

PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the **2021** 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 \$ 29,684,828.
	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 2021 (Part V, line 2a)	5	19
	6 Total number of volunteers (estimate if necessary)	6	90
	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)	21,822,431.	24,647,756.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,610,527.	2,711,374.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,908,410.	2,191,432.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,341,368.	29,550,562.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,798,650.	14,658,345.
	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)	1,083,405.	1,276,277.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 270,131.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,733,614.	2,275,282.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,615,669.	18,209,904.
19 Revenue less expenses. Subtract line 18 from line 12	12,725,699.	11,340,658.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 210,601,978.	End of Year 213,613,348.
	21 Total liabilities (Part X, line 26)	36,081,627.	17,002,751.
	22 Net assets or fund balances. Subtract line 21 from line 20	174,520,351.	196,610,597.

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 11/09/22	Check if self-employed <input type="checkbox"/>	PTIN P00445891
	Firm's name ▶ FORVIS, LLP	Firm's EIN ▶ 44-0160260	Phone no. (828) 254-2254		
	Firm's address ▶ 500 RIDGEFIELD COURT ASHEVILLE, NC 28806				

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 \$ 15,493,025. including grants of \$ 14,658,345.) (Revenue \$ 2,183,012.) 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 2021, THE FOUNDATION AWARDED GRANTS THROUGH ITS GRANTMAKING PROGRAM AND DISASTER RELIEF FUND TO 237 NONPROFIT ORGANIZATIONS TO IMPROVE THE LIVES OF SPARTANBURG COUNTY RESIDENTS AND ADDRESS THE IMPACTS OF COVID-19. WE ENGAGED OVER 1,400 COMMUNITY MEMBERS VIRTUALLY THROUGH THE

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 15,493,025.

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, tax-exempt bonds, and business 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 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?; 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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; 15b Other officers or key employees of the organization; 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?; 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. [X] Own website [X] Another's website [X] 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 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	442,500.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	24,205,256.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,116,055.				
	h Total. Add lines 1a-1f			24,647,756.			
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)		2,845,640.			2,845,640.	
	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	134,266.				
	c Gain or (loss)	7c	-134,266.				
	d Net gain or (loss)			-134,266.		-134,266.	
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	Business Code	900099	2,067,412.	2,067,412.		
	b TRUST INCOME		900099	115,600.	115,600.		
	c OTHER INCOME		900099	8,420.		8,420.	
	d All other revenue						
	e Total. Add lines 11a-11d			2,191,432.			
12 Total revenue. See instructions			29,550,562.	2,183,012.	0.	2,719,794.	

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 ...	14,011,860.	14,011,860.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	646,485.	646,485.		
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	400,055.	162,650.	206,715.	30,690.
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	605,738.	70,225.	518,568.	16,945.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	82,123.	18,339.	59,853.	3,931.
9 Other employee benefits	134,879.	30,120.	98,303.	6,456.
10 Payroll taxes	53,482.	9,256.	41,852.	2,374.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	58,792.	24,690.	32,000.	2,102.
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.)	1,366,678.	290,502.	925,555.	150,621.
12 Advertising and promotion				
13 Office expenses	110,446.	23,638.	61,705.	25,103.
14 Information technology				
15 Royalties				
16 Occupancy	145,270.	32,440.	105,876.	6,954.
17 Travel	1,495.	334.	1,089.	72.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	32,823.	12,505.	19,086.	1,232.
20 Interest	37,533.	8,381.	27,355.	1,797.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	318,528.	71,130.	232,151.	15,247.
23 Insurance	49,461.	11,045.	36,048.	2,368.
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	70,298.	15,698.	51,235.	3,365.
b DUES TO OTHER ORGANIZAT	40,909.	9,513.	30,450.	946.
c COMMUNITY FUND ANNUAL C	18,209.	18,209.		
d GRASSROOTS LEADERSHIP D	17,000.	17,000.		
e All other expenses	7,840.	9,005.	-1,093.	-72.
25 Total functional expenses. Add lines 1 through 24e	18,209,904.	15,493,025.	2,446,748.	270,131.
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)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	4,687,798.	1	6,308,352.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,779,140.	3	2,420,920.
	4 Accounts receivable, net	4,965.	4	4,162.
	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 11,433,034.		
	b Less: accumulated depreciation	10b 1,528,563.	10,093,652.	10c 9,904,471.
	11 Investments - publicly traded securities	176,461,706.	11	176,754,967.
	12 Investments - other securities. See Part IV, line 11	14,018,168.	12	15,528,842.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,556,549.	15	2,691,634.
16 Total assets. Add lines 1 through 15 (must equal line 33)	210,601,978.	16	213,613,348.	
Liabilities	17 Accounts payable and accrued expenses	65,042.	17	9,484.
	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	30,653,693.	21	13,263,504.
	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	5,362,892.	25	3,729,763.
	26 Total liabilities. Add lines 17 through 25	36,081,627.	26	17,002,751.
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	14,500,201.	27	15,879,644.
	28 Net assets with donor restrictions	160,020,150.	28	180,730,953.
	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	174,520,351.	32	196,610,597.
33 Total liabilities and net assets/fund balances	210,601,978.	33	213,613,348.	

Form 990 (2021)

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	29,550,562.
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,209,904.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,340,658.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	174,520,351.
5	Net unrealized gains (losses) on investments	5	9,323,981.
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	1,425,606.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	196,610,596.

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 Single Audit Act and OMB Circular A-133?
- 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** (2021)

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	12,998,377.	16,465,171.	29,383,814.	21,822,431.	24,647,756.	105,317,549.
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	12,998,377.	16,465,171.	29,383,814.	21,822,431.	24,647,756.	105,317,549.
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)						825,642.
6 Public support. Subtract line 5 from line 4.						104,491,907.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	12,998,377.	16,465,171.	29,383,814.	21,822,431.	24,647,756.	105,317,549.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,205,319.	2,015,339.	2,854,755.	2,713,198.	2,845,640.	13,634,251.
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.)	9,570,001.		1,737,285.	1,908,410.	2,191,432.	15,407,128.
11 Total support. Add lines 7 through 10						134,358,928.

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 2021 (line 6, column (f), divided by line 11, column (f))	14	77.77 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	71.50 %

16a 33 1/3% support test - 2021. 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

b 33 1/3% support test - 2020. 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

17a 10% -facts-and-circumstances test - 2021. 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

b 10% -facts-and-circumstances test - 2020. 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

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

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) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (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; 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.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (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.

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 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 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 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2021. 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 - 2020. 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 in line 12 on 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 2021 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-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. 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 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule A (Form 990) 2021

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

2021

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
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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
1	<hr/> <hr/> <hr/>	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 2,420,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 1,663,949.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 1,760,995.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 1,967,487.	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/>	\$ 2,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ 700,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ 1,188,486.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<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
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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
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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	

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

2021

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	196	
2 Aggregate value of contributions to (during year)	9,240,501.	
3 Aggregate value of grants from (during year)	3,698,550.	
4 Aggregate value at end of year	60,305,092.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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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? | 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.	1,369,108.	7,054,642.
c Leasehold improvements				
d Equipment				
e Other		981,085.	159,455.	821,630.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				9,904,471.

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	15,528,842.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	15,528,842.	

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	362,967.
(3) LEASE LIABILITY	30,745.
(4) LINE OF CREDIT	3,336,051.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	3,729,763.

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.

1	Total revenue, gains, and other support per audited financial statements	1	40,300,150.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	9,323,982.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,425,606.
e	Add lines 2a through 2d	2e	10,749,588.
3	Subtract line 2e from line 1	3	29,550,562.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	29,550,562.

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

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

1	Total expenses and losses per audited financial statements	1	18,209,904.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	18,209,904.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	18,209,904.

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, 2021.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASSIFICATION SPECIAL FUNDS EXCLUDED FROM TAX RETURN 1,338,733.
 CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 86,873.

Part XIII Supplemental Information *(continued)*

TOTAL TO SCHEDULE D, PART XI, LINE 2D 1,425,606.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASSIFICATION SPECIAL FUNDS EXCLUDED FROM TAX RETURN

**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

2021

**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 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)	12,070.	0.			GENERAL SUPPORT
AMERICAN RED CROSS UPSTATE SC CHAPTER - 940 GROVE ROAD - GREENVILLE, SC 29605	53-0196605	501 (C) (3)	9,270.	0.			GENERAL SUPPORT
ANDERSON UNIVERSITY 316 BOULEVARD ANDERSON, SC 29621	57-0324906	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
ANGELS CHARGE MINISTRY 95 ASHLEY ST. SPARTANBURG, SC 29307	82-1763094	501 (C) (3)	50,150.	0.			GENERAL SUPPORT
ANIMAL ALLIES, INC. 820 GOSSETT ROAD SPARTANBURG, SC 29307	57-1098821	501 (C) (3)	7,300.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 237.

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

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Schedule I (Form 990) 2021

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
APPALACHIAN STATE UNIVERSITY ASU PO BOX 32005, 287 RIVERS STREET BOONE, NC 28608	23-7099379	501 (C) (3)	6,500.	0.			GENERAL SUPPORT
B.A.R.S ACADEMY 291 PROMISED LAND DRIVE SPARTANBURG, SC 29306	80-0398926	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
BALLET SPARTANBURG, INC. 200 E. ST. JOHN STREET SPARTANBURG, SC 29306	57-0658124	501 (C) (3)	11,800.	0.			GENERAL SUPPORT
BATTLEBETTY FOUNDATION PO BOX 277 FAIRFOREST, SC 29353	83-2015836	501 (C) (3)	7,600.	0.			GENERAL SUPPORT
BENJAMIN E. MAYS CONSOLIDATED SCHOOL ALUMNI FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	20,150.	0.			GENERAL SUPPORT
BIG BROTHERS BIG SISTERS UPSTATE 161 EAST KENNEDY STREET SPARTANBURG, SC 29306	20-4243553	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
BLACK ECONOMIC MOBILITY COALITION 145 NORTH CHURCH ST. SPARTANBURG, SC 29306	86-2062016	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
BLOOM UPSTATE 132 CLARENCE CIR MOORE, SC 29369-9646	82-2158330	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
BOYS AND GIRLS CLUBS OF THE UPSTATE, INC. - PO BOX 2794 - SPARTANBURG, SC 29304	57-0862226	501 (C) (3)	53,909.	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
BROTHERS RESTORING URBAN HOPE, INC. - 337 LAURELWOOD DRIVE - BOILING SPRINGS, SC 29316	20-4793140	501 (C) (3)	66,219.	0.			GENERAL SUPPORT
BUFORD STREET UNITED METHODIST CHURCH - 120 EAST BUFORD STREET - GAFFNEY, SC 29340	57-0422126	CHURCH	5,838.	0.			GENERAL SUPPORT
BUSINESS AND PROFESSIONAL WOMEN OF SOUTH CAROLINA - 108 LANSDALE DRIVE - SPARTANBURG, SC 29302	57-6036344	501 (C) (3)	5,276.	0.			GENERAL SUPPORT
CALVARY REDEMPTION CENTER 927 HOWARD STREET SPARTANBURG, SC 29303-2833	57-1071840	501 (C) (3)	50,000.	0.			GENERAL SUPPORT
CANCER ASSOCIATION OF SPARTANBURG & CHEROKEE COUNTIES, INC. - PO BOX 1582 - SPARTANBURG, SC 29304	57-0526068	501 (C) (3)	36,825.	0.			GENERAL SUPPORT
CENTER FOR PHILANTHROPY CAPITAL CAMPAIGN FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	282,500.	0.			GENERAL SUPPORT
CENTRAL UNITED METHODIST CHURCH 233 N. CHURCH STREET SPARTANBURG, SC 29306	57-0314370	CHURCH	123,169.	0.			GENERAL SUPPORT
CHAPMAN CULTURAL CENTER 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-0986224	501 (C) (3)	248,888.	0.			GENERAL SUPPORT
CHARLESTON SOUTHERN UNIVERSITY 9200 UNIVERSITY BLVD. CHARLESTON, SC 29406	57-0474291	501 (C) (3)	14,048.	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
CHEEKWOOD ESTATE AND GARDENS 1200 FORREST PARK DRIVE NASHVILLE, TN 37205	62-0627921	501 (C) (3)	10,000.	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)	8,859.	0.			GENERAL SUPPORT
CHILDREN'S CANCER PARTNERS OF THE CAROLINAS - 900 S. PINE STREET, SUITE F - SPARTANBURG, SC 29302	20-2511033	501 (C) (3)	12,000.	0.			GENERAL SUPPORT
CHRISTMAS IN ACTION SPARTANBURG PO BOX 5852 SPARTANBURG, SC 29304	56-2015602	501 (C) (3)	18,079.	0.			GENERAL SUPPORT
CITIZEN SCHOLAR ANNUAL OPERATION FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	94,773.	0.			GENERAL SUPPORT
CITIZEN SCHOLARS GENERAL FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	115,517.	0.			GENERAL SUPPORT
CITY OF LANDRUM 100 N. SHAMROCK AVENUE LANDRUM, SC 29356	57-6001419	GOVERNMENT	14,720.	0.			GENERAL SUPPORT
CITY OF SPARTANBURG PO BOX 1749 SPARTANBURG, SC 29304	57-6000245	GOVERNMENT	31,000.	0.			GENERAL SUPPORT
CLEMSON UNIVERSITY PO BOX 1889 CLEMSON, SC 29633	57-6000254	501 (C) (3)	65,977.	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
CLEVELAND OPPORTUNITY FOUNDATION 501 HOWARD STREET SUITE E SPARTANBURG, SC 29303	85-1701615	501 (C) (3)	6,750.	0.			GENERAL SUPPORT
COASTAL COMMUNITY FOUNDATION 1691 TURNBULL AVENUE N. CHARLESTON, SC 29405	23-7390313	501 (C) (3)	50,000.	0.			GENERAL SUPPORT
COLLEGE OF CHARLESTON 170 CALHOUN STREET CHARLESTON, SC 29424	23-7069236	501 (C) (3)	18,625.	0.			GENERAL SUPPORT
COLUMBIA COLLEGE 1301 COLUMBIA COLLEGE ROAD COLUMBIA, SC 29203	57-0324915	501 (C) (3)	5,750.	0.			GENERAL SUPPORT
COMMUNITYWORKS, INC. PO BOX 17826 GREENVILLE, SC 29606	26-0421563	501 (C) (3)	20,000.	0.			GENERAL SUPPORT
CONVERSE COLLEGE 580 E. MAIN STREET SPARTANBURG, SC 29302	57-0314380	501 (C) (3)	18,878.	0.			GENERAL SUPPORT
CONVERSE UNIVERSITY 580 EAST MAIN STREET SPARTANBURG, SC 29302	57-0314380	501 (C) (3)	152,887.	0.			GENERAL SUPPORT
CREATIVE ADVANCEMENT CENTERS 131 SUNNY RAY DRIVE DUNCAN, SC 29334	58-2061227	501 (C) (3)	7,245.	0.			GENERAL SUPPORT
CROSS ANCHOR YARBOROUGH CHAPEL UNITED METHODIST CHURCH - PO BOX 4 - CROSS ANCHOR, SC 29331	57-0711102	CHURCH	5,766.	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
CRYSTAL SPRINGS RAVINE IMPROVEMENT FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	6,840.	0.			GENERAL SUPPORT
DISTRICT SEVEN FOUNDATION FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	11,591.	0.			GENERAL SUPPORT
DREAMS FORE KIDS, INC. 5400 DORCHESTER ROAD GREENSBORO, NC 27407	85-3449852	501 (C) (3)	20,000.	0.			GENERAL SUPPORT
DUCKS UNLIMITED, INC. ONE WATERFOWL WAY MEMPHIS, TN 38120	13-5643799	501 (C) (3)	50,000.	0.			GENERAL SUPPORT
DUKE UNIVERSITY 614 CHAPEL DR. ANNEX; BOX 90581 DURHAM, NC 27708-0581	56-0532129	501 (C) (3)	33,056.	0.			GENERAL SUPPORT
EDWARD VIA COLLEGE OF OSTEOPATHIC MEDICINE - 350 HOWARD ST. - SPARTANBURG, SC 29303	54-2052107	501 (C) (3)	29,000.	0.			GENERAL SUPPORT
EPWORTH CHILDRENS HOME PO BOX 50466 COLUMBIA, SC 29250	57-0314389	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
ERSKINE COLLEGE 2 WASHINGTON STREET DUE WEST, SC 29639	57-0314390	501 (C) (3)	5,500.	0.			GENERAL SUPPORT
EVANS TRAINING CENTER 306 JORDAN CREEK ROAD INMAN, SC 29349	27-1144293	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
FELLOWSHIP OF CHRISTIAN ATHLETES PO BOX 117 SPARTANBURG, SC 29304	44-0610626	501 (C) (3)	23,500.	0.			GENERAL SUPPORT
FERNWOOD BAPTIST CHURCH GENERAL ENDOWMENT FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
FIRST BAPTIST CHURCH OF SPARTANBURG - 250 E MAIN STREET - SPARTANBURG, SC 29306	57-0339440	CHURCH	269,000.	0.			GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH 393 E MAIN STREET SPARTANBURG, SC 29302	57-0314439	CHURCH	241,580.	0.			GENERAL SUPPORT
FORT HILL PRESBYTERIAN CHURCH 101 EDGEWOOD AVENUE CLEMSON, SC 29631-1403	57-6004172	CHURCH	12,500.	0.			GENERAL SUPPORT
FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC 29613	57-0314395	501 (C) (3)	17,825.	0.			GENERAL SUPPORT
G B HODGE MD, MEMORIAL NURSING EDUCATION FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	41,237.	0.			GENERAL SUPPORT
GENDER BENDERS 201 IVY ACRES DRIVE PIEDMONT, SC 29673	46-3989884	501 (C) (3)	12,000.	0.			GENERAL SUPPORT
GIRL SCOUTS OF SOUTH CAROLINA-MOUNTAINS TO MIDLANDS, INC. - 412 EAST BUTLER ROAD - MAULDIN, SC 29662	57-0314433	501 (C) (3)	20,500.	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
GLOBAL DEVELOPMENT GROUP 120 HIWASSEE CIRCLE RELIANCE, TN 37369	20-5988003	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
GOFORTH RECOVERY PO BOX 6560 SPARTANBURG, SC 29302	82-4428586	501 (C) (3)	22,250.	0.			GENERAL SUPPORT
GRACE PRESBYTERIAN CHURCH PO BOX 285 DRAYTON, SC 29333	37-1843070	CHURCH	184,172.	0.			GENERAL SUPPORT
GRACE UNITED METHODIST CHURCH 201 SOUTH CHURCH STREET UNION, SC 29379	57-0846086	CHURCH	115,000.	0.			GENERAL SUPPORT
GREER RELIEF AND RESOURCES AGENCY, INC. - PO BOX 1303 - GREER, SC 29652-1303	57-0370331	501 (C) (3)	35,000.	0.			GENERAL SUPPORT
H.A.L.T.E.R. PO BOX 1403 SPARTANBURG, SC 29304	57-0864733	501 (C) (3)	54,394.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY OF SPARTANBURG, INC. - 2270 SOUTH PINE STREET - SPARTANBURG, SC 29302	57-0849669	501 (C) (3)	15,175.	0.			GENERAL SUPPORT
HATCHER GARDEN AND WOODLAND PRESERVE, INC. - PO BOX 2337 - SPARTANBURG, SC 29304	57-1069038	501 (C) (3)	37,451.	0.			GENERAL SUPPORT
HEALTHY SMILES OF SPARTANBURG, INC. - PO BOX 1441 - SPARTANBURG, SC 29304	03-0529473	501 (C) (3)	39,455.	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. GENERAL FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	7,525.	0.			GENERAL SUPPORT
HELLO FAMILY FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	103,448.	0.			GENERAL SUPPORT
HOPE CENTER FOR CHILDREN PO BOX 1731 SPARTANBURG, SC 29304-1731	57-0601487	501 (C) (3)	43,219.	0.			GENERAL SUPPORT
HOPE POINT CHURCH 1185 ASHEVILLE HWY SPARTANBURG, SC 29303	42-1575386	CHURCH	60,000.	0.			GENERAL SUPPORT
HOPE REMAINS YOUTH RANCH 1771 JOHN DODD ROAD WELLFORD, SC 29385	26-0554902	501 (C) (3)	26,205.	0.			GENERAL SUPPORT
HUB CITY FARMERS' MARKET 248 N. CHURCH ST SPARTANBURG, SC 29306	56-2370088	501 (C) (3)	15,280.	0.			GENERAL SUPPORT
HUB CITY FARMER'S MARKET 248 NORTH CHURCH STREET SPARTANBURG, SC 29306	56-2370088	501 (C) (3)	7,500.	0.			GENERAL SUPPORT
HUB CITY WRITERS PROJECT, INC. 186 WEST MAIN STREET SPARTANBURG, SC 29306	57-1059259	501 (C) (3)	5,100.	0.			GENERAL SUPPORT
IMPACT SPORTS INTERNATIONAL PO BOX 5765 SPARTANBURG, SC 29304	20-3995547	501 (C) (3)	5,500.	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.)

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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)	53,500.	0.			GENERAL SUPPORT
KAPPA ALPHA ORDER EDUCATIONAL FOUNDATION - PO BOX 1865 - LEXINGTON, VA 24450	75-1783690	501 (C) (3)	6,000.	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)	7,952.	0.			GENERAL SUPPORT
LANDRUM PRESBYTERIAN CHURCH 404 RUTHERFORD STREET LANDRUM, SC 29356	57-1086719	CHURCH	25,000.	0.			GENERAL SUPPORT
LGBT FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	8,850.	0.			GENERAL SUPPORT
LIMESTONE UNIVERSITY 1115 COLLEGE DRIVE GAFFNEY, SC 29340	57-0314402	501 (C) (3)	7,513.	0.			GENERAL SUPPORT
LOCAL INITIATIVES SUPPORT CORPORATION (LISC) - 28 LIBERTY ST 34TH FL - NEW YORK, NY 10005-1444	13-3030229	501 (C) (3)	27,993.	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.)

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MARCH OF DIMES INC. PO BOX 18819 ATLANTA, GA 31126	13-1846366	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
MEDICAL UNIVERSITY OF SOUTH CAROLINA BURSAR'S OFFICE - 1 SOUTH PARK CIRCLE, BUILDING 1, STE. 402 - CHARLESTON, SC 29407	57-6028985	501 (C) (3)	22,500.	0.			GENERAL SUPPORT
MEETING STREET ACADEMY 201 EAST BROAD STREET, SUITE 110 SPARTANBURG, SC 29306	20-4587841	501 (C) (3)	26,300.	0.			GENERAL SUPPORT
MENTAL FITNESS, INC. PO BOX 402 SPARTANBURG, SC 29304	20-8489636	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
MIDDLE TYGER COMMUNITY CENTER 84 GROCE ROAD LYMAN, SC 29365	57-1077940	501 (C) (3)	12,500.	0.			GENERAL SUPPORT
MIRACLE HILL MINISTRIES 490 S PLEASANTBURG DR GREENVILLE, SC 29607-2526	57-0425826	501 (C) (3)	42,000.	0.			GENERAL SUPPORT
MOBILE MEALS SERVICE OF SPARTANBURG COUNTY, INC. - PO BOX 461 - SPARTANBURG, SC 29304	57-0653452	501 (C) (3)	125,532.	0.			GENERAL SUPPORT
MOONLIGHT COMMUNITY FOUNDATION PO BOX 161013 BIG SKY, MT 59716	80-0941705	501 (C) (3)	14,000.	0.			GENERAL SUPPORT
MUSC FOUNDATION 18 BEE STREET MSC 450 CHARLESTON, SC 29425	57-1031624	501 (C) (3)	27,000.	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
NAZARETH PRESBYTERIAN CHURCH 680 NAZARETH CHURCH RD. MOORE, SC 29369	57-6024361	CHURCH	84,526.	0.			GENERAL SUPPORT
NEW HOPE BAPTIST CHURCH PO BOX 100 CROSS ANCHOR, SC 29331	57-0624595	CHURCH	10,983.	0.			GENERAL SUPPORT
NEW LIFE BAPTIST CHURCH 350 OLD FURNACE ROAD BOILING SPRINGS, SC 29316	20-5333834	CHURCH	33,600.	0.			GENERAL SUPPORT
NORTH CAROLINA STATE UNIVERSITY 2016 HARRIS HALL, CAMPUS BOX 7302 RALEIGH, NC 27695-7302	56-6049503	501 (C) (3)	5,500.	0.			GENERAL SUPPORT
NORTH GREENVILLE UNIVERSITY PO BOX 1892 TIGERVILLE, SC 29688	57-0314406	501 (C) (3)	5,813.	0.			GENERAL SUPPORT
NORTHSIDE DEVELOPMENT GROUP PO BOX 3362 SPARTANBURG, SC 29304	30-0698663	501 (C) (3)	350,000.	0.			GENERAL SUPPORT
NSDAR PO BOX 98286 WASHINGTON, DC 20090-8286	53-0205923	501 (C) (3)	9,400.	0.			GENERAL SUPPORT
ONE SPARTANBURG FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	150,000.	0.			GENERAL SUPPORT
PALMETTO AREA COUNCIL BOY SCOUTS OF AMERICA - 420 S. CHURCH ST. - SPARTANBURG, SC 29306	22-1576300	501 (C) (3)	10,494.	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.)

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PALMETTO COUNCIL BOY SCOUTS OF AMERICA, INC. - 420 S. CHURCH STREET - SPARTANBURG, SC 29306	22-1576300	501 (C) (3)	11,143.	0.			GENERAL SUPPORT
PARTNERS FOR ACTIVE LIVING PO BOX 6728 SPARTANBURG, SC 29304	54-2111221	501 (C) (3)	1,071,186.	0.			GENERAL SUPPORT
PARTNERS FOR ACTIVE LIVING GENERAL FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	12,626.	0.			GENERAL SUPPORT
PAUL J. AND NANCY B. COT DONOR ADVISED FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	42,825.	0.			GENERAL SUPPORT
PENLAND SCHOOL OF CRAFT POST OFFICE BOX 37 PENLAND, NC 28765-0037	56-0623948	501 (C) (3)	8,000.	0.			GENERAL SUPPORT
PFEIFFER UNIVERSITY PO BOX 960; 48380 US 52 MISENHEIMER, NC 28109	56-0582999	501 (C) (3)	7,000.	0.			GENERAL SUPPORT
PIEDMONT CARE, INC. 101 NORTH PINE STREET, SUITE 200 SPARTANBURG, SC 29302	57-1036204	501 (C) (3)	17,500.	0.			GENERAL SUPPORT
PIEDMONT SERTOMA CLUB PO BOX 5041 SPARTANBURG, SC 29304	23-7143056	501 (C) (3)	13,500.	0.			GENERAL SUPPORT
PINE STREET SCHOOL FOUNDATION PO BOX 7213 SPARTANBURG, SC 29304	27-1018261	501 (C) (3)	6,600.	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.)

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PK OUTREACH INC. 140 HILLS BRIDGE ROAD INMAN, SC 29349	57-1026176	501 (C) (3)	30,000.	0.			GENERAL SUPPORT
PRAXIS LEADERSHIP, INC. 404 GRANGER DRIVE LAGRANGE, GA 30240	85-0523712	501 (C) (3)	30,934.	0.			GENERAL SUPPORT
PRESBYTERIAN COLLEGE PO BOX 975 CLINTON, SC 29325	57-0314408	501 (C) (3)	18,163.	0.			GENERAL SUPPORT
PRIDE LINK 30 POINTE CIRCLE GREENVILLE, SC 29615	83-1095678	501 (C) (3)	12,000.	0.			GENERAL SUPPORT
PROJECTHANDUP BHA INVITATIONAL, 8333 ROYAL RIDGE IRVING, TX 75063	90-0705496	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
REIDVILLE PRESBYTERIAN CHURCH 340 COLLEGE STREET REIDVILLE, SC 29375	23-7366967	CHURCH	5,922.	0.			GENERAL SUPPORT
RUTH'S GLEANINGS 147 CHAPEL STREET SPARTANBURG, SC 29303	82-4277688	501 (C) (3)	50,000.	0.			GENERAL SUPPORT
SAFE HOMES - RAPE CRISIS COALITION 236 UNION STREET SPARTANBURG, SC 29302	57-0760599	501 (C) (3)	6,259.	0.			GENERAL SUPPORT
SC SCHOOL FOR THE DEAF AND THE BLIND FOUNDATION, INC. - 355 CEDAR SPRINGS ROAD - SPARTANBURG, SC 29302	57-0693592	501 (C) (3)	20,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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SC STATE UNIVERSITY FOUNDATION INC. - PO BOX 7305 - ORANGEBURG, SC 29117	23-7113930	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
SCCF THE PUTSY AND JOHN WARDLAW EMERGENCY FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	20,000.	0.			GENERAL SUPPORT
SERVANTS FOR SIGHT PO BOX 2122 GREENVILLE, SC 29602	27-0837500	CHURCH	10,000.	0.			GENERAL SUPPORT
SOUTH CAROLINA ACADEMY OF SCIENCE 2015 MARION STREET COLUMBIA, SC 29201	57-6025114	501 (C) (3)	5,767.	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)	95,221.	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)	104,500.	0.			GENERAL SUPPORT
SPARTANBURG ACADEMIC MOVEMENT FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	100,000.	0.			GENERAL SUPPORT
SPARTANBURG AREA CONSERVANCY 100 E MAIN STREET, SUITE 7B SPARTANBURG, SC 29306	57-0885225	501 (C) (3)	42,175.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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SPARTANBURG ART MUSEUM 200 EAST SAINT JOHN STREET SPARTANBURG, SC 29306	23-7041876	501 (C) (3)	22,450.	0.			GENERAL SUPPORT
SPARTANBURG COMMUNITY COLLEGE PO BOX 5632 SPARTANBURG, SC 29304	57-0751500	501 (C) (3)	64,731.	0.			GENERAL SUPPORT
SPARTANBURG COMMUNITY COLLEGE FOUNDATION - 107 COMMUNITY COLLEGE DR. - SPARTANBURG, SC 29303	57-0751500	501 (C) (3)	525,634.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY BAPTIST ASSOCIATION - PO BOX 3433 - SPARTANBURG, SC 29304	27-0816289	501 (C) (3)	77,500.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY COMMISSION FOR HIGHER EDUCATION - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	337,304.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY FIRST STEPS 900 SOUTH PINE STREET SPARTANBURG, SC 29302	57-1097869	501 (C) (3)	300,000.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY HISTORICAL ASSOCIATION, INC. - PO BOX 887 - SPARTANBURG, SC 29304	57-6025123	501 (C) (3)	41,407.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY PUBLIC LIBRARIES - 151 S. CHURCH STREET - SPARTANBURG, SC 29306	57-6000940	GOVERNMENT	50,000.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT 1300 E. BLACKSTOCK ROAD MOORE, SC 29369	57-0741993	GOVERNMENT	195,981.	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.)

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SPARTANBURG COUNTY SCHOOL DISTRICT FIVE - 100 N. DANZLER ROAD - DUNCAN, SC 29334	20-3746128	GOVERNMENT	88,160.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT FOUR - 118 MCEDECO ROAD - WOODRUFF, SC 29388	57-0752636	GOVERNMENT	26,950.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT ONE - PO BOX 218 - CAMPOBELLO, SC 29322	57-0687554	GOVERNMENT	49,860.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT THREE - PO BOX 267 - GLENDALE, SC 29346	57-0759273	GOVERNMENT	26,450.	0.			GENERAL SUPPORT
SPARTANBURG COUNTY SCHOOL DISTRICT TWO - 3231 OLD FURNACE ROAD - CHESNEE, SC 29323	57-0787324	GOVERNMENT	101,130.	0.			GENERAL SUPPORT
SPARTANBURG DAY SCHOOL 1701 SKYLYN DRIVE SPARTANBURG, SC 29307	57-0371816	501 (C) (3)	684,473.	0.			GENERAL SUPPORT
SPARTANBURG HIGH SCHOOL 500 DUPRE DRIVE SPARTANBURG, SC 29307	57-6000942	501 (C) (3)	7,500.	0.			GENERAL SUPPORT
SPARTANBURG HOUSING AUTHORITY 170 ARCH STREET SPARTANBURG, SC 29303	82-3170687	501 (C) (3)	52,929.	0.			GENERAL SUPPORT
SPARTANBURG METHODIST COLLEGE 1000 POWELL MILL ROAD SPARTANBURG, SC 29301	57-0314415	501 (C) (3)	70,169.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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SPARTANBURG PHILHARMONIC 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-0485556	501 (C) (3)	26,645.	0.			GENERAL SUPPORT
SPARTANBURG RACIAL EQUITY FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	75,000.	0.			GENERAL SUPPORT
SPARTANBURG REGIONAL HEALTHCARE SYSTEM FOUNDATION - 101 E. WOOD STREET - SPARTANBURG, SC 29303	57-0937166	501 (C) (3)	299,836.	0.			GENERAL SUPPORT
SPARTANBURG SCIENCE CENTER 200 EAST ST. JOHN STREET SPARTANBURG, SC 29306	57-0661215	501 (C) (3)	9,300.	0.			GENERAL SUPPORT
SPEAKING DOWN BARRIERS PO BOX 7133 SPARTANBURG, SC 29304	47-4421330	501 (C) (3)	76,850.	0.			GENERAL SUPPORT
SPOLETO FESTIVAL, USA 14 GEORGE STREET CHARLESTON, SC 29401-1524	57-0660848	501 (C) (3)	100,000.	0.			GENERAL SUPPORT
ST. ANDREWS UNIVERSITY 1700 DOGWOOD MILE STREET LAURINBURG, NC 28352	58-1662222	501 (C) (3)	7,000.	0.			GENERAL SUPPORT
ST. LUKE'S FREE MEDICAL CLINIC, INC. - PO BOX 3466 - SPARTANBURG, SC 29304	57-0943232	501 (C) (3)	72,616.	0.			GENERAL SUPPORT
ST. LUKE'S HOSPITAL FOUNDATION 89 W. MILLS STREET, SUITE B COLUMBUS, NC 28722	56-1757097	501 (C) (3)	16,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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ST. PAUL THE APOSTLE CATHOLIC CHURCH - 161 NORTH DEAN STREET - SPARTANBURG, SC 29302	57-0327879	CHURCH	32,200.	0.			GENERAL SUPPORT
STANLY COMMUNITY COLLEGE 141 COLLEGE DRIVE ALBEMARLE, NC 28001	56-0994111	501 (C) (3)	7,000.	0.			GENERAL SUPPORT
STRENGTHENING VOICES--GRASSROOTS LEADERSHIP DEVELOPMENT FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
TEMPLE B'NAI ISRAEL 146 HEYWOOD AVENUE SPARTANBURG, SC 29302	57-6022286	501 (C) (3)	26,500.	0.			GENERAL SUPPORT
TEMPLE EDUCATION MINISTRIES DBA H.O.P.E. SOUP KITCHEN - 13225 ASHEVILLE HIGHWAY - INMAN, SC 29349	57-1100099	501 (C) (3)	18,778.	0.			GENERAL SUPPORT
THE ADVENT FOUNDATION 141 ADVENT STREET SPARTANBURG, SC 29302	57-0747726	501 (C) (3)	35,000.	0.			GENERAL SUPPORT
THE BAIN FOUNDATION 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	5,862.	0.			GENERAL SUPPORT
THE BEN S. AND KATHY C. WILLARD FAMILY FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	8,935.	0.			GENERAL SUPPORT
THE BETHLEHEM CENTER PO BOX 3501 SPARTANBURG, SC 29304	57-0314367	501 (C) (3)	148,350.	0.			GENERAL SUPPORT

Schedule I (Form 990)

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THE CHARLES LEA CENTER FOUNDATION, INC. - 195 BURDETTE STREET - SPARTANBURG, SC 29307	57-0793478	501 (C) (3)	19,050.	0.			GENERAL SUPPORT
THE ENCOURAGING WORD PO BOX 2110 SPARTANBURG, SC 29304	20-1829608	501 (C) (3)	63,000.	0.			GENERAL SUPPORT
THE EPISCOPAL CHURCH OF THE ADVENT 141 ADVENT STREET SPARTANBURG, SC 29302	57-0747726	CHURCH	90,556.	0.			GENERAL SUPPORT
THE ETV ENDOWMENT OF SC, INC. 401 E. KENNEDY STREET, SUITE B-1 SPARTANBURG, SC 29302	57-0657549	501 (C) (3)	10,831.	0.			GENERAL SUPPORT
THE GROUP OF 100, INC. 824 E. MAIN STREET SPARTANBURG, SC 29302	58-2480621	501 (C) (3)	14,000.	0.			GENERAL SUPPORT
THE HOMELESS PERIOD PROJECT 413 WILTON ST GREENVILLE, SC 29609-5535	47-5144792	501 (C) (3)	8,500.	0.			GENERAL SUPPORT
THE KENAN-FLAGLER BUSINESS SCHOOL FOUNDATION - CAMPUS BOX 3440 - CHAPEL HILL, NC 27599-3400	56-6001393	501 (C) (3)	110,000.	0.			GENERAL SUPPORT
THE LAKE SUMMIT FOUNDATION 15 WESTMINSTER COURT HENDERSONVILLE, NC 28739	58-1727959	501 (C) (3)	48,950.	0.			GENERAL SUPPORT
THE LEUKEMIA AND LYMPHOMA SOCIETY P.O. BOX 22443 NEW YORK, NY 10087-2443	13-5644916	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
THE SALVATION ARMY 1529 JOHN B. WHITE SR. BLVD. SPARTANBURG, SC 29301	58-0660607	501 (C) (3)	11,870.	0.			GENERAL SUPPORT
THE SHEPHERD'S CENTER OF SPARTANBURG, SC, INC. - 393 E. MAIN STREET - SPARTANBURG, SC 29302	57-0691077	501 (C) (3)	11,100.	0.			GENERAL SUPPORT
THE SPARTANBURG COUNTY FOUNDATION COMMUNITY FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	1,727,546.	0.			GENERAL SUPPORT
THE SPARTANBURG COUNTY FOUNDATION TRUSTEE PROVIDED FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	14,000.	0.			GENERAL SUPPORT
THE SPARTANBURG HUMANE SOCIETY 150 DEXTER ROAD SPARTANBURG, SC 29303	57-0481019	501 (C) (3)	35,138.	0.			GENERAL SUPPORT
THE SPARTANBURG LITTLE THEATRE 200 E. ST. JOHN STREET SPARTANBURG, SC 29306	57-6002713	501 (C) (3)	6,750.	0.			GENERAL SUPPORT
THE SPARTANBURG SOUP KITCHEN, INC. 136 SOUTH FOREST STREET SPARTANBURG, SC 29306	27-0530812	501 (C) (3)	13,906.	0.			GENERAL SUPPORT
TOM AND CECI ARTHUR DONOR ADVISED FUND - 424 E. KENNEDY STREET - SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	49,031.	0.			GENERAL SUPPORT
TOTAL MINISTRIES 976 S. PINE STREET SPARTANBURG, SC 29302	57-0771620	501 (C) (3)	19,047.	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
TRINITY UNITED METHODIST CHURCH 1920 HORSESHOE FALLS ROAD ENOREE, SC 29335	57-1112841	CHURCH	31,187.	0.			GENERAL SUPPORT
UNITARIAN UNIVERSALIST CHURCH OF SPARTANBURG - PO BOX 1942 - SPARTANBURG, SC 29304	57-0947382	CHURCH	8,000.	0.			GENERAL SUPPORT
UNITARIAN UNIVERSALIST CHURCH OF SPARTANBURG, INC., BUILDING FUND - PO BOX 1942 - SPARTANBURG, SC 29304	57-0947382	CHURCH	5,767.	0.			GENERAL SUPPORT
UNITED MITOCHONDRIAL DISEASE FOUNDATION INC. - 8085 SALTSBURG ROAD, SUITE 201 - PITTSBURGH, PA 15239	25-1767180	501 (C) (3)	25,000.	0.			GENERAL SUPPORT
UNITED WAY OF THE PIEDMONT, INC. PO BOX 5624 SPARTANBURG, SC 29304	57-0314377	501 (C) (3)	35,063.	0.			GENERAL SUPPORT
UNIVERSITY OF JACKSONVILLE 700 PELHAM ROAD N JACKSONVILLE, AL 36265	59-0790962	501 (C) (3)	6,000.	0.			GENERAL SUPPORT
UNIVERSITY OF NEW HAMPSHIRE 11 GARRISON AVENUE DURHAM, NH 03824	02-0437506	501 (C) (3)	10,000.	0.			GENERAL SUPPORT
UNIVERSITY OF SOUTH CAROLINA 800 UNIVERSITY WAY SPARTANBURG, SC 29303	57-0555699	501 (C) (3)	26,750.	0.			GENERAL SUPPORT
UPLIFT AND OUTREACH CENTER PO BOX 171375 SPARTANBURG, SC 29301	84-2137645	501 (C) (3)	33,000.	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
UPSTATE FAMILY RESOURCE CENTER 1850 OLD FURNACE ROAD BOILING SPRINGS, SC 29316	06-1806404	501 (C) (3)	50,000.	0.			GENERAL SUPPORT
UPSTATE LAND CONSERVATION FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	112,566.	0.			GENERAL SUPPORT
UPSTATE PRIDE PO BOX 9128 GREENVILLE, SC 29604	27-1102951	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
UPSTATE WARRIOR SOLUTION 3 CALEDON COURT, SUITE A2 GREENVILLE, SC 29615	46-1699670	501 (C) (3)	10,500.	0.			GENERAL SUPPORT
UPSTATE WORKFORCE FUTURES CORPORATION - PO BOX 5313 - SPARTANBURG, SC 29304	61-1614418	501 (C) (3)	27,295.	0.			GENERAL SUPPORT
URBAN LEAGUE OF THE UPSTATE 210 BOMAR AVENUE SPARTANBURG, SC 29306	57-0541039	501 (C) (3)	15,000.	0.			GENERAL SUPPORT
USC UNION PO DRAWER 729 UNION, SC 29379	57-6001153	501 (C) (3)	26,600.	0.			GENERAL SUPPORT
USC UPSTATE 800 UNIVERSITY WAY SPARTANBURG, SC 29303	57-0555699	501 (C) (3)	37,883.	0.			GENERAL SUPPORT
USC UPSTATE FOUNDATION 800 UNIVERSITY WAY SPARTANBURG, SC 29303	57-0555699	501 (C) (3)	204,906.	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
WARRIORS ONCE AGAIN FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	10,200.	0.			GENERAL SUPPORT
WESTERN CAROLINA UNIVERSITY 1 UNIVERSITY DRIVE, 110 H.F. ROBINSON BUILDING - CULLOWHEE, NC 28723	56-6001440	501 (C) (3)	9,250.	0.			GENERAL SUPPORT
WESTMINSTER PRESBYTERIAN CHURCH 309 FERNWOOD DRIVE SPARTANBURG, SC 29307	57-0424982	CHURCH	5,250.	0.			GENERAL SUPPORT
WINTHROP UNIVERSITY 304 TILLMAN HALL, 638 OAKLAND AVENUE ROCK HILL, SC 29733	23-7378001	501 (C) (3)	9,328.	0.			GENERAL SUPPORT
WOFFORD COLLEGE 429 N. CHURCH STREET SPARTANBURG, SC 29303	57-0314422	501 (C) (3)	91,657.	0.			GENERAL SUPPORT
WOMEN GIVING FOR SPARTANBURG 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	10,250.	0.			GENERAL SUPPORT
WOMEN GIVING FOR SPARTANBURG FUND 424 E. KENNEDY STREET SPARTANBURG, SC 29302	57-0351398	501 (C) (3)	11,600.	0.			GENERAL SUPPORT
YMCA OF GREATER SPARTANBURG 151 RIBAUT STREET SPARTANBURG, SC 29302	57-0314425	501 (C) (3)	183,959.	0.			GENERAL SUPPORT
YOUNG LIFE OF SPARTANBURG PO BOX 1314 SPARTANBURG, SC 29304	84-0385934	501 (C) (3)	10,662.	0.			GENERAL SUPPORT

Schedule I (Form 990)

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

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

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) 2021

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. SECY	(i)	198,757.	15,000.	0.	25,651.	18,842.	258,250.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARY L. THOMAS CHIEF OPERATING OFFICER	(i)	176,298.	10,000.	0.	22,356.	15,396.	224,050.	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 ORGANIZATIONS PAYS SOCIAL CLUB DUES FOR THE PRESIDENT POSITION TO

CONDUCT ORGANIZATION BUSINESS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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.

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

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	45	1,116,055. 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**

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 three 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.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2021

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

2021

Open to Public
Inspection

Name of the organization

SPARTANBURG COUNTY FOUNDATION

Employer identification number

57-0351398

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:

FOLLOWING INITIATIVES: NONPROFIT CONNECT, DONOR CONNECT, THE
SPARTANBURG INTERFAITH ALLIANCE, GRASSROOTS LEADERSHIP ALUMNI
ASSOCIATION AND REAL TALK FORUMS. IN ADDITION TO CONNECTING VIRTUALLY,
THE FOUNDATION PARTNERED WITH REGENESIS HEALTHCARE AND SPARTANBURG
REGIONAL HEALTHCARE TO PROVIDE COVID-19 TESTING OVER THE SUMMER AND FLU
VACCINES IN THE FALL. ADDITIONALLY, THROUGH COMMUNITY FOCUS GROUPS AND
A PROGRAMMING COMMITTEE, THE FOUNDATION DEVELOPED AN OPERATIONAL PLAN
FOR SOUTH CAROLINA'S FIRST CENTER FOR PHILANTHROPY, A PLACE WHERE
NONPROFITS, DONORS, AND COMMUNITY CAN COME TOGETHER TO EXPLORE
SOLUTIONS AND TACKLE COMMUNITY ISSUES.

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

A COPY OF FORM 990 AND ALL ATTACHMENTS ARE PROVIDED TO THE BOARD OF
TRUSTEES FOR THEIR REVIEW AND APPROVAL PRIOR TO FILING. AFTER REVIEW AND
APPROVAL BY THE TRUSTEES, THE FOUNDATION'S PRESIDENT SIGNS THE RETURN.

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

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

Schedule O (Form 990) 2021

132211 11-11-21

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

REFERENCE.

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

THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES ANNUALLY REVIEWS SALARIES OF ALL STAFF. THE COMMITTEE USES A NATIONAL COMPENSATION SURVEY FOR NONPROFIT ORGANIZATIONS AND OTHER COMPARATIVE DATA. THE RESULTS ARE PRESENTED TO THE FULL BOARD OF TRUSTEES FOR APPROVAL.

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	86,873.
RECLASSIFICATION SPECIAL FUNDS EXCLUDED FROM TAX RETURN	1,338,733.
TOTAL TO FORM 990, PART XI, LINE 9	1,425,606.

FORM 990, PART XII, LINE 2(C)

THE AUDIT COMMITTEE MEETS WITH THE AUDITOR AND REVIEWS THE AUDITED FINANCIAL STATEMENTS PRIOR TO THE REGULARLY SCHEDULED BOARD OF TRUSTEES MEETING. THE AUDITOR THEN REVIEWS THE AUDIT REPORT WITH THE FULL BOARD DURING THEIR REGULARLY SCHEDULED BOARD MEETING. THE PROCESS HAS NOT CHANGED FROM PRIOR YEARS.

**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

2021

Open to Public Inspection

Name of the organization <p style="text-align: center;">SPARTANBURG COUNTY FOUNDATION</p>	Employer identification number <p style="text-align: center;">57-0351398</p>
--	---

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	115,600.	744,061.	SPARTANBURG COUNTY FOUNDATION
SPARTANBURG REAL HOLDINGS LLC - 57-0351398 424 E KENNEDY STREET SPARTANBURG, SC 29302	REAL ESTATE INVESTMENT	SOUTH CAROLINA	0.	0.	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) 2021

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 III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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	C	408,000.	
(2) BARNET FOUNDATION	C	163,098.	
(3)			
(4)			
(5)			
(6)			

