organization: Corporation Trust Association Other

L Year of formation: 1943 **M** State of legal domicile: SC

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE SPARTANBURG COUNTY FOUNDATION IS COMMITTED TO IMPROVING THE LIVES OF SPARTANBURG COUNTY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	25
	6 Total number of volunteers (estimate if necessary)	6	95
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	24,647,756.	17,480,937.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,711,374.	1,739,905.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,191,432.	2,256,730.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,550,562.	21,477,572.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14,658,345.	17,797,591.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,276,277.	1,443,154.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	300,397.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,275,282.	2,520,859.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,209,904.	21,761,604.	
19 Revenue less expenses. Subtract line 18 from line 12	11,340,658.	-284,032.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 213,613,348.	End of Year 187,108,813.
	21 Total liabilities (Part X, line 26)	17,002,751.	7,536,946.
	22 Net assets or fund balances. Subtract line 21 from line 20	196,610,597.	179,571,867.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	TROY M HANNA, PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name AMY BIBBY	Preparer's signature AMY BIBBY	Date 11/14/23	Check if self-employed <input type="checkbox"/>	PTIN P00445891
	Firm's name FORVIS, LLP	Firm's EIN 44-0160260	Firm's address 500 RIDGEFIELD COURT ASHEVILLE, NC 28806	Phone no. (828) 254-2254	

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE SPARTANBURG COUNTY FOUNDATION IS COMMITTED TO IMPROVING THE LIVES OF SPARTANBURG COUNTY RESIDENTS BY PROMOTING PHILANTHROPY, ENCOURAGING COMMUNITY ENGAGEMENT, AND RESPONDING TO COMMUNITY NEEDS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 18,508,326. including grants of \$ 17,797,591.) (Revenue \$ 2,232,028.) THE SPARTANBURG COUNTY FOUNDATION PARTNERS WITH INDIVIDUALS, FAMILIES, BUSINESSES, AND CORPORATIONS, NONPROFITS, AND PROFESSIONAL ADVISORS TO FOSTER CHANGE, SHARE KNOWLEDGE, CONVENE AROUND IMPORTANT ISSUES, AND MAXIMIZE IMPACT IN THE COMMUNITY. WE WORK DIRECTLY WITH DONORS TO FULFILL CHARITABLE GOALS BY PROVIDING A VARIETY OF CUSTOMIZED GIVING OPTIONS, HANDLING FUND ADMINISTRATION, AND OFFERING EXPERTISE ON CURRENT AND LOCAL NEEDS.

IN 2022, THE FOUNDATION AWARDED 2,026 GRANTS TOTALING \$16 MILLION TO IMPROVE THE LIVES OF SPARTANBURG COUNTY RESIDENTS. WE ENGAGED OVER 2,200 COMMUNITY MEMBERS THROUGH MEETINGS AND VISITS TO THE ROBERT HETT CHAPMAN III CENTER FOR PHILANTHROPY AND THROUGH THE FOLLOWING

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

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

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 18,508,326.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
 TROY M HANNA - (864) 582-0138
 424 E KENNEDY STREET, SPARTANBURG, SC 29302

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TROY M. HANNA PRESIDENT & CEO/ ASST. SEC	40.00			X			205,788.	0.	24,695.	
(2) MARY L. THOMAS CHIEF OPERATING OFFICER	40.00			X			183,350.	0.	22,002.	
(3) RANDY F. JONES CHIEF FINANCIAL OFFICER	40.00			X			107,618.	0.	12,914.	
(4) BERT D. BARRE VICE CHAIR	2.00	X		X			0.	0.	0.	
(5) VIC BAILEY, III TRUSTEE	2.00	X					0.	0.	0.	
(6) CATHY H. MCCABE TRUSTEE	2.00	X					0.	0.	0.	
(7) ERIKA MCJIMPSEY TRUSTEE	2.00	X					0.	0.	0.	
(8) ROBERT RICHARDSON TRUSTEE	2.00	X					0.	0.	0.	
(9) SCOTT MONTGOMERY TRUSTEE	2.00	X					0.	0.	0.	
(10) LEONARD STARKS TRUSTEE	2.00	X					0.	0.	0.	

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	17,480,937.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 2,014,903.			
	h	Total. Add lines 1a-1f		17,480,937.			
Program Service Revenue	2 a	_____	Business Code				
	b	_____					
	c	_____					
	d	_____					
	e	_____					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,819,297.		1,819,297.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	6a	(i) Real			
				(ii) Personal			
	b	Less: rental expenses ...	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities			
				(ii) Other			
	b	Less: cost or other basis and sales expenses	7b		79,392.		
	c	Gain or (loss)	7c		-79,392.		
	d	Net gain or (loss)		-79,392.		-79,392.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	FEES	900099	2,058,857.	2,058,857.		
	b	TRUST INCOME	900099	173,171.	173,171.		
	c	OTHER INCOME	900099	24,702.		24,702.	
	d	All other revenue					
	e	Total. Add lines 11a-11d		2,256,730.			
12	Total revenue. See instructions		21,477,572.	2,232,028.	0.	1,764,607.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	17,181,549.	17,181,549.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	616,042.	616,042.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	496,756.	186,779.	279,774.	30,203.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	657,670.	71,015.	561,598.	25,057.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	88,981.	19,870.	64,852.	4,259.
9 Other employee benefits	140,214.	31,311.	102,191.	6,712.
10 Payroll taxes	59,533.	13,294.	43,389.	2,850.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	69,409.	34,140.	33,095.	2,174.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,433,779.	42,278.	1,226,113.	165,388.
12 Advertising and promotion				
13 Office expenses	120,286.	28,722.	65,535.	26,029.
14 Information technology				
15 Royalties				
16 Occupancy	168,524.	37,633.	122,824.	8,067.
17 Travel	10,339.	2,146.	7,688.	505.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	24,437.	9,694.	13,848.	895.
20 Interest	79,046.	17,652.	57,610.	3,784.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	316,525.	70,683.	230,691.	15,151.
23 Insurance	53,802.	12,015.	39,212.	2,575.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT	97,339.	21,737.	70,943.	4,659.
b DUES TO OTHER ORGANIZAT	46,350.	16,557.	27,908.	1,885.
c PROGRAM EXPENSE	22,533.	22,325.	195.	13.
d SMALL & MINORITY BUSINE	18,201.	18,201.		
e All other expenses	60,289.	54,683.	5,415.	191.
25 Total functional expenses. Add lines 1 through 24e	21,761,604.	18,508,326.	2,952,881.	300,397.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	6,308,352.	1	3,817,509.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,420,920.	3	1,727,186.
	4 Accounts receivable, net	4,162.	4	5,915.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 11,506,700.		
	b Less: accumulated depreciation	10b 1,845,089.	9,904,471.	10c 9,661,611.
	11 Investments - publicly traded securities	176,754,967.	11	155,590,773.
	12 Investments - other securities. See Part IV, line 11	15,528,842.	12	14,054,997.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,691,634.	15	2,250,822.
16 Total assets. Add lines 1 through 15 (must equal line 33)	213,613,348.	16	187,108,813.	
Liabilities	17 Accounts payable and accrued expenses	9,484.	17	35,804.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	13,263,504.	21	4,627,546.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,729,763.	25	2,873,596.
	26 Total liabilities. Add lines 17 through 25	17,002,751.	26	7,536,946.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	15,879,644.	27	14,774,385.
	28 Net assets with donor restrictions	180,730,953.	28	164,797,482.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	196,610,597.	32	179,571,867.
	33 Total liabilities and net assets/fund balances	213,613,348.	33	187,108,813.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,477,572.
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,761,604.
3	Revenue less expenses. Subtract line 2 from line 1	3	-284,032.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	196,610,597.
5	Net unrealized gains (losses) on investments	5	-17,197,419.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	442,721.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	179,571,867.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2022)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16,465,171.	29,383,814.	21,822,431.	24,647,756.	17,480,937.	109,800,109.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	16,465,171.	29,383,814.	21,822,431.	24,647,756.	17,480,937.	109,800,109.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						5,164,096.
6 Public support. Subtract line 5 from line 4.						104,636,013.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	16,465,171.	29,383,814.	21,822,431.	24,647,756.	17,480,937.	109,800,109.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,015,339.	2,854,755.	2,713,198.	2,845,640.	1,819,297.	12,248,229.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		1,737,285.	1,908,410.	2,191,432.	2,256,730.	8,093,857.
11 Total support. Add lines 7 through 10						130,142,195.

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	80.40 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	77.77 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Horizontal lines for supplemental information input.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

SPARTANBURG COUNTY FOUNDATION

Employer identification number

57-0351398

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), 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).

Name of organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
---	--

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	<hr/> <hr/> <hr/>	\$ 2,400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 768,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 755,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 2,405,141.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 550,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
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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
7	<hr/> <hr/> <hr/>	\$ 501,660.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
---	--

Part II Noncash Property (see instructions). Use duplicate copies of Part 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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
---	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization SPARTANBURG COUNTY FOUNDATION Employer identification number 57-0351398

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for tracking easements at the end of the tax year, and yes/no questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with questions (1a, 1b, 2) regarding the reporting of art and historical treasures, including revenue and asset amounts.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,028,199.		2,028,199.
b Buildings		8,423,750.	1,639,771.	6,783,979.
c Leasehold improvements				
d Equipment				
e Other		1,054,751.	205,318.	849,433.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				9,661,611.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) OTHER INVESTMENTS	14,054,997.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	14,054,997.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	282,185.
(3) LEASE LIABILITY	23,360.
(4) LINE OF CREDIT	2,568,051.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	2,873,596.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE FOUNDATION HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS A CHARITABLE ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND IS EXEMPT FROM FEDERAL INCOME TAXES PURSUANT TO SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE ACCOMPANYING COMBINED FINANCIAL STATEMENTS. THE FOUNDATION HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF DECEMBER 31, 2022.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASSIFICATION SPECIAL FUNDS EXCLUDED FROM TAX RETURN CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASSIFICATION SPECIAL FUNDS EXCLUDED FROM TAX RETURN

Multiple horizontal lines for supplemental information entry.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **SPARTANBURG COUNTY FOUNDATION** Employer identification number **57-0351398**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
A LIGHT UNTO MY PATH P. O. BOX 6945 SPARTANBURG, SC 29304	83-4134757	501(C)(3)	17,000.	0.			GENERAL SUPPORT
A SPOT OF PRIDE BEAUTIFICATION FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	5,040.	0.			GENERAL SUPPORT
ADULT LEARNING CENTER, INC. 145 NORTH CHURCH STREET, #82 SPARTANBURG, SC 29306	57-1006834	501(C)(3)	15,341.	0.			GENERAL SUPPORT
AMERICAN RED CROSS UPSTATE SC CHAPTER - 940 GROVE ROAD - GREENVILLE, SC 29605	53-0196605	501(C)(3)	8,769.	0.			GENERAL SUPPORT
ANDERSON UNIVERSITY ANDERSON CENTRAL ANDERSON, SC 29621	57-0324906	501(C)(3)	16,750.	0.			GENERAL SUPPORT
ANGELS CHARGE MINISTRY 95 ASHLEY ST. SPARTANBURG, SC 29307	82-1763094	501(C)(3)	14,000.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 244.

3 Enter total number of other organizations listed in the line 1 table 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANNUAL MEETING FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	5,500.	0.			GENERAL SUPPORT
APPALACHIAN STATE UNIVERSITY ASU PO BOX 32005, 287 RIVERS STREET BOONE, NC 28608	23-7099379	501(C)(3)	8,750.	0.			GENERAL SUPPORT
BALLET SPARTANBURG, INC. 200 E. ST. JOHN STREET SPARTANBURG, SC 29306	57-0658124	501(C)(3)	20,850.	0.			GENERAL SUPPORT
BATTLEBETTY FOUNDATION PO BOX 277 FAIRFOREST, SC 29353	83-2015836	501(C)(3)	9,100.	0.			GENERAL SUPPORT
BENJAMIN E. MAYS CONSOLIDATED SCHOOL ALUMNI FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	85,000.	0.			GENERAL SUPPORT
BIG BROTHERS BIG SISTERS UPSTATE 161 EAST KENNEDY STREET SPARTANBURG, SC 29306	20-4243553	501(C)(3)	18,692.	0.			GENERAL SUPPORT
BIRTHMATTERS 501 HOWARD ST. SUITE A SPARTANBURG, SC 29303	45-4900759	501(C)(3)	7,500.	0.			GENERAL SUPPORT
BROTHERS RESTORING URBAN HOPE, INC. - 337 LAURELWOOD DRIVE - BOILING SPRINGS, SC 29316	20-4793140	501(C)(3)	33,050.	0.			GENERAL SUPPORT
BUFORD STREET UNITED METHODIST CHURCH - 120 EAST BUFORD STREET - GAFFNEY, SC 29340	57-0422126	501(C)(3)	5,837.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CANCER ASSOCIATION OF SPARTANBURG & CHEROKEE COUNTIES, INC. - PO BOX 1582 - SPARTANBURG, SC 29304	57-0526068	501(C)(3)	8,000.	0.			GENERAL SUPPORT
CAROLINA PREGNANCY CENTER 103 METRO DRIVE SPARTANBURG, SC 29303	57-0791115	501(C)(3)	50,000.	0.			GENERAL SUPPORT
CENTER FOR PHILANTHROPY CAPITAL CAMPAIGN FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	260,500.	0.			GENERAL SUPPORT
CENTRAL UNITED METHODIST CHURCH 233 N. CHURCH STREET SPARTANBURG, SC 29306	57-0314370	CHURCH	65,500.	0.			GENERAL SUPPORT
CHAPMAN CULTURAL CENTER 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-0986224	501(C)(3)	252,991.	0.			GENERAL SUPPORT
CHARLESTON SOUTHERN UNIVERSITY PO BOX 118087 CHARLESTON, SC 29406	57-0474291	501(C)(3)	8,500.	0.			GENERAL SUPPORT
CHILDREN'S ADVOCACY CENTER OF SPARTANBURG, CHEROKEE AND UNION COUNTIES, INC. - 100 WASHINGTON PLACE - SPARTANBURG, SC 29302	57-0987436	501(C)(3)	46,161.	0.			GENERAL SUPPORT
CHILDREN'S CANCER PARTNERS OF THE CAROLINAS - 900 S. PINE STREET, SUITE F - SPARTANBURG, SC 29302	20-2511033	501(C)(3)	43,250.	0.			GENERAL SUPPORT
CITIZEN SCHOLAR ANNUAL OPERATION FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	18,559.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITIZEN SCHOLARS GENERAL FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	110,289.	0.			GENERAL SUPPORT
CITY OF LANDRUM 100 N. SHAMROCK AVENUE LANDRUM, SC 29356	57-6001419	GOVERNMENT	6,800.	0.			GENERAL SUPPORT
CITY OF SPARTANBURG PO BOX 1749 SPARTANBURG, SC 29304	57-6000245	GOVERNMENT	22,250.	0.			GENERAL SUPPORT
CLAFLIN UNIVERSITY 400 MAGNOLIA AVENUE ORANGEBURG, SC 29115	57-0314374	501(C)(3)	11,750.	0.			GENERAL SUPPORT
CLEMSON UNIVERSITY PO BOX 1889 CLEMSON, SC 29633	57-6000254	501(C)(3)	66,644.	0.			GENERAL SUPPORT
CLEVELAND OPPORTUNITY FOUNDATION 501 HOWARD STREET SUITE E SPARTANBURG, SC 29303	85-1701615	501(C)(3)	6,250.	0.			GENERAL SUPPORT
COLLEGE OF CHARLESTON 170 CALHOUN STREET CHARLESTON, SC 29401	23-7069236	501(C)(3)	13,063.	0.			GENERAL SUPPORT
CONVERSE UNIVERSITY 580 EAST MAIN STREET SPARTANBURG, SC 29302	57-0314380	501(C)(3)	195,765.	0.			GENERAL SUPPORT
CROSS ANCHOR YARBOROUGH CHAPEL UNITED METHODIST CHURCH - PO BOX 4 - CROSS ANCHOR, SC 29331	57-0711102	CHURCH	6,043.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAVIDSON COLLEGE BOX 7162 DAVIDSON, NC 28035-7162	56-0529961	501(C)(3)	6,000.	0.			GENERAL SUPPORT
DENTAL FOUNDATION OF NORTH CAROLINA - 1090 FIRST DENTAL BUILDING, CAMPUS BOX 7450 - CHAPEL HILL, NC 27599-7450	56-6304130	501(C)(3)	10,000.	0.			GENERAL SUPPORT
DUCKS UNLIMITED, INC. ONE WATERFOWL WAY MEMPHIS, TN 38120	13-5643799	501(C)(3)	40,000.	0.			GENERAL SUPPORT
DUKE UNIVERSITY ALUMNI & DEVELOPMENT RECORDS DURHAM, NC 27708-0581	56-0532129	501(C)(3)	33,663.	0.			GENERAL SUPPORT
EMERGE FAMILY THERAPY CENTER AND TEACHING CLINIC - 138 DILLON DRIVE - SPARTANBURG, SC 29307	57-0979351	501(C)(3)	5,750.	0.			GENERAL SUPPORT
EMORY & HENRY COLLEGE PO BOX 947 EMORY, VA 24327-0950	54-0505892	501(C)(3)	14,250.	0.			GENERAL SUPPORT
EMORY UNIVERSITY 300 BOISFEUILLET JONES CENTER ATLANTA, GA 30322-1960	58-0566256	501(C)(3)	11,500.	0.			GENERAL SUPPORT
EVANS TRAINING CENTER 306 JORDAN CREEK ROAD INMAN, SC 29349	27-1144293	501(C)(3)	9,333.	0.			GENERAL SUPPORT
FIRST BAPTIST CHURCH OF SPARTANBURG - 250 E MAIN STREET - SPARTANBURG, SC 29306	57-0339440	CHURCH	1,319,620.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST PRESBYTERIAN CHURCH 393 E MAIN STREET SPARTANBURG, SC 29302	57-0314439	CHURCH	189,220.	0.			GENERAL SUPPORT
FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC 29613	57-0314395	501(C)(3)	39,025.	0.			GENERAL SUPPORT
GARDNER WEBB UNIVERSITY PO BOX 955 BOILING SPRINGS, NC 28017	56-0529972	501(C)(3)	6,500.	0.			GENERAL SUPPORT
GENDER BENDERS 201 IVY ACRES DRIVE PIEDMONT, SC 29673	46-3989884	501(C)(3)	14,000.	0.			GENERAL SUPPORT
GIRL SCOUTS OF MIDDLE TENNESSEE 4522 GRANNY WHITE PIKE NASHVILLE, TN 37204	62-0589380	501(C)(3)	9,000.	0.			GENERAL SUPPORT
GRACE COMMUNITY CHURCH OF SC 2801 PELHAM ROAD GREENVILLE, SC 29615	57-1023259	CHURCH	9,000.	0.			GENERAL SUPPORT
GRACE UNITED METHODIST CHURCH 201 SOUTH CHURCH STREET UNION, SC 29379	57-0846086	CHURCH	100,000.	0.			GENERAL SUPPORT
H.A.L.T.E.R. PO BOX 1403 SPARTANBURG, SC 29304	57-0864733	501(C)(3)	86,445.	0.			GENERAL SUPPORT
HATCHER GARDEN AND WOODLAND PRESERVE, INC. - PO BOX 2337 - SPARTANBURG, SC 29304	57-1069038	501(C)(3)	116,248.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTHY SMILES OF SPARTANBURG, INC. - PO BOX 1441 - SPARTANBURG, SC 29304	03-0529473	501(C)(3)	21,900.	0.			GENERAL SUPPORT
HEALTHY SMILES OF SPARTANBURG, INC. GENERAL FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	8,952.	0.			GENERAL SUPPORT
HELLO FAMILY FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	16,755.	0.			GENERAL SUPPORT
HOPE CENTER FOR CHILDREN PO BOX 1731 SPARTANBURG, SC 29304-1731	57-0601487	501(C)(3)	235,260.	0.			GENERAL SUPPORT
HOPE POINT CHURCH P.O. BOX 170151 SPARTANBURG, SC 29301	42-1575386	CHURCH	100,000.	0.			GENERAL SUPPORT
HOPE REMAINS YOUTH RANCH 1771 JOHN DODD ROAD WELLFORD, SC 29385	26-0554902	501(C)(3)	12,500.	0.			GENERAL SUPPORT
HUB CITY ANIMAL PROJECT 168 W. MAIN STREET SPARTANBURG, SC 29306	82-3535935	501(C)(3)	31,000.	0.			GENERAL SUPPORT
HUB CITY FARMER'S MARKET 248 NORTH CHURCH STREET SPARTANBURG, SC 29306	56-2370088	501(C)(3)	19,725.	0.			GENERAL SUPPORT
HUB CITY WRITERS PROJECT, INC. 186 WEST MAIN STREET SPARTANBURG, SC 29306	57-1059259	501(C)(3)	8,050.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
J M SMITH FOUNDATION 101 WEST ST. JOHN STREET, SUITE 305 SPARTANBURG, SC 29306	57-1046595	501(C)(3)	7,000.	0.			GENERAL SUPPORT
JUST BECAUSE FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	112,000.	0.			GENERAL SUPPORT
KEEP THE CHANGE, INC. PO BOX 650723 STERLING, VA 20165	45-2641038	501(C)(3)	6,000.	0.			GENERAL SUPPORT
LANDER UNIVERSITY 320 STANLEY AVENUE GREENWOOD, SC 29649	13-1921358	501(C)(3)	8,189.	0.			GENERAL SUPPORT
LGBT FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	10,500.	0.			GENERAL SUPPORT
LIMESTONE UNIVERSITY 1115 COLLEGE DRIVE GAFFNEY, SC 29340	57-0314402	501(C)(3)	9,023.	0.			GENERAL SUPPORT
MEETING STREET ACADEMY 201 EAST BROAD STREET, SUITE 110 SPARTANBURG, SC 29306	20-4587841	501(C)(3)	25,850.	0.			GENERAL SUPPORT
MENTAL FITNESS, INC. PO BOX 402 SPARTANBURG, SC 29304	20-8489636	501(C)(3)	10,600.	0.			GENERAL SUPPORT
MIRACLE HILL MINISTRIES 490 S PLEASANTBURG DR GREENVILLE, SC 29607-2526	57-0425826	501(C)(3)	28,500.	0.			GENERAL SUPPORT

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MOBILE MEALS SERVICE OF SPARTANBURG COUNTY, INC. - PO BOX 461 - SPARTANBURG, SC 29304	57-0653452	501(C)(3)	122,545.	0.			GENERAL SUPPORT
MOUNT MORIAH BAPTIST CHURCH PO BOX 6241 SPARTANBURG, SC 29304	57-1093299	CHURCH	5,100.	0.			GENERAL SUPPORT
MUSC FOUNDATION 18 BEE STREET MSC 450 CHARLESTON, SC 29425	57-1031624	501(C)(3)	27,000.	0.			GENERAL SUPPORT
NAZARETH PRESBYTERIAN CHURCH 680 NAZARETH CHURCH RD. MOORE, SC 29369	57-6024361	CHURCH	40,385.	0.			GENERAL SUPPORT
NC A&T STATE UNIVERSITY 1601 E MARKET STREET GREENSBORO, NC 27411	56-2249960	501(C)(3)	6,400.	0.			GENERAL SUPPORT
NORTH GREENVILLE UNIVERSITY PO BOX 1892 TIGERVILLE, SC 29688	57-0314406	501(C)(3)	13,350.	0.			GENERAL SUPPORT
NORTHSIDE DEVELOPMENT GROUP PO BOX 3362 SPARTANBURG, SC 29304	30-0698663	501(C)(3)	335,000.	0.			GENERAL SUPPORT
OAKBROOK PREPARATORY SCHOOL 190 LINCOLN SCHOOL ROAD SPARTANBURG, SC 29301	57-0921126	501(C)(3)	15,000.	0.			GENERAL SUPPORT
OMEGAS OF SPARTANBURG, INC. PO BOX 1642 SPARTANBURG, SC 29304	38-4128657	CHURCH	6,000.	0.			GENERAL SUPPORT

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PARTNERS FOR ACTIVE LIVING PO BOX 6728 SPARTANBURG, SC 29304	54-2111221	501(C)(3)	179,730.	0.			GENERAL SUPPORT
PIEDMONT CARE, INC. 101 NORTH PINE STREET, SUITE 200 SPARTANBURG, SC 29302	57-1036204	501(C)(3)	18,000.	0.			GENERAL SUPPORT
PIEDMONT SERTOMA CLUB PO BOX 5041 SPARTANBURG, SC 29304	23-7143056	501(C)(3)	10,000.	0.			GENERAL SUPPORT
PK OUTREACH INC. 140 HILLS BRIDGE ROAD INMAN, SC 29349	57-1026176	501(C)(3)	21,009.	0.			GENERAL SUPPORT
PRAXIS LEADERSHIP, INC. 404 GRANGER DRIVE LAGRANGE, GA 30240	85-0523712	501(C)(3)	43,390.	0.			GENERAL SUPPORT
PRESBYTERIAN COLLEGE PO BOX 975 CLINTON, SC 29325	57-0314408	501(C)(3)	17,309.	0.			GENERAL SUPPORT
PRIDE LINK 30 POINTE CIRCLE GREENVILLE, SC 29615	83-1095678	501(C)(3)	14,000.	0.			GENERAL SUPPORT
REIDVILLE PRESBYTERIAN CHURCH 340 COLLEGE STREET REIDVILLE, SC 29375	23-7366967	CHURCH	6,451.	0.			GENERAL SUPPORT
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	10,000.	0.			GENERAL SUPPORT

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SERVANTS FOR SIGHT PO BOX 2122 GREENVILLE, SC 29602	27-0837500	CHURCH	13,164.	0.			GENERAL SUPPORT
SOUTH CAROLINA SCHOOL FOR THE DEAF AND BLIND FOUNDATION, INC. - 355 CEDAR SPRINGS ROAD - SPARTANBURG, SC 29302	57-0693592	501(C)(3)	171,740.	0.			GENERAL SUPPORT
SOUTH CAROLINA STATE UNIVERSITY 300 COLLEGE STREET, PO BOX 7386 ORANGEBURG, SC 29117	23-7113930	501(C)(3)	10,300.	0.			GENERAL SUPPORT
SOUTHSIDE CHRISTIAN SCHOOL 2211 WOODRUFF ROAD SIMPSONVILLE, SC 29681	74-3095222	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SPARTANBURG ACADEMIC MOVEMENT 349 EAST MAIN STREET, SUITE 101 SPARTANBURG, SC 29302	45-2104341	501(C)(3)	625,381.	0.			GENERAL SUPPORT
SPARTANBURG AREA CONSERVANCY 100 E MAIN STREET, SUITE 7B SPARTANBURG, SC 29306	57-0885225	501(C)(3)	70,869.	0.			GENERAL SUPPORT
SPARTANBURG ART MUSEUM 200 EAST SAINT JOHN STREET SPARTANBURG, SC 29306	23-7041876	501(C)(3)	74,741.	0.			GENERAL SUPPORT
SPARTANBURG COMMUNITY COLLEGE HEALTHY SMILES OF SPARTANBURG SPARTANBURG, SC 29304	57-0751500	501(C)(3)	59,437.	0.			GENERAL SUPPORT
SPARTANBURG COMMUNITY COLLEGE FOUNDATION - 107 COMMUNITY COLLEGE DR. - SPARTANBURG, SC 29303	57-0751500	501(C)(3)	320,675.	0.			GENERAL SUPPORT

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SPARTANBURG COMMUNITY INDICATORS PROJECT FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	325,000.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY BAPTIST ASSOCIATION - PO BOX 3433 - SPARTANBURG, SC 29304	27-0816289	501(C)(3)	75,650.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY FIRST STEPS 900 SOUTH PINE STREET SPARTANBURG, SC 29302	57-1097869	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY HISTORICAL ASSOCIATION, INC. - PO BOX 887 - SPARTANBURG, SC 29304	57-6025123	501(C)(3)	69,949.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY PUBLIC LIBRARIES - 151 S. CHURCH STREET - SPARTANBURG, SC 29306	57-6000940	GOVERNMENT	53,250.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT RP DAWKINS MIDDLE FACULTY FUND MOORE, SC 29369	57-0741993	GOVERNMENT	77,610.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT SEVEN - MCCracken JR. HIGH SCHOOL BETA CLUB - SPARTANBURG, SC 29307	57-6000942	GOVERNMENT	7,500.	0.			GENERAL SUPPORT
SPARTANBURG DAY SCHOOL 1701 SKYLYN DRIVE SPARTANBURG, SC 29307	57-0371816	501(C)(3)	553,022.	0.			GENERAL SUPPORT
SPARTANBURG METHODIST COLLEGE 1000 POWELL MILL ROAD SPARTANBURG, SC 29301	57-0314415	501(C)(3)	68,875.	0.			GENERAL SUPPORT

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SPARTANBURG PHILHARMONIC 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-0485556	501(C)(3)	80,144.	0.			GENERAL SUPPORT
SPARTANBURG REGIONAL HEALTHCARE SYSTEM FOUNDATION - 101 E. WOOD STREET - SPARTANBURG, SC 29303	57-0937166	501(C)(3)	172,363.	0.			GENERAL SUPPORT
SPARTANBURG SCIENCE CENTER 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-0661215	501(C)(3)	11,100.	0.			GENERAL SUPPORT
SPEAKING DOWN BARRIERS PO BOX 7133 SPARTANBURG, SC 29304	47-4421330	501(C)(3)	27,742.	0.			GENERAL SUPPORT
ST. LUKE'S FREE MEDICAL CLINIC, INC. - PO BOX 3466 - SPARTANBURG, SC 29304	57-0943232	501(C)(3)	148,154.	0.			GENERAL SUPPORT
ST. PAUL THE APOSTLE CATHOLIC SCHOOL - 152 ALABAMA STREET - SPARTANBURG, SC 29302	57-1055848	501(C)(3)	6,000.	0.			GENERAL SUPPORT
ST. PAUL THE APOSTLE CATHOLIC CHURCH - 161 NORTH DEAN STREET - SPARTANBURG, SC 29302	57-0327879	CHURCH	10,700.	0.			GENERAL SUPPORT
STRENGTHENING VOICES--GRASSROOTS LEADERSHIP DEVELOPMENT FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	7,000.	0.			GENERAL SUPPORT
TEMPLE B'NAI ISRAEL 146 HEYWOOD AVENUE SPARTANBURG, SC 29302	57-6022286	501(C)(3)	45,305.	0.			GENERAL SUPPORT

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THE BETHLEHEM CENTER PO BOX 3501 SPARTANBURG, SC 29304	57-0314367	501(C)(3)	94,350.	0.			GENERAL SUPPORT
THE CITADEL FOUNDATION 171 MOULTRIE STREET CHARLESTON, SC 29409	57-6020493	501(C)(3)	8,000.	0.			GENERAL SUPPORT
THE EPISCOPAL CHURCH OF THE ADVENT 141 ADVENT STREET SPARTANBURG, SC 29302	57-0747726	CHURCH	77,525.	0.			GENERAL SUPPORT
THE ETV ENDOWMENT OF SC, INC. 401 E. KENNEDY STREET, SUITE B-1 SPARTANBURG, SC 29302	57-0657549	501(C)(3)	8,624.	0.			GENERAL SUPPORT
THE GLENN SPRINGS PRESERVATION SOCIETY - PO BOX 571 - PAULINE, SC 29374	81-5248161	501(C)(3)	10,000.	0.			GENERAL SUPPORT
THE GROUP OF 100, INC. 824 E. MAIN STREET SPARTANBURG, SC 29302	58-2480621	501(C)(3)	17,000.	0.			GENERAL SUPPORT
THE KENAN-FLAGLER BUSINESS SCHOOL FOUNDATION - CAMPUS BOX 3440 - CHAPEL HILL, NC 27599-3400	56-6001393	501(C)(3)	113,000.	0.			GENERAL SUPPORT
THE LEUKEMIA AND LYMPHOMA SOCIETY LLS-NORTH CAROLINA NEW YORK, NY 10087-2443	13-5644916	501(C)(3)	15,000.	0.			GENERAL SUPPORT
THE NOBLE TREE FOUNDATION.ORG 130 BURNETT DRIVE SPARTANBURG, SC 29302	57-1091856	501(C)(3)	5,200.	0.			GENERAL SUPPORT

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THE PROUD MARY THEATER COMPANY 578 WEST MAIN STREET SPARTANBURG, SC 29301	82-2196578	501(C)(3)	6,000.	0.			GENERAL SUPPORT
THE SHEPHERD'S CENTER OF SPARTANBURG, SC, INC. - 393 E. MAIN STREET - SPARTANBURG, SC 29302	57-0691077	501(C)(3)	36,150.	0.			GENERAL SUPPORT
THE SPARTANBURG COUNTY FOUNDATION TRUSTEE PROVIDED FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	7,000.	0.			GENERAL SUPPORT
THE SPARTANBURG LITTLE THEATRE 200 E. ST. JOHN STREET SPARTANBURG, SC 29306	57-6002713	501(C)(3)	11,000.	0.			GENERAL SUPPORT
THE SPARTANBURG SOUP KITCHEN, INC. 136 SOUTH FOREST STREET SPARTANBURG, SC 29306	27-0530812	501(C)(3)	21,119.	0.			GENERAL SUPPORT
THORNWELL HOME FOR CHILDREN 302 SOUTH BROAD STREET CLINTON, SC 29325	57-0314418	501(C)(3)	5,100.	0.			GENERAL SUPPORT
TOTAL MINISTRIES 976 S. PINE STREET SPARTANBURG, SC 29302	57-0771620	501(C)(3)	35,001.	0.			GENERAL SUPPORT
TRINITY UNITED METHODIST CHURCH 1920 HORSESHOE FALLS ROAD ENOREE, SC 29335	57-1112841	CHURCH	25,554.	0.			GENERAL SUPPORT
UNION PRESBYTERIAN CHURCH 101 WEST SOUTH STREET UNION, SC 29379	37-1879923	CHURCH	28,031.	0.			GENERAL SUPPORT

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UNITARIAN UNIVERSALIST CHURCH OF SPARTANBURG - PO BOX 1942 - SPARTANBURG, SC 29304	57-0947382	CHURCH	6,789.	0.			GENERAL SUPPORT
UNITED MITOCHONDRIAL DISEASE FOUNDATION INC. - 8085 SALTSBURG ROAD, SUITE 201 - PITTSBURGH, PA 15239	25-1767180	501(C)(3)	30,000.	0.			GENERAL SUPPORT
UNITED WAY OF THE PIEDMONT, INC. PO BOX 5624 SPARTANBURG, SC 29304	57-0314377	501(C)(3)	34,880.	0.			GENERAL SUPPORT
UNIVERSITY OF NEW HAMPSHIRE 11 GARRISON AVENUE DURHAM, NH 03824	02-0437506	501(C)(3)	9,000.	0.			GENERAL SUPPORT
UNIVERSITY OF SOUTH CAROLINA CASHIERS OFFICE SPARTANBURG, SC 29303	57-0555699	501(C)(3)	30,525.	0.			GENERAL SUPPORT
UPSTATE FAMILY RESOURCE CENTER 1850 OLD FURNACE ROAD BOILING SPRINGS, SC 29316	06-1806404	501(C)(3)	67,200.	0.			GENERAL SUPPORT
UPSTATE FOREVER 507 PETTIGRU STREET GREENVILLE, SC 29601-3116	57-1070433	501(C)(3)	101,550.	0.			GENERAL SUPPORT
UPSTATE PRIDE PO BOX 9128 GREENVILLE, SC 29604	27-1102951	501(C)(3)	19,000.	0.			GENERAL SUPPORT
UPSTATE WARRIOR SOLUTION PO BOX 27232 GREENVILLE, SC 29616	46-1699670	501(C)(3)	33,634.	0.			GENERAL SUPPORT

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USC UNION PO DRAWER 729 UNION, SC 29379	57-6001153	501(C)(3)	22,850.	0.			GENERAL SUPPORT
USC UPSTATE C/O CARI LANGSTON SPARTANBURG, SC 29303	57-0555699	501(C)(3)	34,700.	0.			GENERAL SUPPORT
USC UPSTATE FOUNDATION USC UPSTATE ACHIEVE PROGRAM SPARTANBURG, SC 29303	57-0555699	501(C)(3)	344,120.	0.			GENERAL SUPPORT
WESTERN CAROLINA UNIVERSITY 1 UNIVERSITY DRIVE, 110 H.F. ROBINSON BUILDING - CULLOWHEE, NC 28723	56-6001440	501(C)(3)	6,000.	0.			GENERAL SUPPORT
WESTMINSTER PRESBYTERIAN CHURCH 309 FERNWOOD DRIVE SPARTANBURG, SC 29307	57-0424982	CHURCH	12,000.	0.			GENERAL SUPPORT
WINTHROP UNIVERSITY 304 TILLMAN HALL, 638 OAKLAND AVENUE ROCK HILL, SC 29733	23-7378001	501(C)(3)	9,453.	0.			GENERAL SUPPORT
WOFFORD COLLEGE 429 N. CHURCH STREET SPARTANBURG, SC 29303	57-0314422	501(C)(3)	103,464.	0.			GENERAL SUPPORT
WOMEN GIVING FOR SPARTANBURG FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	26,200.	0.			GENERAL SUPPORT
YMCA OF GREATER SPARTANBURG 151 RIBAUT STREET SPARTANBURG, SC 29302	57-0314425	501(C)(3)	60,481.	0.			GENERAL SUPPORT

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YOUNG LIFE OF SPARTANBURG PO BOX 1314 SPARTANBURG, SC 29304	84-0385934	501(C)(3)	12,954.	0.			GENERAL SUPPORT
YOUTH SPORTS BUREAU, U.S.A. PO BOX 5103 SPARTANBURG, SC 29304	57-0932542	501(C)(3)	7,500.	0.			GENERAL SUPPORT
KIDS UPSTATE PO BOX 2794 SPARTANBURG, SC 29304	57-0862226	501(C)(3)	67,686.	0.			GENERAL SUPPORT
CHARLES LEA CENTER FOUNDATION, INC. - 195 BURDETTE STREET - SPARTANBURG, SC 29307	57-0793478	501(C)(3)	17,825.	0.			GENERAL SUPPORT
JUMPSTART SOUTH CAROLINA PO BOX 1050 SPARTANBURG, SC 29304	26-3023664	501(C)(3)	17,750.	0.			GENERAL SUPPORT
SALVATION ARMY OF SPARTANBURG PO BOX 2909 SPARTANBURG, SC 29304	58-0660607	501(C)(3)	5,869.	0.			GENERAL SUPPORT
BOB JONES UNIVERSITY 1700 WADE HAMPTON BOULEVARD GREENVILLE, SC 29614-0001	57-1088101	501(C)(3)	10,000.	0.			GENERAL SUPPORT
STONE SOUP STORYTELLING INSTITUTE 134 S. MAIN STREET WOODRUFF, SC 29388	57-0864306	501(C)(3)	5,692.	0.			GENERAL SUPPORT
BLOOM UPSTATE, INC., PO BOX 2374 SPARTANBURG, SC 29304	82-2158330	501(C)(3)	20,018.	0.			GENERAL SUPPORT

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SPARTANBURG HUMANE SOCIETY 150 DEXTER ROAD SPARTANBURG, SC 29303	57-0481019	501(C)(3)	88,451.	0.			GENERAL SUPPORT
CITIZEN SCHOLARS INSTITUTE PO BOX 6266 SPARTANBURG, SC 29304	81-3296125	501(C)(3)	276,235.	0.			GENERAL SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES - SPARTANBURG - PO BOX 117 - SPARTANBURG, SC 29304	44-0610626	501(C)(3)	6,000.	0.			GENERAL SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES - HARTWELL, GA - 2288 LIGHTWOOD ROAD - HARTWELL, GA 30643	44-0610626	501(C)(3)	31,502.	0.			GENERAL SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES - INDIAN TRAIL - 1027 ONYX LANE - INDIAN TRAIL, NC 28079	44-0610626	501(C)(3)	20,000.	0.			GENERAL SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES - ROCK HILL - PO BOX 525 - ROCK HILL, SC 29731	44-0610626	501(C)(3)	20,000.	0.			GENERAL SUPPORT
GIRL SCOUTS OF SOUTH CAROLINA-MOUNTAINS TO MIDLANDS, INC. - GREENVILLE - 3 INDEPENDENCE POINTE, SUITE 106 - GREENVILLE, SC	57-0314433	501(C)(3)	7,000.	0.			GENERAL SUPPORT
MAYO CLINIC PO BOX 450 ALBERT LEA, MN 56007	41-6011702	501(C)(3)	1,500,000.	0.			GENERAL SUPPORT
RACIAL EQUITY FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	75,000.	0.			GENERAL SUPPORT

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WOFFORD COLLEGE ATHLETICS 429 N. CHURCH STREET SPARTANBURG, SC 29303	57-0314422	501(C)(3)	23,600.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY OF SPARTANBURG - 2270 SOUTH PINE STREET - SPARTANBURG, SC 29302	57-0849669	501(C)(3)	97,349.	0.			GENERAL SUPPORT
SPARTANBURG HOUSING 170 ARCH STREET SPARTANBURG, SC 29303	82-3170687	501(C)(3)	52,571.	0.			GENERAL SUPPORT
TUNNEL TO TOWERS FOUNDATION 2361 HYLAN BOULEVARD STATEN ISLAND, NY 10306	02-0554654	501(C)(3)	10,000.	0.			GENERAL SUPPORT
GIRL SCOUTS OF SOUTH CAROLINA -- MOUNTAINS TO MIDLANDS - SPARTANBURG - 330 SCOUT DRIVE - SPARTANBURG, SC 29301	57-0314433	501(C)(3)	6,000.	0.			GENERAL SUPPORT
LEADERSHIP SPARTANBURG ALUMNI ASSOCIATION FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	20,257.	0.			GENERAL SUPPORT
PALMETTO COUNCIL, BOY SCOUTS OF AMERICA - 420 S. CHURCH STREET - SPARTANBURG, SC 29306	22-1576300	501(C)(3)	26,187.	0.			GENERAL SUPPORT
COMMUNITY IMPACT FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	806,266.	0.			GENERAL SUPPORT
SPARTANBURG MUSIC FOUNDATION FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	80,199.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UPLIFT OUTREACH CENTER PO BOX 171375 SPARTANBURG, SC 29301	84-2137645	501(C)(3)	25,500.	0.			GENERAL SUPPORT
FAVOR UPSTATE 355 WOODRUFF ROAD, SUITE 303 GREENVILLE, SC 29607	20-1724061	501(C)(3)	26,000.	0.			GENERAL SUPPORT
THE HOMELESS PERIOD PROJECT DBA THE PERIOD PROJECT - PO BOX 402 - GREENVILLE, SC 29602	47-5144792	501(C)(3)	15,000.	0.			GENERAL SUPPORT
SOUTH CAROLINA CHARITIES, INC. 104 S MAIN STREET STE 110 GREENVILLE, SC 29601-2788	57-1110542	501(C)(3)	29,000.	0.			GENERAL SUPPORT
DANIEL JENKINS ACADEMY 2670 BONDS AVENUE NORTH CHARLESTON, SC 29405	57-6000322	501(C)(3)	10,500.	0.			GENERAL SUPPORT
FELLOWSHIP OF CHRISTIAN ATHLETES - UNION - PO BOX 1110 - UNION, SC 29379-2015	44-0610626	501(C)(3)	8,000.	0.			GENERAL SUPPORT
CHEROKEE COUNTY SCHOOL DISTRICT 141 TWIN LAKE ROAD GAFFNEY, SC 29341	57-6001580	501(C)(3)	5,500.	0.			GENERAL SUPPORT
UNIVERSITY OF NORTH CAROLINA - CHAPEL HILL - PO BOX 1080 - CHAPEL HILL, NC 27514-1080	59-1711424	501(C)(3)	8,000.	0.			GENERAL SUPPORT
SPARTANBURG JUNETEENTH, INC. FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	10,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COKER UNIVERSITY 300 E. COLLEGE AVENUE HARTSVILLE, SC 29550	57-0324916	501(C)(3)	5,750.	0.			GENERAL SUPPORT
ROTARY INTERNATIONAL DISTRICT 7750 7201 WINSLOW DRIVE WAXHAW, NC 28173	57-0750229	501(C)(3)	64,813.	0.			GENERAL SUPPORT
PROJECT R.E.S.T. 236 UNION STREET SPARTANBURG, SC 29302	57-0760599	501(C)(3)	23,486.	0.			GENERAL SUPPORT
ONESPARTANBURG INC. 105 N. PINE STREET SPARTANBURG, SC 29304	57-0251910	501(C)(3)	201,895.	0.			GENERAL SUPPORT
MEDICAL COLLEGE OF GEORGIA 1120 15TH STREET AUGUSTA, GA 30912	56-0532129	501(C)(3)	7,000.	0.			GENERAL SUPPORT
MUSC SCHOOL OF PHARMACY 1 SOUTH PARK CIRCLE, BUILDING 1, SU CHARLESTON, SC 29407	57-1031624	501(C)(3)	15,000.	0.			GENERAL SUPPORT
ST. PAUL UNITED METHODIST CHURCH 1320 FERNWOOD GLENDALE ROAD SPARTANBURG, SC 29307	57-0439646	CHURCH	5,969.	0.			GENERAL SUPPORT
REFORMED UNIVERSITY FELLOWSHIP PO BOX 890004 CHARLOTTE, NC 28289-0004	58-1713181	501(C)(3)	6,200.	0.			GENERAL SUPPORT
ST. MATTHEW'S EPISCOPAL CHURCH 101 ST. MATTHEWS LANE SPARTANBURG, SC 29301	57-0524255	CHURCH	11,560.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEAUTY MARKS FOR GIRLS 431 E KENNEDY ST. SPARTANBURG, SC 29302	82-5487846	501(C)(3)	6,000.	0.			GENERAL SUPPORT
ELOHIMS FOUNDATION 530 UNITED CIRCLE GREER, SC 29651	32-0320580	501(C)(3)	11,000.	0.			GENERAL SUPPORT
UNIVERSITY OF GEORGIA 105 BUSINESS SERVICES BLDG. ATHENS, GA 30602	58-6033837	501(C)(3)	6,000.	0.			GENERAL SUPPORT
MARY H. WRIGHT MEMORIAL STATUE FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	20,000.	0.			GENERAL SUPPORT
JOHN AND NORA FEATHERSTON DONOR ADVISED FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	24,315.	0.			GENERAL SUPPORT
ROCK ISLAND-MILAN EDUCATION FOUNDATION - 2101 SIXTH AVENUE - ROCK ISLAND, IL 61201	36-3504459	501(C)(3)	14,985.	0.			GENERAL SUPPORT
LAKE SUMMIT COMMUNITY FOUNDATION FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	38,750.	0.			GENERAL SUPPORT
BERKELEY ALTERNATIVE SCHOOL 106 S LIVE OAK DR MONCKS CORNER, SC 29461	57-6000313	501(C)(3)	5,500.	0.			GENERAL SUPPORT
SPARTANBURG TERRACE TENANTS ASSOCIATION - PO BOX 6905 - SPARTANBURG, SC 29304	57-0961574	501(C)(3)	13,300.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - PENN MEDICINE DEVELOPMENT, BASSER CENTER FOR BRCA - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	200,000.	0.			GENERAL SUPPORT
EMILY CART COCHRAN FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	601,285.	0.			GENERAL SUPPORT
LUCILE CART BOYLE FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	601,285.	0.			GENERAL SUPPORT
WALTER M. CART, JR. FAMILY FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	601,285.	0.			GENERAL SUPPORT
ROB CART FAMILY FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	601,285.	0.			GENERAL SUPPORT
WILLS EYE FOUNDATION 840 WALNUT ST., SUITE 1510 PHILADELPHIA, PA 19107	59-3794523	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ALOTIAN CHARITABLE EVENTS, INC. 101 ALOTIAN DRIVE ROLAND, AR 72135	83-1757253	501(C)(3)	30,000.	0.			GENERAL SUPPORT
PALMETTO PROJECT 6296 RIVERS AVENUE, SUITE 100 CHARLESTON, SC 29406	57-0807801	501(C)(3)	26,000.	0.			GENERAL SUPPORT
UPSTATE WORKFORCE FUTURES CORPORATION (ACHIEVE PROGRAM) - 220 EAST KENNEDY STREET - SPARTANBURG, SC 29302	61-1614418	501(C)(3)	26,180.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPARTANBURG YOUTH THEATRE FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501(C)(3)	10,000.	0.			GENERAL SUPPORT
HOMES OF HOPE 3 DUNEAN STREET GREENVILLE, SC 29611	57-1069688	501(C)(3)	10,000.	0.			GENERAL SUPPORT
FRIENDS OF THE SPARTANBURG COUNTY PUBLIC LIBRARY CAPITAL IMPROVEMENTS FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	250,000.	0.			GENERAL SUPPORT
SALUDA COMMUNITY LAND TRUST, INC. PO BOX 732 SALUDA, NC 28773	20-8869652	501(C)(3)	16,000.	0.			GENERAL SUPPORT
ST. LUKE'S EPISCOPAL CHURCH 2245 HUGUENOT TRAIL POWHATAN, VA 23139	54-0856687	CHURCH	10,000.	0.			GENERAL SUPPORT
THE POST AND COURIER PUBLIC SERVICE AND INVESTIGATIVE REPORTING FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	50,000.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY HISTORICAL ASSOCIATION - PO BOX 887 - SPARTANBURG, SC 29304	57-6025123	501(C)(3)	8,000.	0.			GENERAL SUPPORT
VSP FOUNDATION, INC. DESIGNATED FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501(C)(3)	67,995.	0.			GENERAL SUPPORT
SPARTANBURG YOUTH THEATRE 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-6002713	501(C)(3)	5,560.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	620	616,042.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION MAKES DISTRIBUTIONS TO VARIOUS LOCAL NON-PROFITS AT THE
 DIRECTION OF FUND ADVISORS. ORGANIZATIONS MUST BE 501(C)(3) ORGANIZATIONS
 IN ORDER TO RECEIVE FUNDING. IN THE EVENT THAT FUNDS ARE KNOWN TO MISUSED,
 FUTURE DISTRIBUTIONS WILL NOT BE MADE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

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Name of the organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
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Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		X
2		X
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TROY M. HANNA PRESIDENT & CEO/ ASST. SEC	(i)	205,788.	0.	0.	24,695.	0.	230,483.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARY L. THOMAS CHIEF OPERATING OFFICER	(i)	183,350.	0.	0.	22,002.	0.	205,352.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

THE FOUNDATION PROVIDES THE PRESIDENT AND CEO A MEMBERSHIP TO SPARTANBURG
COUNTRY CLUB AND THE PIEDMONT CLUB, FOR DEVELOPMENT PURPOSES. ANY PERSONAL
EXPENSES INCURRED ARE REIMBURSED TO THE FOUNDATION.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

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Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
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Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	27	2,014,903.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29
---	-----------

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RESIDENTS BY PROMOTING PHILANTHROPY, ENCOURAGING COMMUNITY ENGAGEMENT,
AND RESPONDING TO COMMUNITY NEEDS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

INITIATIVES: NONPROFIT CONNECT, NONPROFIT CAPACITY BUILDING BOOT CAMP,

DONOR CONNECT, THE SPARTANBURG INTERFAITH ALLIANCE, GRASSROOTS

LEADERSHIP DEVELOPMENT INSTITUTE AND ALUMNI ASSOCIATION, AND MINORITY

BUSINESS CONNECT. THE FOUNDATION DEVELOPED AND LAUNCHED THREE NEW

INITIATIVES: NONPROFIT CAPACITY BUILDING BOOT CAMP TO PROVIDE SMALL

AND/OR NEW ORGANIZATIONS WITH THE FUNDAMENTALS OF OPERATING A

NONPROFIT, MINORITY BUSINESS CONNECT TO INCREASE THE SOCIAL CAPITAL OF

MINORITY BUSINESS OWNERS AND ENTREPRENEURS, AND THE HIGHLAND

NEIGHBORHOOD LEADERSHIP DEVELOPMENT INSTITUTE TO EQUIP RESIDENT WITH

THE TOOLS AND TRAINING NEEDED TO STRENGTHEN THEIR COLLECTIVE VOICE AND

CREATE POSITIVE CHANGE IN THEIR NEIGHBORHOOD. ADDITIONALLY, THE

FOUNDATION INTRODUCED A NEW GRANTMAKING STRATEGY FOCUSED ON THE CORE

AREAS OF THE FOUNDATION'S VISION: QUALITY OF LIFE, ECONOMIC MOBILITY,

AND EDUCATIONAL ACHIEVEMENT.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE COMPLETE 990 AND ALL SCHEDULES ARE PROVIDED TO THE BOARD OF

TRUSTEES FOR THEIR REVIEW AND APPROVAL PRIOR TO FILING. AFTER APPROVAL BY

THE TRUSTEES, THE FOUNDATION'S PRESIDENT & CEO SIGNS THE RETURN AND

AUTHORIZES FILING.

Name of the organization SPARTANBURG COUNTY FOUNDATION	Employer identification number 57-0351398
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FORM 990, PART VI, SECTION B, LINE 12C:

THE TRUSTEES AND ALL EMPLOYEES COMPLETE A CONFLICT OF INTEREST

QUESTIONNAIRE ANNUALLY AND THEY ARE REVIEWED BY THE PRESIDENT AND BOARD

CHAIRMAN. IF ANY CONFLICTS OR POTENTIAL CONFLICTS ARE NOTED, THEY ARE

PRESENTED TO THE BOARD AND OTHER APPROPRIATE PERSONNEL FOR FUTURE

REFERENCE.

FORM 990, PART VI, SECTION B, LINE 15:

A.) THE EXECUTIVE & GOVERNANCE COMMITTEE AND THE FULL BOARD ARE INVOLVED IN

THE DECISION MAKING. B.) COMPARISONS ARE BASED ON AN ANNUAL STUDY CONDUCTED

BY THE COUNCIL ON FOUNDATIONS, AND ON OTHER COMPARATIVE DATA. C.) 50TH

PERCENTILE

FORM 990, PART VI, SECTION C, LINE 19:

UPON REQUEST, THE FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE FOR

INSPECTIONS AT THE OFFICE OF SPARTANBURG COUNTY FOUNDATION, 424 E KENNEDY

STREET, SPARTANBURG, SC 29302, TELEPHONE 864-582-0138, BETWEEN THE HOURS OF

9AM AND 5PM, MONDAY THROUGH FRIDAY AND ALSO ON WWW.SPCF.ORG AND

WWW.GUIDESTAR.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-48,168.
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RECLASSIFICATION SPECIAL FUNDS EXCLUDED FROM TAX RETURN	490,889.
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TOTAL TO FORM 990, PART XI, LINE 9	442,721.
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FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization <p align="center">SPARTANBURG COUNTY FOUNDATION</p>	Employer identification number <p align="center">57-0351398</p>
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WINGO PARK LLC - 57-0351398 424 E KENNEDY STREET SPARTANBURG, SC 29302	REAL ESTATE INVESTMENT	SOUTH CAROLINA			SPARTANBURG COUNTY FOUNDATION
SPARTANBURG REAL HOLDINGS LLC - 57-0351398 424 E KENNEDY STREET SPARTANBURG, SC 29302	REAL ESTATE INVESTMENT	SOUTH CAROLINA			SPARTANBURG COUNTY FOUNDATION

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
HABISREUTINGER & BLACK FOUNDATION - 20-5799183, 424 E KENNEDY STREET, SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
BALMER FOUNDATION - 56-2206524 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
NOBLE TREE FOUNDATION - 57-1091856 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
JUDY BRADSHAW CHILDREN'S FOUNDATION - 57-1066485, 424 E KENNEDY STREET, SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2022

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
BEN M. CART FOUNDATION - 46-1035516 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
TENA AND FRED OATES FOUNDATION - 57-1066228 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
BARNET FOUNDATION - 58-2319535 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
FALATOK FOUNDATION - 26-0641848 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
BENEVOLENT FOUNDATION - 54-2082667 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
BAIN FOUNDATION - 57-1060455 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
ZIMMERLI FOUNDATION - 57-1018476 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
PERRIN FOUNDATION - 57-1089465 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X
IVEY FOUNDATION - 81-4673524 424 E KENNEDY STREET SPARTANBURG, SC 29302	SUPPORT ORGANIZATION	SOUTH CAROLINA	501(C)(3)	LINE 12A, I	SPARTANBURG COUNTY FOUNDATION		X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BALMER FOUNDATION, INC.	S	86,065.	
(2) BALMER FOUNDATION, INC.	C	250,000.	
(3) THE BARNET FOUNDATION TRUST, INC.	C	152,857.	
(4)			
(5)			
(6)			

