

Form **990**

Return of Organization Exempt From Income Tax

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

2013

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
COLLEGE OF CHARLESTON FOUNDATION
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
66 GEORGE STREET
 City or town, state or province, country, and ZIP or foreign postal code
CHARLESTON, SC 29424

D Employer identification number
23-7069236

E Telephone number
843-953-3130

G Gross receipts \$ **52,777,248.**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

F Name and address of principal officer: **DEBYE ALDERMAN**
SAME AS C ABOVE

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

J Website: **GIVING.COFC.EDU/FOUNDATION**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1970** **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: TO PROMOTE EDUCATION, RESEARCH, AND DEVELOPMENT PROGRAMS TO BENEFIT THE COLLEGE OF CHARLESTON		
	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	34
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	34
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	34
	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, line 34	7b	470.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	13,603,922.	10,051,722.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,105,476.	5,389,803.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,094,059.	1,031,622.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,803,457.	16,473,147.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,613,625.	4,387,538.
	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)	2,552,002.	3,063,160.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	35,931.	28,037.
	b Total fundraising expenses (Part IX, column (D), line 25) 1,508,311.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,810,016.	3,745,784.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,011,574.	11,224,519.
19 Revenue less expenses. Subtract line 18 from line 12	6,791,883.	5,248,628.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 95,929,140.	End of Year 104,936,511.
	21 Total liabilities (Part X, line 26)	1,984,446.	3,141,430.
	22 Net assets or fund balances. Subtract line 21 from line 20	93,944,694.	101,795,081.

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.

Signature of officer: *Debye Alderman* Date: *4 May 2015*
DEBYE ALDERMAN, DIRECTOR OF FINANCIAL SERVICES
 Type or print name and title

Print/Type preparer's name: **AMY BIBBY** Preparer's signature: *Amy Bibby* Date: *5/13/15* Check if self-employed PTIN: **P00445891**

Firm's name: **DIXON HUGHES GOODMAN LLP** Firm's EIN: **56-0747981**

Firm's address: **500 RIDGEFIELD COURT ASHEVILLE, NC 28806** Phone no. (828) 254-2254

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF THE COLLEGE OF CHARLESTON FOUNDATION IS TO PROMOTE PROGRAMS OF EDUCATION, RESEARCH, STUDENT DEVELOPMENT, AND FACULTY DEVELOPMENT FOR THE EXCLUSIVE BENEFIT OF THE COLLEGE OF CHARLESTON.

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

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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 \$ 5,698,077. including grants of \$ 4,185,041.) (Revenue \$) SEE SCHEDULE O FOR A COMPLETE DESCRIPTION OF OUR ACCOMPLISHMENTS

4b (Code:) (Expenses \$ 3,140,637. including grants of \$ 202,497.) (Revenue \$) SEE SCHEDULE O FOR A COMPLETE DESCRIPTION OF OUR ACCOMPLISHMENTS

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

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

4e Total program service expenses 8,838,714.

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 Schedule B, Schedule of Contributors?	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 Revenue Procedure 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 temporarily restricted endowments, permanent endowments, or 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>	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 <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	X	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1a	146		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
d	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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 in 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

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	34			
b Enter the number of voting members included in line 1a, above, who are independent		34		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?				X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?				X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?				X
6 Did the organization have members or stockholders?				X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?				X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			X	
b Each committee with authority to act on behalf of the governing body?			X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **SC**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in 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, physical address, and telephone number of the person who possesses the books and records of the organization: **DEBYE ALDERMAN - 843-953-7458**
66 GEORGE ST, CHARLESTON, SC 29424

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SHARON B. KINGMAN CHAIRMAN	1.00	X		X				0.	0.	0.
(2) HILTON C. SMITH, JR. VICE CHAIR	1.00	X		X				0.	0.	0.
(3) JEFFERY E. KINARD TREASURER	1.00	X		X				0.	0.	0.
(4) JOHN H. TILLER, ESQ. SECRETARY	1.00	X		X				0.	0.	0.
(5) DR. RENEE ANDERSON DIRECTOR	1.00	X						0.	0.	0.
(6) WILLIAM S. ASBILL DIRECTOR	1.00	X						0.	0.	0.
(7) CHARLES BAKER III DIRECTOR	1.00	X						0.	0.	0.
(8) WILLIAM GLEN BROWN, JR. DIRECTOR	1.00	X						0.	0.	0.
(9) MARCO L. E. CAVAZZONI DIRECTOR	1.00	X						0.	0.	0.
(10) DIANNE M. CULHANE DIRECTOR	1.00	X						0.	0.	0.
(11) DR. DENNIS J. ENCARNATION DIRECTOR	1.00	X						0.	0.	0.
(12) ROBERT L. FREEMAN DIRECTOR	1.00	X						0.	0.	0.
(13) KENNETH S. GUSTAFSON DIRECTOR	1.00	X						0.	0.	0.
(14) H. THOMAS HALBERG DIRECTOR	1.00	X						0.	0.	0.
(15) DOROTHY G. HARRISON DIRECTOR	1.00	X						0.	0.	0.
(16) FLEETWOOD S. HASSELL DIRECTOR	1.00	X						0.	0.	0.
(17) DAVID M. HAY DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) A. J. HEATH DIRECTOR	1.00	X						0.	0.	0.
(19) AMY L. HEYEL DIRECTOR	1.00	X						0.	0.	0.
(20) JEAN W. JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(21) STEPHEN R. KERRIGAN DIRECTOR	1.00	X						0.	0.	0.
(22) EDWARD E. LEGASEY DIRECTOR	1.00	X						0.	0.	0.
(23) ARLINDA F. LOCKLEAR, ESQ. DIRECTOR	1.00	X						0.	0.	0.
(24) BRADFORD MARSHALL DIRECTOR	1.00	X						0.	0.	0.
(25) RALPH F. MARTINO DIRECTOR	1.00	X						0.	0.	0.
(26) JUSTIN R. MCLAIN DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								418,798.	839,818.	65,937.
d Total (add lines 1b and 1c)								418,798.	839,818.	65,937.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ARAMARK 66 GEORGE STREET, CHARLESTON, SC 29424	CATERING SERVICES	404,335.
USWATERCRAFT, LLC 373 MARKET STREET, WARREN, RI 02885	BOATS	265,400.
BB&T FINANCIAL, FSB 151 MEETING STREET, CHARLESTON, SC 29401	BANKING & FINANCIAL SERVICES	136,487.
HAYNSWORTH SINKLER BOYD, PA 134 MEETING STREET, CHARLESTON, SC 29402	LEGAL SERVICES	127,082.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns					
	b Membership dues					
	c Fundraising events	46,367.				
	d Related organizations					
	e Government grants (contributions)					
	f All other contributions, gifts, grants, and similar amounts not included above	10,005,355.				
	g Noncash contributions included in lines 1a-1f \$	273,652.				
	h Total. Add lines 1a-1f	10,051,722.				
	Program Service Revenue	2 a _____				
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)	5,405,990.			5,405,990.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	820,841.				
	b Less: rental expenses	0.				
	c Rental income or (loss)	820,841.				
	d Net rental income or (loss)	820,841.			820,841.	
	7 a Gross amount from sales of assets other than inventory	36,237,310.				
	b Less: cost or other basis and sales expenses	36,253,497.				
	c Gain or (loss)	16,187.				
	d Net gain or (loss)	-16,187.			-16,187.	
	8 a Gross income from fundraising events (not including \$ 46,367. of contributions reported on line 1c). See Part IV, line 18	38,938.				
	b Less: direct expenses	50,604.				
	c Net income or (loss) from fundraising events	-11,666.			-11,666.	
	9 a Gross income from gaming activities. See Part IV, line 19					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	4,165.				
b Less: cost of goods sold	0.					
c Net income or (loss) from sales of inventory	4,165.			4,165.		
Miscellaneous Revenue						
11 a OTHER REVENUE	900099	209,602.			209,602.	
b LICENSE TAG INCOME	900099	8,680.			8,680.	
c _____						
d All other revenue						
e Total. Add lines 11a-11d		218,282.				
12 Total revenue. See instructions.		16,473,147.	0.	0.	6,421,425.	

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 governments and organizations in the United States. See Part IV, line 21	4,185,041.	4,185,041.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	202,497.	202,497.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	331,998.	234,894.	48,552.	48,552.
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	2,260,390.	1,474,867.	166,660.	618,863.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	75,995.	75,995.		
9 Other employee benefits	329,833.	136,125.	31,308.	162,400.
10 Payroll taxes	64,944.		18,830.	46,114.
11 Fees for services (non-employees):				
a Management				
b Legal	110,490.	23,380.	76,127.	10,983.
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	28,037.			28,037.
f Investment management fees	26,745.			26,745.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	682,743.	433,365.	64,815.	184,563.
12 Advertising and promotion	100,948.	83,278.	3,575.	14,095.
13 Office expenses	955,561.	654,697.	233,991.	66,873.
14 Information technology	94,010.		8,626.	85,384.
15 Royalties				
16 Occupancy	162,911.	95,500.	67,411.	
17 Travel	431,997.	334,383.	11,238.	86,376.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	765,330.	623,396.	29,979.	111,955.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	284,938.	186,323.	91,721.	6,894.
23 Insurance	20,536.		20,536.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a STUDENT DEVELOPMENT	49,793.	49,793.		
b RECRUITMENT	47,926.	45,145.		2,781.
c PROFESSIONAL DEVELOPMENT	11,856.	35.	4,125.	7,696.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	11,224,519.	8,838,714.	877,494.	1,508,311.
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 if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	402,093.	1	509,572.
	2	Savings and temporary cash investments	144,406.	2	179,310.
	3	Pledges and grants receivable, net	7,666,861.	3	7,322,202.
	4	Accounts receivable, net	50,560.	4	50,754.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	29,679.	8	28,485.
	9	Prepaid expenses and deferred charges	65,485.	9	1,000,648.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,797,669.		
	b	Less: accumulated depreciation	10b 3,224,821.	10c	5,572,848.
	11	Investments - publicly traded securities	53,902,971.	11	20,632,274.
	12	Investments - other securities. See Part IV, line 11	20,811,495.	12	62,084,963.
	13	Investments - program-related. See Part IV, line 11	7,482,163.	13	7,494,466.
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	60,989.	15	60,989.
16	Total assets. Add lines 1 through 15 (must equal line 34)	95,929,140.	16	104,936,511.	
Liabilities	17	Accounts payable and accrued expenses	395,207.	17	631,383.
	18	Grants payable	1,333,880.	18	1,369,095.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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	255,359.	25	1,140,952.
	26	Total liabilities. Add lines 17 through 25	1,984,446.	26	3,141,430.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	10,017,369.	27	10,247,722.
	28	Temporarily restricted net assets	49,823,253.	28	56,355,040.
	29	Permanently restricted net assets	34,104,072.	29	35,192,319.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	93,944,694.	33	101,795,081.	
34	Total liabilities and net assets/fund balances	95,929,140.	34	104,936,511.	

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	16,473,147.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,224,519.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,248,628.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	93,944,694.
5	Net unrealized gains (losses) on investments	5	2,988,311.
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 in Schedule O)	9	-386,552.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	101,795,081.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	X	
2c	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 in Schedule O.	X	
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?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7840868.	8283559.	10798661.	13638385.	10051722.	50613195.
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	7840868.	8283559.	10798661.	13638385.	10051722.	50613195.
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)						647,534.
6 Public support. Subtract line 5 from line 4						49965661.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	7840868.	8283559.	10798661.	13638385.	10051722.	50613195.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-2636274.	2246520.	2935407.	2933022.	6226831.	11705506.
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 IV.)	2116648.	1270994.	648,464.	284,895.	241,113.	4562114.
11 Total support. Add lines 7 through 10						66880815.
12 Gross receipts from related activities, etc. (see instructions)					12	13,828.
13 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	74.71	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	83.41	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in 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 IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five 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

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. 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 - 2012. 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

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization COLLEGE OF CHARLESTON FOUNDATION	Employer identification number 23-7069236
---	---

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
<u>1</u>	_____ _____ _____	\$ <u>675,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	_____ _____ _____	\$ <u>250,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	_____ _____ _____	\$ <u>222,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	_____ _____ _____	\$ <u>530,792.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	_____ _____ _____	\$ <u>220,439.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization COLLEGE OF CHARLESTON FOUNDATION	Employer identification number 23-7069236
---	---

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
<u>7</u>	_____ _____ _____	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>8</u>	_____ _____ _____	\$ <u>560,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>9</u>	_____ _____ _____	\$ <u>1,150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization COLLEGE OF CHARLESTON FOUNDATION	Employer identification number 23-7069236
---	---

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 COLLEGE OF CHARLESTON FOUNDATION	Employer identification number 23-7069236
---	---

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. 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 information 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

(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

(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

(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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
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 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 type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or education) Preservation of an 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	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ **7,494,466.**

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 SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

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

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 are a 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 programs
- 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" to 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? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	66,287,689.	60,043,987.	56,176,452.	45,524,235.	44,907,383.
b Contributions	3,311,743.	1,450,147.	5,314,300.	4,407,649.	2,082,900.
c Net investment earnings, gains, and losses	7,220,441.	7,205,832.	824,827.	8,142,737.	852,185.
d Grants or scholarships					821,443.
e Other expenditures for facilities and programs	3,552,899.	2,412,277.	2,271,592.	1,898,169.	397,104.
f Administrative expenses					189,524.
g End of year balance	73,266,974.	66,287,689.	60,043,987.	56,176,452.	45,524,235.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 1.58 %
- b Permanent endowment 48.04 %
- c Temporarily restricted endowment 50.38 %

The percentages in 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		X
(ii) related organizations		X
b If "Yes" to 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" to 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		3,053,911.		3,053,911.
b Buildings		3,524,126.	2,198,872.	1,325,254.
c Leasehold improvements				
d Equipment		1,710,882.	819,095.	891,787.
e Other		508,750.	206,854.	301,896.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				5,572,848.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to 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) TIF KEYSTONE FUND	62,084,963.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	62,084,963.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to 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) COLLECTIONS OF ART AND		
(2) HISTORICAL TREASURES	7,494,466.	COST
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	7,494,466.	

Part IX Other Assets.

Complete if the organization answered "Yes" to 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" to 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	240,952.
(3) LINE OF CREDIT	900,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,140,952.

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 FIN 48 (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" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	18,961,348.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a	2,988,311.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-300,649.	
e	Add lines 2a through 2d	2e	2,687,662.	
3	Subtract line 2e from line 1	3	16,273,686.	
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	199,461.	
c	Add lines 4a and 4b	4c	199,461.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	16,473,147.	

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

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

1	Total expenses and losses per audited financial statements		1	11,110,961.
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	85,903.	
e	Add lines 2a through 2d	2e	85,903.	
3	Subtract line 2e from line 1	3	11,025,058.	
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	199,461.	
c	Add lines 4a and 4b	4c	199,461.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	11,224,519.	

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 III, LINE 4:

EXPLANATION: THE COLLEGE OF CHARLESTON FRIENDS OF THE LIBRARY'S MISSION IS TO ADVANCE INTELLECTUAL AND CULTURAL EXCELLENCE ON OUR CAMPUS AND THROUGHOUT THE COMMUNITY. PART OF THAT MISSION INCLUDES ENHANCING THE HOLDINGS IN SPECIAL COLLECTIONS AT THE MARLENE AND NATHAN ADDLESTONE LIBRARY. SPECIAL COLLECTIONS IS COMPRISED OF RARE AND VALUABLE BOOKS, MANUSCRIPTS, AND OTHER COLLECTIBLES THAT SUPPORT RESEARCH BY STUDENTS, FACULTY, AND VISITING SCHOLARS. IN RECENT YEARS, SPECIAL COLLECTIONS STAFF IDENTIFIED SEVERAL SIGNIFICANT TITLES THAT WOULD BE STRATEGIC ACQUISITIONS TO CURRENT COLLECTIONS. THE STAFF WAS ABLE TO SECURE THESE ACQUISITIONS AND TO DATE ALL HAVE BEEN USED BY STUDENTS OR FACULTY FOR RESEARCH PAPERS AS PART OF SEVERAL ACADEMIC COURSES TAUGHT AT THE COLLEGE OF CHARLESTON.

Part XIII Supplemental Information (continued)

THESE ACQUISITIONS WOULD NOT HAVE BEEN POSSIBLE WITHOUT PRIVATE SUPPORT. THE IMPACT OF THESE TITLES ON THE ENTIRE CAMPUS AND THE COMMUNITY IS ENDLESS AND IMMEASURABLE. IN TIME, WITH SUPPORT OF THE FRIENDS OF THE LIBRARY, THE STAFF IN SPECIAL COLLECTIONS HOPES TO CONTINUOUSLY GROW THE COLLECTIONS IN THE SAME MANNER.

PART V, LINE 4:

EXPLANATION: THE FOUNDATION'S ENDOWMENT CONSISTS OF APPROXIMATELY 500 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS. AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.

PART X, LINE 2:

EXPLANATION: THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE; ACCORDINGLY, THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION OR LIABILITY FOR FEDERAL AND STATE INCOME TAXES. THE FOUNDATION HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF JUNE 30, 2014. FISCAL YEARS ON OR AFTER JUNE 30, 2011 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES.

CONTRIBUTIONS MADE TO THE FOUNDATION QUALIFY FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 509(A)(1) AND 170(B)(1)(A)(IV) OF THE INTERNAL REVENUE CODE.

Part XIII Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT	-32,170.
FUNDRAISING EXPENSES INCLUDED IN REVENUE	50,688.
CHANGE IN ALLOWANCE FOR UNCOLLECTIBLE PROMISES TO GIVE	-319,167.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-300,649.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT EXPENSES NET WITH REVENUE	199,461.
--------------------------------------	----------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES INCLUDED IN REVENUE	50,688.
CHANGE IN VALUE OF MARINE GENOMICS ENDOWMENT	35,215.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	85,903.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT EXPENSES NETTED WITH REVENUE	199,461.
---	----------

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization: **COLLEGE OF CHARLESTON FOUNDATION**
Employer identification number: **23-7069236**

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE	1		PROGRAM SERVICE	A PROPERTY IN TRUJILLO, SPAIN, WAS DONATED TO THE COLLEGE OF CHARLESTON FOR USE IN	41,000.
3 a Sub-total	1	0			41,000.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	0			41,000.

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713) Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 3, COLUMN (E):

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: A PROPERTY IN TRUJILLO, SPAIN, WAS DONATED TO THE COLLEGE OF CHARLESTON FOR USE IN THE STUDY ABROAD PROGRAM. THE PROPERTY IS NOW BEING USED AS THE RESIDENCE FOR THE PROFESSORS INVOLVED IN THIS PROGRAM. THE FOUNDATION'S DUTY IS TO MAINTAIN AND MANAGE THE PROPERTY, SO THAT IT MAY BENEFIT MANY GENERATIONS TO COME.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		REACH PROGRAM (event type)	AN EVENING GALAWITH SEBASTI (event type)	1 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	33,290.	35,800.	16,215.	85,305.
	2	Less: Contributions	8,077.	23,000.	15,290.	46,367.
	3	Gross income (line 1 minus line 2)	25,213.	12,800.	925.	38,938.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	10,767.	35,943.	3,974.	50,684.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				50,684.
11	Net income summary. Subtract line 10 from line 3, column (d)				-11,746.	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: GRENZEBACH, GLIER & ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 401 N. MICHIGAN AVE STE 2800, CHICAGO, IL 60611

(II) ACTIVITY: COMPREHENSIVE CAMPAIGN CONSULTATION, NO SOLICITATION OF FUND

**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" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number
23-7069236

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE OF CHARLESTON 66 GEORGE ST CHARLESTON, SC 29424	57-6000265	IRC 115	4,143,554.	0.			COLLEGE OF CHARLESTON: GRANTS PROVIDED TO THE COLLEGE OF CHARLESTON ARE USED TO PROMOTE PROGRAMS COLLEGE OF CHARLESTON ALUMNI ASSOCIATION: PER A MEMORANDUM OF UNDERSTANDING (MOU) WITH COLLEGE OF CHARLESTON COUGAR CLUB: THE COUGAR CLUB AT THE COLLEGE OF CHARLESTON IS THE
COLLEGE OF CHARLESTON ALUMNI ASSOCIATION - PO BOX 20216 CHARLESTON, SC 29413	57-0760038	501C3	115,000.	0.			
COLLEGE OF CHARLESTON COUGAR CLUB 307 MEETING ST CHARLESTON, SC 29401	57-0640443	501C3	2,750.	0.			

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990. **SEE PART IV FOR COLUMN (H) DESCRIPTIONS** Schedule I (Form 990) (2013)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ACADEMIC & ACHIEVEMENT AWARDS	280	200,697.	0.		
STUDENT EMERGENCY ASSISTANCE	4	1,800.	0.		

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

PART I, LINE 2:

EXPLANATION: GRANTS TO ORGANIZATIONS: THROUGH ITS REPRESENTATIVES ON THE ALUMNI BOARD AND THE COUGAR CLUB BOARD, THE FOUNDATION IS ABLE TO MONITOR FINANCIAL AND PROGRAM ACTIVITY FOR EACH OF THESE RESPECTIVE ORGANIZATIONS. WITH REGARD TO THE COLLEGE OF CHARLESTON, THE FOUNDATION WAS ESTABLISHED TO PROMOTE PROGRAMS OF EDUCATION, RESEARCH, STUDENT DEVELOPMENT, AND FACULTY DEVELOPMENT FOR THE EXCLUSIVE BENEFIT OF THE COLLEGE OF CHARLESTON. IN ADDITION, THE FOUNDATION AND THE COLLEGE OF CHARLESTON HAVE EXECUTED A MEMORANDUM OF AGREEMENT TO GUIDE EXPECTATIONS BETWEEN THE TWO

Part IV Supplemental Information

ORGANIZATIONS.

GRANTS/ASSISTANCE TO INDIVIDUALS: ACADEMIC & ACHEIVEMENT AWARDS ARE DISTRIBUTED BASED ON SPECIFIC CRITERIA ESTABLISHED IN DONOR GIFT AGREEMENTS AS WELL AS BY ACADEMIC UNITS AT THE COLLEGE OF CHARLESTON. THE ACADEMIC UNITS ARE RESPONSIBLE FOR SELECTING RECIPIENTS BASED ON ESTABLISHED CRITERIA.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: COLLEGE OF CHARLESTON

(H) PURPOSE OF GRANT OR ASSISTANCE: COLLEGE OF CHARLESTON: GRANTS PROVIDED TO THE COLLEGE OF CHARLESTON ARE USED TO PROMOTE PROGRAMS OF EDUCATION, RESEARCH, STUDENT DEVELOPMENT, AND FACULTY DEVELOPMENT IN ACCORDANCE WITH THE MISSION STATEMENT OF THE FOUNDATION.

NAME OF ORGANIZATION OR GOVERNMENT:

COLLEGE OF CHARLESTON ALUMNI ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: COLLEGE OF CHARLESTON ALUMNI ASSOCIATION: PER A MEMORANDUM OF UNDERSTANDING (MOU) WITH THE ALUMNI ASSOCIATION OF THE COLLEGE OF CHARLESTON, THE COLLEGE OF CHARLESTON FOUNDATION SHALL PROVIDE AN AGREED UPON AMOUNT OF ANNUAL SUPPORT TO ENHANCE ALUMNI ENGAGEMENT AND PROGRAMS, WITH PAYMENTS DUE AT THE BEGINNING OF EACH QUARTER. THE MOU WAS EXECUTED ON DECEMBER 7, 2012 AND EFFECTIVE RETROACTIVELY TO JULY 1, 2012 FOR A THREE-YEAR PERIOD WITH THE APPROVAL OF THE FOUNDATION BOARD OF DIRECTORS AND THE ALUMNI ASSOCIATION BOARD OF DIRECTORS. FOR THE FISCAL YEAR JULY 1, 2013 - JUNE 30, 2014 THE FOUNDATION PAID THE ALUMNI ASSOCIATION \$115,000 IN ACCORDANCE WITH THE MOU.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: COLLEGE OF CHARLESTON COUGAR CLUB

(H) PURPOSE OF GRANT OR ASSISTANCE: COLLEGE OF CHARLESTON COUGAR CLUB:

THE COUGAR CLUB AT THE COLLEGE OF CHARLESTON IS THE FUND-RAISING

ORGANIZATION FOR THE DEPARTMENT OF ATHLETICS, PROVIDING SUPPORT FOR

STUDENT ATHLETES IN MEETING THEIR ACADEMIC AND ATHLETIC GOALS. THE

COLLEGE OF CHARLESTON FOUNDATION MANAGES ENDOWMENT FUNDS WHICH ARE

DESIGNATED FOR THE BENEFIT OF ATHLETICS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2013

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

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 in 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 checked="" 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 type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., 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 in line 1a?

3 Indicate which, if any, of the following the filing 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 type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input 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 in 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) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in 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" to line 5a or 5b, describe in Part III.

6 For persons listed in 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" to line 6a or 6b, describe in Part III.

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

8 Were any amounts reported in 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" to 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		

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.

THE INSTITUTION UNTIL ATTAINMENT OF THE DATE RELATIVE TO CONTINUOUS FULL TIME EMPLOYMENT AS DESIGNATED IN THE AGREEMENT UNLESS TERMINATION OF EMPLOYMENT IS DUE TO THE PARTICIPANT'S DEATH OR TOTAL DISABILITY OR THE PARTICIPANT'S EMPLOYMENT IS INVOLUNTARILY TERMINATED FOR REASONS OTHER THAN JUST CAUSE. IF TERMINATION IS FOR ANY OTHER REASON, THEN NO PAYMENT SHALL BE DUE UNDER THE AGREEMENT.

THE DEFERRED SALARY ACCOUNT SHALL BE PAID BY THE INSTITUTION TO THE PARTICIPANT OR DESIGNATED BENEFICIARY IN A LUMP SUM PAYMENT OF THE SINGLE SUM VALUE OF THE DEFERRED SALARY ACCOUNT.

THE FOLLOWING INDIVIDUAL PARTICIPATED IN A SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN FOR 2013, AS FOLLOWS.

P. GEORGE BENSON: \$34,894

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

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.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **COLLEGE OF CHARLESTON FOUNDATION** Employer identification number **23-7069236**

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	28	135,482.	FAIR MARKET VALUE
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	X	2	12,303.	APPRAISAL
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts	X	2	62,423.	FAIR MARKET VALUE
25 Other ▶ (2 GRAND PIANO)	X	2	46,450.	FAIR MARKET VALUE
26 Other ▶ (FERRAGHAN HAN)	X	1	11,440.	FAIR MARKET VALUE
27 Other ▶ (BONE MINERAL)	X	1	4,000.	FAIR MARKET VALUE
28 Other ▶ (OTHER)	X	1	1,554.	FAIR MARKET VALUE

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not 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 non-standard 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 did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2013)

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

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

FACULTY AND PROGRAM ENRICHMENT

THE FOUNDATION PROVIDED FUNDS IN SUPPORT OF THE FOLLOWING AT THE
COLLEGE OF CHARLESTON: ACADEMIC PROGRAMS, FACULTY ENHANCEMENTS,
OPERATIONS FUND FOR EXPERIENTIAL LEARNING OPPORTUNITIES, AND VARIOUS
OTHER INITIATIVES. A FEW DISTINCTIONS OF THE COLLEGES SCHOOLS AND
PROGRAMS, WHICH ATTEST TO THE CALIBER OF OUR EDUCATIONAL EXPERIENCE AND
OUR STUDENTS, INCLUDE:

SCHOOL OF SCIENCES AND MATHEMATICS

-JIM CAREW (GEOLOGY) WORKED CLOSELY WITH MACE BROWN (WHO ESTABLISHED
THE MACE BROWN NATURAL HISTORY MUSEUM ON CAMPUS) AND FORMER STUDENTS
JONATHAN GEISLER 1995 AND MARK HAVENSTEIN 1998 TO DOCUMENT A NEW
SPECIES OF PREHISTORIC WHALE. ADDITIONALLY, JON HAKKILA (PHYSICS AND
ASTRONOMY) WAS PART OF THE SCIENTIFIC TEAM THAT IDENTIFIED THE
HERCULES-CORONA BOREALIS GREAT WALL, WHICH IS NOW CONSIDERED THE
LARGEST SUPER-STRUCTURE IN THE UNIVERSE.

-THE COLLEGE OF CHARLESTONS SEAFLOOR MAPPING PROGRAM, BEAMS, IS GAINING
INTERNATIONAL ATTENTION FOR TRAINING OCEAN SURVEYORS WHO ARE LANDING
JOBS AND BREAKING GROUND IN THE FIELD. ON ONE RESEARCH CRUISE, FOUR
COLLEGE OF CHARLESTON ALUMNI AND ONE UNDERGRADUATE STUDENT WERE HIRED
SEPARATELY TO CONDUCT GEOPHYSICAL SEAFLOOR MAPPING OFF THE COAST OF
MASSACHUSETTS.

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

SCHOOL OF HUMANITIES AND SOCIAL SCIENCES

-THE COLLEGE GRADUATED THE FIRST ARCHEOLOGY MAJORS IN THE SCHOOLS HISTORY (AND THE STATES).

-A MAJOR EFFORT TOOK PLACE IN HSS TO RAISE UNRESTRICTED FUNDING FOR THE SCHOOLS ACTIVITIES. THE DEANS EXCELLENCE FUND HELPED SUPPORT THE ANNUAL WILLIAM V. MOORE RESEARCH CONFERENCE, ORGANIZED BY THE POLITICAL SCIENCE DEPARTMENT. THE CONFERENCE FEATURED UNDERGRADS FROM THE COLLEGE, ALONG WITH AREA HIGH SCHOOL SENIORS, EACH PRESENTING THEIR WORK ON A VARIETY OF TOPICS IN THIS FIELD.

-RICHARD HADDAD 1975 AND HIS WIFE SHANNON ESTABLISHED AN ENDOWED AWARD FUND TO PROVIDE SUPPORT TO SOCIOLOGY MAJORS WITH AN INTEREST IN HELPING TROUBLED YOUTH WHO ARE PARTICIPATING IN AN INTERNSHIP EXPERIENCE.

SCHOOL OF BUSINESS

-THE COLLEGE OF CHARLESTON HAS STARTED THE GLOBAL LOGISTICS & TRANSPORTATION PROFESSIONAL TRAINING PROGRAM, DESIGNED TO PROVIDE PRACTICAL KNOWLEDGE AND TRAINING IN THE MANY DIVERSE AREAS OF GLOBAL LOGISTICS AND TRANSPORTATION. THE CAREER EXPERIENCE OF INSTRUCTORS IN BOTH THE PRIVATE AND PUBLIC SECTORS NOT ONLY LENDS AN ACADEMIC DIMENSION TO THE CLASSES, BUT ALSO ENABLES THEM TO EFFECTIVELY HANDLE THE SPECIFIC, PRACTICAL INFORMATION NEEDED FOR TRAINING COURSES.

-THE COLLEGE OF CHARLESTON OFFICIALLY LAUNCHED ITS COMMERCIAL REAL ESTATE MINOR PROGRAM, WHICH IS BEING OFFERED THROUGH THE CARTER REAL ESTATE CENTER AT THE SCHOOL OF BUSINESS. THE CURRICULUM INCLUDES CLASSES IN PRINCIPLES OF REAL ESTATE AND FINANCE, IN ADDITION TO ELECTIVES ON TOPICS SUCH AS MARKET ANALYSIS, INVESTMENT ANALYSIS AND URBAN ECONOMICS.

-THE SCHOOL OF BUSINESS HOSTED THE INAUGURAL SOUTH CAROLINA SUPPLY

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

CHAIN SUMMIT FOR LEADERS IN BUSINESS, HIGHER EDUCATION, AND STATE
GOVERNMENT TO IDENTIFY POTENTIAL AREAS FOR COLLABORATION.

SCHOOL OF EDUCATION, HEALTH, AND HUMAN PERFORMANCE

-THE COLLEGE OF CHARLESTONS CENTER FOR PARTNERSHIPS TO IMPROVE
EDUCATION IN THE SCHOOL OF EDUCATION, HEALTH AND HUMAN PERFORMANCE HAS
STARTED THE MATH IMPROVEMENT PROJECT (MIP) TO HELP CHARLESTON AREA
TEACHERS ENHANCE STEM EDUCATION. THE MATH IMPROVEMENT PROJECT (MIP)
TRAINS 20 CLASSROOM TEACHERS AND EDUCATION PROFESSORS IN THE FIVE-STEP
ALGEBRA PROJECT APPROACH FOR TEACHING MATHEMATICS.

-TERRY PETERSON, SENIOR EDUCATION FELLOW AT THE COLLEGE OF CHARLESTON,
HAS BEEN NAMED ONE OF THE 25 MOST INFLUENTIAL PEOPLE IN THE AFTERSCHOOL
COMMUNITY. THE LIST IS COMPILED BY THE NATIONAL AFTERSCHOOL ASSOCIATION
(NAA). IN ADDITION TO HIS WORK WITH THE COLLEGES SCHOOL OF EDUCATION,
HEALTH, AND HUMAN PERFORMANCE, PETERSON RECENTLY SERVED AS THE
EXECUTIVE EDITOR OF A LANDMARK BOOK ON EXPANDED LEARNING AND ENRICHMENT
AFTERSCHOOL AND SUMMERS, EXPANDING MINDS AND OPPORTUNITIES THAT IS
BEING NOW USED ACROSS AMERICA BY SCHOOLS AND COMMUNITY AND YOUTH
GROUPS.

LIBRARIES

-A NEW DIGITAL PUBLIC HISTORY PROJECT, THE LOWCOUNTRY DIGITAL HISTORY
INITIATIVE LAUNCHED AT THE COLLEGE OF CHARLESTON, PART OF AN EMERGING
FIELD THAT IS REVOLUTIONIZING THE ACCESSIBILITY OF HISTORY SCHOLARSHIP
Ø HELPS TELL THE COMPLEX MULTICULTURAL HISTORY OF SOUTH CAROLINA. THE
PROJECT SIGNALS THE COLLEGES FIRST LARGE-SCALE OFFERING IN DIGITAL
PUBLIC HISTORY, A GROWING AREA OF HISTORY EDUCATION THAT COMBINES THE
SCHOLARLY RESEARCH OF ACADEMIC WORKS WITH THE VISUAL IMAGERY, ARCHIVAL

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

MATERIALS, AND ACCESSIBLE HISTORICAL CONTEXT ASSOCIATED WITH MUSEUM EXHIBITS IN AN ONLINE PLATFORM. THE COLLEGE IS ALSO ONE OF SIX ORGANIZATIONS TO BE PART OF THE DIGITAL PUBLIC LIBRARY OF AMERICA LAUNCH.

-THE COLLEGE OF CHARLESTON'S AVERY RESEARCH CENTER FOR AFRICAN AMERICAN HISTORY AND CULTURE PRESENTED THE EXHIBITION UNENSLAVED- RICE CULTURE PAINTING BY JONATHAN GREEN. THE EXHIBITION FEATURED 25 OF GREENS ORIGINAL WORKS THAT HIGHLIGHT THE PROMINENCE AND PREVALENCE OF RICE AND ITS LASTING IMPACT ON CULTURE IN THE SOUTH CAROLINA LOWCOUNTRY.

-ACCLAIMED WAR CORRESPONDENT AND ACADEMY AWARD NOMINEE SEBASTIAN JUNGER SPOKE TO STUDENTS AND MEMBERS OF THE COLLEGE COMMUNITY AT A FRIENDS OF THE LIBRARY EVENT. THE EVENT ALSO MARKED THE LAUNCH OF THE COLLEGE'S FIRST DONOR-FUNDED SCHOLARSHIP TO BENEFIT VETERANS.

SCHOOL OF THE ARTS

-THE HALSEY INSTITUTE OF CONTEMPORARY ART AT THE COLLEGE OF CHARLESTON CONSISTENTLY ATTRACTS WORLD-FAMOUS ARTISTS TO FEATURE THEIR WORK, INCLUDING JASPER JOHNS AND SHEPARD FAIREY.

-ARTS MANAGEMENT MAJORS IN THE SCHOOL OF THE ARTS CAN NOW SELECT THE MUSIC INDUSTRY CONCENTRATION, WHICH INCLUDES FIVE COURSES AND A REQUIRED INTERNSHIP. COURSES INCLUDE INTRODUCTION TO THE MUSIC INDUSTRY, LEGAL ASPECTS OF THE ENTERTAINMENT INDUSTRY, MUSIC IN THE MARKETPLACE, AND MORE.

NORTH CAMPUS

-THE COLLEGE INITIATED A NEW BACHELORS DEGREE COMPLETION PROGRAM DEVELOPED SPECIFICALLY TO MEET THE NEEDS OF ADULT LEARNERS IN SOUTH CAROLINA. THE BACHELOR OF PROFESSIONAL STUDIES (BPS) PROGRAM COMBINES

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

ONLINE AND ON-SITE CLASSES IN AN EFFORT TO ACCOMMODATE THE BUSY LIVES
OF WORKING PROFESSIONALS.

SCHOOL OF LANGUAGES, CULTURES, AND WORLD AFFAIRS

-THE COLLEGE OF CHARLESTON'S INTERNATIONAL SCHOLARS PROGRAM, WHICH
WELCOMED ITS FIRST COHORT IN 2012, IS DESIGNED FOR STUDENTS WHO ARE
COMMITTED TO FINDING SOLUTIONS TO CRITICAL GLOBAL ISSUES AND WHO WANT
TO BE COMFORTABLE MOVING BETWEEN DIFFERENT CULTURES AND LANGUAGES. THE
PROGRAM IS A PARTNERSHIP BETWEEN THE HONORS COLLEGE AND THE SCHOOL OF
LANGUAGES, CULTURES, AND WORLD AFFAIRS. HIGH-ACHIEVING STUDENTS IN THIS
PROGRAM ARE RAISING THE BAR FOR STUDENT ACCOMPLISHMENTS AT THE COLLEGE.

A FEW EXAMPLES:

-CHRIS JACKSON ATTENDED THE FULBRIGHT INSTITUTE

-MADELINE EDWARDS WON A CRITICAL LANGUAGE SCHOLARSHIP FROM THE US
STATE DEPARTMENT AND TRAVELED TO JORDAN TO STUDY ARABIC IN JUNE.

-EDEN KATZ, PUT TOGETHER A TRIP TO GHANA TO WORK ON WATER
PURIFICATION. SHE WON OVER \$1,500.00 OF SCHOLARSHIP TO HELP DEFRAY THE
COST. THIS TRIP TO AFRICA WILL ALSO SATISFY HER INDEPENDENT STUDY
REQUIREMENT IN THE HONORS COLLEGE.

-THREE OF THE IS FELLOWS (JOSEPH QUISOL, OLIVIA GHIZ, KATIE BOOTH)
WENT WITH THE DEAN OF THE HONORS COLLEGE TO HONDURAS OVER SPRING BREAK
AND DID ALL THE DATA COLLECTION FOR A NONPROFIT GROUP WORKING WITH
LOCAL SCHOOLS.

-THE JEWISH STUDIES A TIME TO BUILD CAMPAIGN, RAISED THE ONE MILLION
DOLLARS REQUIRED IN PRIVATE FUNDS TO COMBINE WITH THE FOUR MILLION
DOLLARS THE COLLEGE CONTRIBUTED TO BUILD THE EXPANSION TO THE SYLVIA
VLOSKY YASCHIK JEWISH STUDIES CENTER. THE EXPANSION WILL INCLUDE THE
ENTIRE FIRST FLOOR DEDICATED TO A VEGETARIAN DINING HALL WHICH WILL

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

SATISFY BOTH ETHICAL EATERS AND STUDENTS WHO KEEP KOSHER. WHEN COMPLETED (ANTICIPATED IN 2015), THE NEW FACILITY WILL DOUBLE THE SIZE OF THE EXISTING JEWISH STUDIES CENTER.

-THE PEARLSTINE-LIPOV CENTER FOR SOUTHERN JEWISH HISTORY AND CULTURE WAS ESTABLISHED BY EDWIN PEARLSTINE AND HIS FAMILY TO SUPPORT OPERATING EXPENSES, COMMUNITY PROGRAMMING, SUMMER STUDY OPPORTUNITIES AND OTHER ACTIVITIES ASSOCIATED WITH THE JEWISH HERITAGE COLLECTION AND THE ACADEMIC CURRICULUM OF JEWISH STUDIES AT THE COLLEGE OF CHARLESTON.

990, PART III, LINE 4A CONTINUED

EXPLANATION: INTERDISCIPLINARY PROGRAMS

-CONSTRUCTION BEGAN ON TWO FIELD RESEARCH STATIONS AT DIXIE PLANTATION. THE STATIONS ARE DESIGNED TO SUPPORT ENVIRONMENTAL SCIENCE RESEARCH AND INSTRUCTION, AND THEY WILL ACCOMMODATE STUDENTS AND FACULTY FROM THE COLLEGES UNDERGRADUATE AND GRADUATE PROGRAMS IN ENVIRONMENTAL SCIENCES, BIOLOGY AND ARCHEOLOGY. THE FIELD RESEARCH COMPONENT ESTABLISHES A BASE FOR GENERATING ENVIRONMENTAL, SUSTAINABILITY AND CONSERVATION SCIENCE, WHILE ALSO PRESERVING THE PROPERTY'S NATURAL SPLENDOR. RESEARCH CONDUCTED AT DIXIE PLANTATION WILL CONTINUE TO HAVE A PROFOUND IMPACT AND PROVIDE SOLUTIONS TO NATIONAL ENVIRONMENTAL CHALLENGES SUCH AS COASTAL POLLUTION, WATER ECOLOGY, AND SUSTAINABILITY. A PRIVATE DONOR CONTRIBUTED \$1M TO THE PROJECT, AND THE COLLEGE PROVIDED THE REMAINDER OF THE FUNDING.

-THE COLLEGE OF CHARLESTON HAS ONE OF THE ONLY UNDERGRADUATE PUBLIC HEALTH MAJORS IN THE COUNTRY THAT OFFERS BOTH B.S. AND B.A. DEGREE OPTIONS. GRADUATES IN THIS INTERDISCIPLINARY PROGRAM ARE PREPARED FOR A WIDE RANGE OF CAREERS AT INSTITUTIONS SUCH AS THE U.S. CENTERS FOR DISEASE CONTROL AND THE WORLD HEALTH ORGANIZATION.

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

-THE GOLDEN PEARL FOUNDATION IS A PROUD PARTNER OF THE HEIRLOOM GARDEN PROJECT AT DIXIE PLANTATION LED BY COLLEGE OF CHARLESTON SOCIOLOGY PROFESSOR TRACEY BURKETT AND HER STUDENTS AS WELL AS THE GARDEN RESTORATION PROJECT AT DIXIE PLANTATION.

-TEN COLLEGE OF CHARLESTON STUDENTS PRESENTED RESEARCH AT THE ANNUAL COLONIAL ACADEMIC ALLIANCE UNDERGRADUATE RESEARCH CONFERENCE IN TOWSON, MD. THESE SCHOLARS REPRESENT THE BEST RESEARCH PAPERS SUBMITTED BY STUDENTS FROM ALL MAJORS. THE CONFERENCE IS THE SIGNATURE ACADEMIC AND OUTREACH EVENT SPONSORED BY THE ALLIANCE, UNDER THE AUSPICES OF THE COLONIAL ATHLETIC ASSOCIATION, OF WHICH THE COLLEGE IS A NEW MEMBER IN 2013-14.

HONORS COLLEGE

-COLLEGE OF CHARLESTON SOPHOMORE SARAH LEGENDRE PARTICIPATED IN A FULBRIGHT SUMMER INSTITUTE, ONE OF THE MOST PRESTIGIOUS AND SELECTIVE SUMMER SCHOLARSHIP PROGRAMS OPERATING WORLDWIDE. LEGENDRE, AN HONORS COLLEGE STUDENT AND DOUBLE MAJOR IN GEOLOGY AND ARCHAEOLOGY, SPENT FOUR WEEKS AT DURHAM UNIVERSITY IN THE UK.

-MORE THAN 30 TEAMS OF COLLEGE OF CHARLESTON STUDENTS AND FACULTY MENTORS CONDUCTED RESEARCH DURING THE SUMMER AS PART OF THE SUMMER UNDERGRADUATE RESEARCH WITH FACULTY (SURF) GRANT PROGRAM. TEAMS INVESTIGATED EVERYTHING FROM HUMAN IMMUNOLOGY TO THE EFFECTS OF CAFFEINE AND THE PROSE OF HART CRANE. STUDENTS ARE SUBMERGED IN THE RESEARCH PROCESS, WHICH PREPARES THEM FOR ADMISSION TO TOP GRADUATE SCHOOLS AND COMPETITIVE JOBS. IN MANY CASES, THESE TEAMS PUBLISH THEIR RESULTS IN PROFESSIONAL JOURNALS AND PRESENT RESULTS AT DISCIPLINARY CONFERENCES.

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

GRADUATE SCHOOL

-STUDENTS IN THE JOINT COLLEGE OF CHARLESTON AND THE CITADEL MASTERS DEGREE IN COMPUTER AND INFORMATION SCIENCES PROGRAM ARE NOW ABLE TO SELECT A SPECIALIZATION IN CYBERSECURITY. THE NEW SPECIALIZATION REQUIRES STUDENTS TO TAKE COURSES IN ADVANCED CYBERSECURITY, ADVANCED OPERATING SYSTEMS, DATA COMMUNICATIONS AND NETWORKING, AND PRIVACY AND SECURITY ISSUES. THE NSA CAE IN CYBER OPERATIONS REQUIREMENTS SPECIFY THE TOPICS THAT MUST BE COVERED IN COURSES. THEY INCLUDE LOW-LEVEL PROGRAMMING LANGUAGES, SOFTWARE REVERSE ENGINEERING, OPERATING SYSTEM THEORY, NETWORKING, CELLULAR AND MOBILE COMMUNICATIONS, DISCRETE MATH, LEGAL ISSUES, SECURITY FUNDAMENTALS AND VULNERABILITIES.

MULTIDISCIPLINARY SCHOLARSHIPS

-THE COLLEGE OF CHARLESTON ESTABLISHED THE COCA-COLA FIRST GENERATION SCHOLARS PROGRAM. IT IS THE FIRST-EVER SCHOLARSHIP PROGRAM DEVOTED TO ENSURING ACCESS FOR HIGHLY QUALIFIED FIRST GENERATION STUDENTS AT THE COLLEGE. FIVE SOUTH CAROLINA STUDENTS RECEIVED \$5,000 PER YEAR FOR FOUR YEARS TO ASSIST WITH TUITION AND FEES.

-THE HARRY AND REBA HUGE FOUNDATION ESTABLISHED FOUR ANNUAL STUDY-ABROAD SCHOLARSHIPS FOR STUDENTS AT THE COLLEGE OF CHARLESTON. THEIR \$500,000 GIFT ALSO SUPPORTED FOUR MERIT SCHOLARSHIPS IN THE HONORS COLLEGE AND A MUSIC SCHOLARSHIP IN THE SCHOOL OF THE ARTS AT THE COLLEGE OF CHARLESTON. THE FIRST STUDY-ABROAD SCHOLARSHIPS WERE AWARDED IN SUMMER 2014. THE GIFT ALSO CREATES AN ELITE GROUP OF HUGE SCHOLARS WHO ARE DISTINGUISHED BY EXTRAORDINARY ACADEMIC TALENT, LEADERSHIP POTENTIAL, AND COMMUNITY SERVICE. THE INAUGURAL CLASS OF FOUR HUGE SCHOLARS ARRIVED IN THE FALL OF 2013 AS PART OF THE HONORS COLLEGE AND THE WILLIAM AIKEN FELLOWS SOCIETY, THE COLLEGES TOP SCHOLARS. THE REBA

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

KINNE HUGE AWARD IN MUSIC WILL RECOGNIZE AN ACCOMPLISHED MUSIC MAJOR IN THE SCHOOL OF THE ARTS STARTING IN FALL OF 2013. THE AWARD MAY BE USED TO SUPPLEMENT SCHOLARSHIP SUPPORT OR BE USED AS A TRAVEL STIPEND FOR NATIONAL AND INTERNATIONAL PERFORMANCES AND COMPETITIONS.

-R. KEITH SAULS 1990 ESTABLISHED THE BOUNDLESS OPPORTUNITY ENDOWED SCHOLARSHIP TO PROVIDE SCHOLARSHIPS TO UNDERGRADUATE STUDENTS FROM UNDERREPRESENTED POPULATIONS WHO DEMONSTRATE FINANCIAL NEED. THE SCHOLARSHIP WAS ESTABLISHED TO ENCOURAGE THE COLLEGES INITIATIVES TO SUPPORT A DIVERSE STUDENT BODY. BY ENCOURAGING DIVERSITY AND LEADERSHIP QUALITIES IN COLLEGE OF CHARLESTON STUDENTS, IT IS THE DONORS INTENT IS TO HELP ADVANCE THE COLLEGES EFFORTS TO CULTIVATE AND GROW THE DIVERSE LEADERS OF TOMORROW.

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

SCHOLARSHIPS AND AWARDS

THE FOUNDATION PROVIDED \$2,941,105 IN FINANCIAL AID TO SUPPORT STUDENTS AT THE COLLEGE OF CHARLESTON. THIS FINANCIAL AID INCLUDES ACADEMIC, MERIT, AND TRAVEL ABROAD SCHOLARSHIP FUNDING. IN ADDITION, \$199,532 WAS PROVIDED IN ACADEMIC AND MERIT ACHIEVEMENT AWARDS. NEARLY 1,200 STUDENTS WERE BENEFICIARIES OF THE FINANCIAL AID AND ACADEMIC/MERIT ACHIEVEMENT AWARDS.

THE AMOUNT OF SCHOLARSHIP SUPPORT PROVIDED WAS INCREASED BY 12% OVER LAST YEAR. THIS REMAINS ALIGNED WITH THE COLLEGE OF CHARLESTON STRATEGIC PLAN, WHICH INCLUDES A PROVISION TO INCREASE THE AMOUNT OF

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

MERIT-BASED AND NEED-BASED SCHOLARSHIP FUNDING.

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

EXPLANATION: THE RETURN WAS PREPARED BY AN INDEPENDENT ACCOUNTANT WITH ASSISTANCE AND OVERSIGHT BY MANAGEMENT. THE FULL BOARD WAS PROVIDED A LINK TO ACCESS THE COMPLETE FORM 990, ONLINE, PRIOR TO THE PRESENTATION TO THE MEMBERS OF THE AUDIT COMMITTEE. THE AUDIT COMMITTEE MEMBERS REVIEWED THE FORM AND SUPPORTING SCHEDULES. FOLLOWING REVIEW BY THE COMMITTEE, THE CHAIR OF THE AUDIT COMMITTEE PRESENTED A SUMMARY REVIEW OF THE 990 TO THE BOARD. THE BOARD DOCUMENTED THIS REVIEW IN THE MEETING MINUTES. THE FORM 990 WAS FILED WITH THE IRS FOLLOWING THE BOARD REVIEW.

FORM 990, PART V, PAGE 5, LINE 2A

EXPLANATION: THE FOUNDATION COMPENSATED 29 EMPLOYEES DURING THE YEAR. 5 OF THOSE EMPLOYEES WERE PAID IN PART BY THE COLLEGE OF CHARLESTON FOUNDATION, AND WERE REFLECTED ON THE FOUNDATION'S FORM W-3. THE REMAINDER OF THE EMPLOYEES FOR THE FOUNDATION WERE PAID BY THE COLLEGE OF CHARLESTON, AND THEIR SALARY EXPENSE WAS REIMBURSED BY THE FOUNDATION TO THE COLLEGE OF CHARLESTON.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: A COPY OF THE CONFLICT OF INTEREST POLICY ALONG WITH A QUESTIONNAIRE IS DISTRIBUTED ANNUALLY TO EACH BOARD MEMBER. BOARD MEMBERS COMPLETE THE QUESTIONNAIRES AND RETURN THEM TO THE ORGANIZATION.

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

EXPLANATION: THE FOUNDATION'S EMPLOYEES ARE HIRED AND PAID BY THE COLLEGE OF CHARLESTON. THE FOUNDATION THEN REIMBURSES THE COLLEGE FOR PORTIONS OF

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

THE EMPLOYEES' SALARY COSTS. THE HIRING PROCESS IS MONITORED BY THE HUMAN RESOURCES DEPARTMENT OF THE COLLEGE OF CHARLESTON AND IS SUBJECT TO THE COLLEGE'S POLICIES AND PROCEDURES. IN RECENT YEARS WHEN HIRING OFFICERS AND KEY EMPLOYEES, THE FOUNDATION IN COLLABORATION WITH COLLEGE OF CHARLESTON HAS CONTRACTED WITH OUTSIDE EXECUTIVE SEARCH FIRMS WHO ASSIST IN LOCATING AND INTERVIEWING CANDIDATES. THE FOUNDATION CONSULTS WITH THE SEARCH FIRM AND USES THE FIRM'S EXPERIENCE AND EXPERTISE IN DETERMINING COMPENSATION PACKAGES FOR THESE INDIVIDUALS THAT ARE COMPARABLE TO THOSE OF SIMILAR ORGANIZATIONS. COMPENSATION FOR THE TOP EXECUTIVE, THE EXECUTIVE DIRECTOR OF THE FOUNDATION, IS APPROVED BY THE CHAIR OF THE BOARD, PRIOR TO HIRING. COMPENSATION FOR KEY EMPLOYEES PAID BY THE FOUNDATION AND THE COLLEGE ARE APPROVED BY THE CHAIR OF THE COLLEGE BOARD OF TRUSTEES AS WELL AS THE FOUNDATION.

FORM 990, PART VI, SECTION C, LINE 18:

EXPLANATION: PHOTOCOPIES OF THE FORM 990 ARE AVAILABLE UPON REQUEST AT THE ORGANIZATION'S ACCOUNTING OFFICE. IN ADDITION, RECENT FILINGS OF THE FORM 990 ARE AVAILABLE ONLINE AT WWW.GUIDESTAR.ORG AND ON THE FOUNDATION'S WEBSITE.

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

EXPLANATION: COPIES OF THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE FOUNDATION'S WEBSITE AND UPON REQUEST AT THE ORGANIZATION'S ADMINISTRATIVE OFFICES.

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

CHANGE IN VALUE OF SPLIT INTEREST

-32,170.

Name of the organization

COLLEGE OF CHARLESTON FOUNDATION

Employer identification number

23-7069236

CHANGE IN ALLOWANCE OF UNCOLLECTIBLE PROMISES TO GIVE -319,167.

CHANGE IN VALUE OF MARINE GENOMICS ENDOWMENT -35,215.

TOTAL TO FORM 990, PART XI, LINE 9 -386,552.

Multiple horizontal lines for additional entries.

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	COLLEGE OF CHARLESTON	E	1,369,095.	
2	COLLEGE OF CHARLESTON	J	830,841.	
3	COLLEGE OF CHARLESTON	O	967,487.	
4	COLLEGE OF CHARLESTON	P	2,058,107.	
5				
6				

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2013 or other tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

2013

Department of the Treasury
Internal Revenue Service

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p> <p>C Book value of all assets at end of year 104936511.</p>	<p>D Employer identification number (Employees' trust, see instructions) 23-7069236</p> <p>E Unrelated business activity codes (See instructions.) 900099</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) COLLEGE OF CHARLESTON FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 66 GEORGE STREET</p> <p>City or town, state or province, country, and ZIP or foreign postal code CHARLESTON, SC 29424</p> <p>F Group exemption number (See instructions.)</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>
---	---	---

H Describe the organization's primary unrelated business activity. ▶ **PASS-THROUGH INCOME FROM PASSIVE INVESTMENT**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **DEBYE ALDERMAN** Telephone number ▶ **843-953-7458**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Form 8949 and Schedule D)	4a	2,227.	2,227.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnerships and S corporations (attach statement)	5	-455.	-455.
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule.) STATEMENT 2	12	272.	272.
13 Total. Combine lines 3 through 12	13	2,044.	2,044.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14		
15 Salaries and wages	15		
16 Repairs and maintenance	16		
17 Bad debts	17		
18 Interest (attach schedule)	18		
19 Taxes and licenses	19		
20 Charitable contributions (See instructions for limitation rules.)	20		1.
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a		22b
23 Depletion	23		
24 Contributions to deferred compensation plans	24		
25 Employee benefit programs	25		
26 Excess exempt expenses (Schedule I)	26		
27 Excess readership costs (Schedule J)	27		
28 Other deductions (attach schedule) SEE STATEMENT 3	28		76.
29 Total deductions. Add lines 14 through 28	29		77.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30		1,967.
31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 4	31		497.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32		1,470.
33 Specific deduction (Generally \$1,000, but see instructions for exceptions.)	33		1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34		470.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here [] See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ (2) \$ (3) \$ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000) \$ c Income tax on the amount on line 34 35c 71. 36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: [] Tax rate schedule or [] Schedule D (Form 1041) 36 37 Proxy tax. See instructions 37 38 Alternative minimum tax 38 39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies 39 71.

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a 40b Other credits (see instructions) 40b 40c General business credit. Attach Form 3800 40c 40d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d 40e Total credits. Add lines 40a through 40d 40e 41 Subtract line 40e from line 39 41 71. 42 Other taxes. Check if from: [] Form 4255 [] Form 8611 [] Form 8697 [] Form 8866 [] Other (attach schedule) 42 43 Total tax. Add lines 41 and 42 43 71. 44a Payments: A 2012 overpayment credited to 2013 44a 44b 2013 estimated tax payments 44b 44c Tax deposited with Form 8868 44c 44d Foreign organizations: Tax paid or withheld at source (see instructions) 44d 44e Backup withholding (see instructions) 44e 44f Credit for small employer health insurance premiums (Attach Form 8941) 44f 44g Other credits and payments: [] Form 2439 [] Form 4136 [] Other Total 44g 45 Total payments. Add lines 44a through 44g 45 46 Estimated tax penalty (see instructions). Check if Form 2220 is attached [] 46 47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed 47 71. 48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48 49 Enter the amount of line 48 you want: Credited to 2014 estimated tax Refunded 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here [] Yes [X] No 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. [] Yes [X] No 3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

1 Inventory at beginning of year 1 6 Inventory at end of year 6 2 Purchases 2 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 7 3 Cost of labor 3 4a Additional section 263A costs (att. schedule) 4a 4b Other costs (attach schedule) 4b 5 Total. Add lines 1 through 4b 5 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? [] Yes [] No

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

Sign Here Signature of officer Date Title DIRECTOR OF FINANCIAL SERVICES May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check [] if self-employed PTIN AMY BIBBY Amy Bibby 5/13/15 P00445891 Firm's name DIXON HUGHES GOODMAN LLP Firm's EIN 56-0747981 Firm's address ASHEVILLE, NC 28806 Phone no. (828) 254-2254

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.** (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **0.**

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		

Totals **0.** Enter here and on page 1, Part I, line 7, column (A). **0.** Enter here and on page 1, Part I, line 7, column (B). Total dividends-received deductions included in column 8 **0.**

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Totals **0.** Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). **0.** Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A). 0.		Enter here and on page 1, Part I, line 9, column (B). 0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col. (A). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.			Enter here and on page 1, Part II, line 2d. 0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I		0.	0.			0.
Totals, Part II (lines 1-5)		Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.			Enter here and on page 1, Part II, line 2f. 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS STATEMENT 1

DESCRIPTION	AMOUNT
ORDINARY BUSINESS INCOME	-455.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-455.

FORM 990-T OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
INTEREST & DIVIDENDS	267.
OTHER INCOME	68.
RENTAL INCOME	-115.
ROYALTY INCOME	52.
TOTAL TO FORM 990-T, PAGE 1, LINE 12	272.

FORM 990-T OTHER DEDUCTIONS STATEMENT 3

DESCRIPTION	AMOUNT
INVESTMENT INTEREST EXP	60.
DEDUCTION - ROYALTY RELATED	16.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	76.

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 4

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/13	497.	0.	497.	497.
NOL CARRYOVER AVAILABLE THIS YEAR			497.	497.