Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 07/01/24 , and ending 06/30/25

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: **Central Carolina Community Foundation**

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): **2142 Boyce Street Suite 402**

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: **Columbia SC 29201**

D Employer identification number: **57-0793960**

E Telephone number: **803-254-5601**

G Gross receipts$ **47,506,006**

F Name and address of principal officer:
Georgia Mjartan
2142 Boyce Street, Suite 402
Columbia SC 29201

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

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

J Website: **www.yourfoundation.org**

H(c) Group exemption number

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: **1984**

M State of legal domicile: **SC**

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
See Schedule O

2 Check this box ☐ 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	26
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	17
6	Total number of volunteers (estimate if necessary)	6	26
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	33,175,971	37,217,397
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,349,279	7,864,814
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,244,422	2,044,808
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	39,769,672	47,127,019
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	21,274,340	26,452,504
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,624,720	1,693,268
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) **1,061,988**		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,873,467	576,962
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	24,772,527	28,722,734
19	Revenue less expenses. Subtract line 18 from line 12	14,997,145	18,404,285

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	229,705,133	264,303,617
21	Total liabilities (Part X, line 26)	22,450,723	25,365,157
22	Net assets or fund balances. Subtract line 21 from line 20	207,254,410	238,938,460

Part II Signature Block

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

Sign Here

Signature of officer

Date

Georgia Mjartan **President & CEO**

Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
John M Price Jr	John M Price Jr			P00100665

Firm's name: **Scott and Company, LLC** Firm's EIN:

Firm's address: **Po Box 8388 Columbia, SC 29202-8388** Phone no. **803-256-6021**

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2024)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

See Schedule O

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 ☒ 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 ☒ 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 $ 26,945,136 including grants of $ 26,452,504) (Revenue $)

See Schedule O

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

N/A

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

N/A

4d Other program services (Describe on Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses 26,945,136

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)? *If "Yes," complete Schedule A*	**1**	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	**2**	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	**3**		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? *If "Yes," complete Schedule C, Part II*	**4**		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	**5**		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? *If "Yes," complete Schedule D, Part I*	**6**	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? *If "Yes," complete Schedule D, Part II*	**7**		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	**8**		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? *If "Yes," complete Schedule D, Part IV*	**9**		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	**10**		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? *If "Yes," complete Schedule D, Part VI*	**11a**	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? *If "Yes," complete Schedule D, Part VII*	**11b**		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? *If "Yes," complete Schedule D, Part VIII*	**11c**		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? *If "Yes," complete Schedule D, Part IX*	**11d**	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	**11e**	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)? *If "Yes," complete Schedule D, Part X*	**11f**	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	**12a**	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	**12b**		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	**13**		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		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? *If "Yes," complete Schedule F, Parts I and IV*	**14b**		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? *If "Yes," complete Schedule F, Parts II and IV*	**15**		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? *If "Yes," complete Schedule F, Parts III and IV*	**16**		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? *If "Yes," complete Schedule G, Part I.* See instructions	**17**		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? *If "Yes," complete Schedule G, Part II*	**18**		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	**19**		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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*	23	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*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		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*	32		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*	33	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*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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*	35b		
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*	36		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*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O.	38	X	

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	38		
b	Enter the number of Forms W-2G included on 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?	1c			X

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

			Yes	No
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** **17**			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	**2b**	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	**3b**		
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)?	**4a**		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
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?	**6a**		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		
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?	**7a**		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		X
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		
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 on Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	**15**		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**		X
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	**17**		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	26		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	26		
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?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			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?	7a			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?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			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?	10a	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?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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?	16b		

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 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

Kevin Patten 2142 Boyce Street, Suite 402
Columbia SC 29201 803-978-7825

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Joann Turnquist	40.00									
President/CEO	0.00			X				97,817	0	4,806
(2) Georgia Mjartan	40.00									
President & CEO	0.00			X				124,624	0	7,650
(3) Kevin Patten	40.00									
Vice President - Fin	0.00			X				190,572	0	10,706
(4) Michelle Hardy	40.00									
Vice President - Adv	0.00					X		164,521	0	9,805
(5) Erin Johnson	40.00									
Vice President - Com	0.00					X		161,515	0	9,643
(6) Cory Manning	1.00									
Chair	0.00	X		X				0	0	0
(7) Scott Graves	1.00									
Vice Chair	0.00	X		X				0	0	0
(8) Derrick Williams	1.00									
Secretary-Treasurer	0.00	X		X				0	0	0
(9) Calvin H. Elam	1.00									
Immediate Past Chair	0.00	X		X				0	0	0
(10) Dr Roslyn Clark Artis	1.00									
Board Member	0.00	X						0	0	0
(11) Cliff Bourke Jr	1.00									
Board Member	0.00	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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Tushar Chikhliker	1.00									
Board Member	0.00	X						0	0	0
(13) Margaret G Clay	1.00									
Board Member	0.00	X						0	0	0
(14) Susan Kenney Cotter	1.00									
Board Member	0.00	X						0	0	0
(15) Dan D'Alberto	1.00									
Board Member	0.00	X						0	0	0
(16) Christi Epps	1.00									
Board Member	0.00	X						0	0	0
(17) Sara Fawcett	1.00									
Board Member	0.00	X						0	0	0
(18) Robert Feinstein	1.00									
Board Member	0.00	X						0	0	0
(19) Andy Folsom	1.00									
Board Member	0.00	X						0	0	0
1b Subtotal								739,049		42,610
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								739,049		42,610

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 **4**

			Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		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*	4	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*	5		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

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 **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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) Terrance Ford										
(12)	1.00									
Board Member	0.00	X						0	0	0
(21) Harriett Green										
(13)	1.00									
Board Member	0.00	X						0	0	0
(22) Charles Kahn										
(14)	1.00									
Board Member	0.00	X						0	0	0
(23) Ken May										
(15)	1.00									
Board Member	0.00	X						0	0	0
(24) Angela O'Neal										
(16)	1.00									
Board Member	0.00	X						0	0	0
(25) Rita Patel										
(17)	1.00									
Board Member	0.00	X						0	0	0
(26) Jonathan M Robinson										
(18)	1.00									
Board Member	0.00	X						0	0	0
(27) Robert R Ruff										
(19)	1.00									
Board Member	0.00	X						0	0	0
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		
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*	4		
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*	5		

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

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

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(28) Troy Simpson										
(12)	1.00									
Board Member	0.00	X						0	0	0
(29) Kevin Smith										
(13)	1.00									
Board Member	0.00	X						0	0	0
(30) Stacy S Stokes										
(14)	1.00									
Board Member	0.00	X						0	0	0
(31) Nancy D Tolson										
(15)	1.00									
Board Member	0.00	X						0	0	0
(16)										
(17)										
(18)										
(19)										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		
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*	4		
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*	5		

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

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

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	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	37,217,397				
	g Noncash contributions included in lines 1a-1f	1g	$				
	h **Total.** Add lines 1a–1f			37,217,397			
Program Service Revenue			Business Code				
	2a						
	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)			5,209,444	5,209,444		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real	(ii) Personal			
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	7a	3,034,357				
	b Less: cost or other basis and sales exps.	7b	378,987				
	c Gain or (loss)	7c	2,655,370				
	d Net gain or (loss)			2,655,370	2,655,370		
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
	11a Other Income			2,044,808	2,044,808		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d			2,044,808			
	12 **Total revenue.** See instructions			47,127,019	9,909,622	0	0

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	26,452,504	26,452,504		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	1,428,356	443,398	363,204	621,754
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,883	2,560	633	690
9 Other employee benefits	154,687	101,978	25,214	27,495
10 Payroll taxes	106,342	70,107	17,333	18,902
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	340,505	120,612	92,364	127,529
12 Advertising and promotion	59,299	21,644	14,232	23,423
13 Office expenses	169,155	61,742	40,597	66,816
14 Information technology	108,509	39,606	26,042	42,861
15 Royalties				
16 Occupancy	271,753	99,190	65,221	107,342
17 Travel	63,071	23,021	15,137	24,913
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	55,473		55,473	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a Scholarships	423		160	263
b Interagency	-491,226	-491,226		
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	28,722,734	26,945,136	715,610	1,061,988
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		5,940,822	1	2,474,591
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		396,642	4	14,349
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		33,517	9	43,051
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 544,898			
	b	Less: accumulated depreciation	10b 199,056	404,259	10c	345,842
	11	Investments—publicly traded securities		205,935,290	11	243,180,456
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		16,994,603	15	18,245,328
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		229,705,133	16	264,303,617
Liabilities	17	Accounts payable and accrued expenses		156,582	17	543,347
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties		666,667	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		21,627,474	25	24,821,810
	26	**Total liabilities.** Add lines 17 through 25		22,450,723	26	25,365,157
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		193,123,992	27	223,267,305
	28	Net assets with donor restrictions		14,130,418	28	15,671,155
		Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		207,254,410	32	238,938,460
	33	Total liabilities and net assets/fund balances		229,705,133	33	264,303,617

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	47,127,019
2	Total expenses (must equal Part IX, column (A), line 25)	2	28,722,734
3	Revenue less expenses. Subtract line 2 from line 1	3	18,404,285
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	207,254,410
5	Net unrealized gains (losses) on investments	5	13,279,765
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	238,938,460

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

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization Central Carolina Community Foundation

Employer identification number 57-0793960

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16,277,992	26,513,743	26,767,305	33,175,971	37,217,397	139,952,408
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	16,277,992	26,513,743	26,767,305	33,175,971	37,217,397	139,952,408
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)						22,532,837
6 Public support. Subtract line 5 from line 4						117,419,571

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	16,277,992	26,513,743	26,767,305	33,175,971	37,217,397	139,952,408
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	5,363,015	7,128,605	5,072,864	4,414,693	5,209,444	27,188,621
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	241,197	145,719	385,678	1,244,422	2,044,808	4,061,824
11 **Total support.** Add lines 7 through 10						171,202,853
12 Gross receipts from related activities, etc. (see instructions)					12	12,913,367

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	68.59 %
15	Public support percentage from 2023 Schedule A, Part II, line 14	15	66.64 %

16a **33 1/3% support test — 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support test — 2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10%-facts-and-circumstances test — 2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10%-facts-and-circumstances test — 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

DAA

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from **2023** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests — 2024.** 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 — 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).*

- **a** ☐ The organization satisfied the Activities Test. *Complete line 2 below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- **c** ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. *Answer lines 2a and 2b below.*			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain* how these activities directly furthered their exempt purposes, *how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. *Answer lines 3a and 3b below.*			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	**3b**		

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

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

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

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

Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D – Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4	Amounts paid to acquire exempt-use assets	**4**	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in Part VI*)	**5**	
6	Other distributions (*describe in Part VI*). See instructions.	**6**	
7	**Total annual distributions.** Add lines 1 through 6.	**7**	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in Part VI*). See instructions.	**8**	
9	Distributable amount for 2024 from Section C, line 6	**9**	
10	Line 8 amount divided by line 9 amount	**10**	

Section E – Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2024**	**(iii) Distributable Amount for 2024**
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required–*explain in Part VI*). See instructions.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in Part VI.* See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in Part VI.* See instructions.			
7	**Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

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

Part II, Line 10 - Other Income Detail

$ 4,061,824

SCHEDULE D (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Central Carolina Community Foundation

Employer identification number
57-0793960

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	252	273
2	Aggregate value of contributions to (during year)	23,940,675	14,106,737
3	Aggregate value of grants from (during year)	15,667,043	16,315,796
4	Aggregate value at end of year	140,667,009	116,274,796

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? [X] Yes [ ] 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? [X] Yes [ ] No

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

- [ ] Preservation of land for public use (for example, recreation or education)
- [ ] Preservation of a historically important land area
- [ ] Protection of natural habitat
- [ ] Preservation of a certified historic structure
- [ ] Preservation of open space

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, 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, handling of violations, and enforcing conversation easements during the year

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

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

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

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

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

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

b Assets included in Form 990, Part X $

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange program
- **e** ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

		Amount
c Beginning balance	**1c**	
d Additions during the year	**1d**	
e Distributions during the year	**1e**	
f Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

Part V Endowment Funds

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

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

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

- **a** Board designated or quasi-endowment ____ %
- **b** Permanent endowment ____ %
- **c** Term endowment ____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations?	**3a(i)**		
(ii) Related organizations?	**3a(ii)**		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		381,824	101,421	280,403
d Equipment		163,074	97,635	65,439
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				345,842

Part VII Investments – Other Securities

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

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

Part VIII Investments – Program Related

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

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

Part IX Other Assets

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

	(a) Description	(b) Book value
(1)	Interest in Unitrusts	15,503,667
(2)	Operating Lease, ROU	2,094,173
(3)	Interest in Real Estate	480,000
(4)	Interest in Life Insurance Policies	167,488
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*		18,245,328

Part X Other Liabilities

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Held as Agency Endowment	18,003,344
(3)	Due to Supporting Orgs	4,546,622
(4)	Operating Lease	2,271,844
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*		24,821,810

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	60,406,784
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	13,279,765		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	13,279,765
3	Subtract line 2e from line 1			3	47,127,019
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	47,127,019

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	28,722,734
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	28,722,734
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	28,722,734

Part XIII Supplemental Information

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

Part X - FIN 48 Footnote

Management has evaluated the Foundation's tax positions and concluded that the Foundation had taken no uncertain tax positions that required adjustment to the financial statements to comply with the provisions of this guidance.

Part XIII Supplemental Information *(continued)*

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

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? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) A Moment of Hope PO Box 12684 Columbia SC 29211	46-1260073		103,917				General Support
(2) Able South Carolina 720 Gracern Road, Suite 106 Columbia SC 29210	58-2336332		73,929				General Support
(3) AC Flora High School One Falcon Drive Columbia SC 29204	57-0925198		6,000				General Support
(4) Academic Tech and Wellness 122 E Robinson St Gaffney SC 29340	46-1048520		75,000				General Support
(5) Aldersgate Special Needs Ministry PO Box 5781 Columbia SC 29250	20-0371139		7,680				General Support
(6) Aleph House 2509 Decker Blvd Columbia SC 29206-2314	45-1196311		12,000				General Support
(7) Alianza Hispana-Hispanic Alliance PO Box 17934 Greenville SC 29606	27-1041624		50,000				General Support
(8) Allendale County Alive Inc 413 Barnwell Highway Allendale SC 29810	58-2399005		50,000				General Support
(9) Alston Wilkes Society 3519 Medical Drive Columbia SC 29203	57-0477907		5,231				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) American Heart Association PO Box 4002900 Dallas TX 752840692	13-5613797		50,675				General Support
(2) American Red Cross of Central South 2751 Bull Street Columbia SC 29201	53-0196605		182,638				General Support
(3) American Society for the Prevention PO Box 96929 Washington DC 20090	13-1623829		7,850				General Support
(4) Anderson Free Clinic 414 N Fant St Anderson SC 29621-5716	57-0787584		9,415				General Support
(5) Anderson Interfaith Ministires 1202 South Murray Avenue Anderson SC 29624	57-0896524		50,000				General Support
(6) Animal Mission PO Box 50023 Columbia SC 29250	57-0921521		22,590				General Support
(7) Animal Protection League of South PO Box 3015 West Columbia SC 29171	57-0740991		23,628				General Support
(8) Animal Rescue Carolina PO Box 210668 Columbia SC 29221	27-2412530		5,009				General Support
(9) Arise Church 227 Lincreek Drive Columbia SC 29212	38-4085474		8,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Asbury Theological Seminary 204 North Lexington Avenue Wilmore KY 40390	61-0445823		6,000				General Support
(2) Ashley Hall Foundation 172 Rutledge Avenue Charleston SC 29403	57-0314364		6,250				General Support
(3) Axis I Center of Barnwell 179 Fuldner Rd Barnwell SC 29812			50,000				General Support
(4) Babcock Center Foundation PO Box 3608 West Columbia SC 29170	57-0868290		6,236				General Support
(5) Barnwell County United Way 660 Joey Zorn Blvd Barnwell SC 29812	23-7331931		50,000				General Support
(6) Beginnings SC 437 Center Street West Columbia SC 29169	46-0605246		10,577				General Support
(7) BeLoved Asheville PO Box 6386 Asheville NC 28816	84-3381632		20,000				General Support
(8) Ben Lippen School 7401 Monticello road Columbia SC 29203	57-0352247		40,184				General Support
(9) Beth Shalom Synagogue 5827 North Trenholm Road Columbia SC 29206	57-0442208		34,174				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Beyond Housing SC 310 Millis Avenue, Suite 105 Greenville SC 29605	57-0892115		45,000				General Support
(2) Big Homie Lil Homie Mentoring 287 Bassett Loop Columbia SC 29229	81-5424806		15,865				General Support
(3) Big Red Barn Retreat 8024 Winnsboro Road Blythewood SC 29016	47-1047721		16,177				General Support
(4) Birthright of Columbia 1316 Richland Street Columbia SC 29201	57-0699621		7,292				General Support
(5) Black Creek Arts Council PO Box 24 Hartsville SC 29551	57-0066009		15,000				General Support
(6) Blackjack Baptist Church 178 Reservoir Rd Winnsboro SC 29180	58-2451982		15,000				General Support
(7) Boys & Girls Clubs of the Midlands 500 Gracern Rd, Ste. 200 Columbia SC 29210	83-1404647		19,742				General Support
(8) Boys & Girls Clubs of the Pee Dee PO Box 93 Florence SC 29503	57-6026677		10,000				General Support
(9) Boys Farm Inc PO Box 713 Newberry SC 29108	57-0446897		20,664				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Boys Home of Virginia 414 Boys Home Road Covington VA 24426	54-0505870		10,000				General Support
(2) Brain Injury Association of SC 140-A Amicks Ferry Road, Ste. 331 Pawleys Island SC 29585	57-0380356		8,086				General Support
(3) Bridge Between Animal Rescue 1681 Old Military Road Charleston SC 29412	87-4087956		10,000				General Support
(4) Brookgreen Gardens PO Box 3368 Pawleys Island SC 29585	57-0380356		40,200				General Support
(5) Bull Swamp Baptist Church Old 112 Purity Street Orangeburg SC 29116	47-5483145		5,077				General Support
(6) Butler Academy 710 S. 5th Street Hartsville SC 29550	83-1745991		100,000				General Support
(7) Butler Heritage Foundation Inc. PO Box 461 Hartsville SC 29551	57-0945822		10,000				General Support
(8) Calhoun County Library 900 F.R. Huff Drive St Matthews SC 29135	57-6000314		10,000				General Support
(9) Calhoun Traumatic Brain Injury 944 S Stadium Road Columbia SC 29208	47-1241048		15,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Camp Cole PO Box 6377 Columbia SC 29260	82-1387411		86,059				General Support
(2) Camp Discovery At His Acres 208 Claude Budrick Road Blythewood SC 29016	57-0816556		34,956				General Support
(3) Camp Rise Above PO Box 31295 Charleston SC 29417	27-0545990		10,000				General Support
(4) Campus Outreach Serve, Inc PO Box 4458 Houston TX 77210	46-2662312		10,000				General Support
(5) Cancer of Many Colors Inc 100 Old Cherokee Road, STE. F-339 Lexington SC 29072	46-4151271		19,231				General Support
(6) Cardinal Newman School 2945 Alpine Road Columbia SC 29223	57-0419733		37,525				General Support
(7) CARE House of Pee Dee 1920 2nd Loop Rd Florence SC 29501	20-3852301		50,000				General Support
(8) Caring and Sharing, Inc. PO Box 910 Hemingway SC 29554	58-2317638		10,000				General Support
(9) Carolina Cares 525 Jacobs Mill Pond Rd Elgin SC 29405	93-4200773		458,167				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Carolina Therapeutic Riding, Inc PO Box 61139 Columbia SC 29206	87-2276635		17,725				General Support
(2) Carolina Wildlife Care, Inc 5551 Bush River Road Columbia SC 29212	57-0932809		24,750				General Support
(3) Carolinas Credit Union Foundation PO Box 1787 Columbia SC 29202	56-1842095		8,000				General Support
(4) Cathedral of St John the Baptist 120 Broad St Charleston SC 29401	57-0426378		15,000				General Support
(5) Catholic Charities of South Carolin 1427 Pickens Street Columbia SC 29201	57-0314369		51,565				General Support
(6) Cecil Williams South Carolina Civil 1865 Lake Drive Orangeburg SC 29115	83-3458558		31,088				General Support
(7) Center for Developmental Services 29 N. Academy St Greenville SC 29601	57-0988275		16,500				General Support
(8) Central Midlands Justice Ministry 709 Gabriel St Columbia SC 29203	81-4740696		41,474				General Support
(9) Central South Carolina Habitat for 1831 Superior St Columbia SC 29205	57-0785521		6,829				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Chabad-Lubavitch of South Carolina 2509 Decker Blvd Columbia SC 29206	57-0841922		13,000				General Support
(2) Chapin Baptist Church PO Box 640 Chapin SC 29036	57-0568967		62,500				General Support
(3) Chapin Community Theatre PO Box 360 Chapin SC 29036	20-3431391		11,901				General Support
(4) Chapin We Care Center 1800 Chapin Road Chapin SC 29036	31-1744064		43,431				General Support
(5) Charleston Animal Society 2455 Remount Road North Charleston SC 29406	57-6021863		15,000				General Support
(6) Charleston Jazz 16 Wendy Lane Charleston SC 29407	83-0504523		30,000				General Support
(7) Charleston Library Society 164 King Street Charleston SC 29401	57-0314372		76,065				General Support
(8) Charleston Symphony Orchestra PO Box 30818 Charleston SC 29417	57-6000192		25,000				General Support
(9) Charlotte Rescue Mission PO Box 33000 Charlotte NC 28233	56-0571223		70,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Cherokee County Meals on Wheels PO Box 1886 Gaffney SC 29342	57-0773044		25,500				General Support
(2) Child Evangelism Fellowship PO Box 245 Orangeburg SC 29116	57-0567186		8,015				General Support
(3) Children's Cancer Partners of the 900 S Pine Street, Ste F Spartanburg SC 29302	20-2511033		46,458				General Support
(4) Children's Trust of South Carolina 1330 Lady Street, Suite 310 Columbia SC 29201	57-0785431		6,817				General Support
(5) Christian Assistance Bridge PO Box 1026 Blythewood SC 29016	46-3717165		9,766				General Support
(6) Christian Study Center at the 1711 Pendleton St Columbia SC 29201	83-4301124		10,358				General Support
(7) Church of Christ 2855 Columbia Road Orangeburg SC 29118	57-6070694		60,000				General Support
(8) City of Camden 1000 Lyttleton St Camden SC 29020	57-6000224		100,000				General Support
(9) City Year Columbia 1122 Lady Street, Ste 600 Columbia SC 29201	22-2882549		14,459				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Claflin University 400 Magnolia Street Orangeburg SC 29115	57-0314374		26,249				General Support
(2) Clemson University G-01 Sikes Hall, Box 245123 Clemson SC 29634	57-6000254		125,318				General Support
(3) Clemson University Foundation PO Box 1889 Clemson SC 29633	57-0426335		49,750				General Support
(4) Cliffs Residents Outreach, Inc 635 Garden Market Travelers Rest SC 29690	26-0715022		25,000				General Support
(5) Coastal Community Foundation 1691 Turnbull Ave North Charleston SC 29405	23-7390313		50,000				General Support
(6) Coins for Alzheimer's Research PO Box 1916 Sumter SC 29151	31-1466051		5,523				General Support
(7) Coker University 300 East College Avenue Hartsville SC 29550	57-0324916		255,250				General Support
(8) Cola Rose Shower 1297 W Highway 324 Rock Hill SC 29730	92-3072595		11,500				General Support
(9) Cola Town Bike Collective 711 Elmwood Avenue Columbia SC 29201	47-1691710		16,596				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ColaJazz Foundation 2123 College Street Columbia SC 29201	84-2847862		38,230				General Support
(2) College of Charleston 66 George Street Charleston SC 29424	57-6000265		13,400				General Support
(3) Columbia College 1301 Columbia College Drive Columbia SC 29203	57-0324915		45,260				General Support
(4) Columbia Film Society PO Box 7063 Columbia SC 29202	57-0686025		6,285				General Support
(5) Columbia Garden Club Foundation PO Box 5925 Columbia SC 29250	57-0756773		8,300				General Support
(6) Columbia Green PO Box 50191 Columbia SC 29250	57-0768951		52,713				General Support
(7) Columbia Jewish Fedearation PO Box 25739 Columbia SC 29223	57-0704341		20,142				General Support
(8) Columbia Opportunity Resource PO Box 1868 Columbia SC 29202	20-3414821		5,921				General Support
(9) Columbia Stage Society 1012 Sumter Street Columbia SC 29201	57-6000280		12,277				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Columbia University School of Arts 305 Dodge Hall, MC 1803 New York NY 10027	13-5598093		11,000				General Support
(2) Columbia Urban League Inc 1400 Barnwell Street Columbia SC 29201	57-0482767		14,365				General Support
(3) Communities in Schools of South 500 Gracern Road Columbia SC 29210	57-0931840		5,717				General Support
(4) Community Foundation of the 1340 13th St, The Village on 13th Columbus GA 31901	58-2381589		10,000				General Support
(5) Community Initiatives, Inc 201-203 Church Ave Greenwood SC 29646	31-1741660		136,500				General Support
(6) Compassion International Inc 12290 Voyage Parkway Colorado Springs CO 80921	36-2423707		155,280				General Support
(7) Congaree Land Trust PO Box 5232 Columbia SC 29250	57-0937485		19,241				General Support
(8) Congaree Riverkeeper PO Box 5294 Columbia SC 29250	26-4193711		6,948				General Support
(9) Connie Maxwell Children's 810 Maxwell Ave Greenwood SC 29646	57-0324927		25,500				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Conquer Paralysis Now 701 E Bridger Avenue, Suite 150 Las Vegas NV 89101	43-1878305		50,000				General Support
(2) Conservation Voters of South PO Box 1766 Columbia SC 29202	20-0335383		56,848				General Support
(3) Consolidated School District of 1000 Brookhaven Drive Aiken SC 29803	57-6000300		6,000				General Support
(4) Countryside Cares Inc 1850 N McMullen Booth Rd Clearwater FL 33759	46-2399940		10,000				General Support
(5) Covenant Presbyterian Church 1000 East Morehead St Charlotte NC 28204	56-1855739		20,000				General Support
(6) Crossover Global 7520 Monticello Road Columbia SC 29203	58-1758477		15,500				General Support
(7) Crosswell Home for Children 11 Crosswell Dr Sumter SC 29150	57-0329783		33,041				General Support
(8) CRU PO Box 628222 Orlando FL 32862	95-6006173		19,500				General Support
(9) Cypress Adventures, Inc PO Box 405 Hartsville SC 29551	47-3749701		156,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Dahlia Grove 4321 Woodglen Ln Charlotte NC 28226	81-4184758		15,000				General Support
(2) Darlington County Institute of 160 Pinedale Dr Darlington SC 29532	57-6000341		8,500				General Support
(3) Darlington County Progress Inc PO Box 1163 Hartsville SC 29551	57-0846199		10,000				General Support
(4) Daybreak Inc 1601 St Julian Place Columbia SC 29204	57-0760670		5,265				General Support
(5) Defenders of Wildlife 1130 17th Street NW Wasington DC 20036	53-0183181		6,280				General Support
(6) Delta House Inc 5307 Fairfield Road Columbia SC 29203	57-0948093		6,239				General Support
(7) Denmark Cares 91 Wisteria Street Denmark SC 29042	84-2548584		10,000				General Support
(8) Dickerson Childrens Advocacy Center 140 Gibson Road Lexington SC 29072	57-1011251		9,205				General Support
(9) Downtown Church 2030 Gregg St Columbia SC 29201	45-5444017		31,871				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Dream Catchers Foundation 211 Overhill Ct Lexington SC 29073	82-0734774		10,000				General Support
(2) Dream Riders 156 Sandy Hill Road Lexington SC 29072	57-1079606		22,252				General Support
(3) Dyslexia Resource Center 628 Muller Avenue Columbia SC 29203	58-2302947		53,000				General Support
(4) E.A.R.N. the Right 240 Big Game Loop Columbia SC 29229	83-2807257		10,000				General Support
(5) E4E Relief LLC PO Box 896796 Charlotte NC 28289	87-3137387		300,000				General Support
(6) East Cooper Meals on Wheels PO Box 583 Mt Pleasant SC 29465	57-0804618		10,000				General Support
(7) Eastminster Presbyterian Church 3200 Trenholm Road Columbia SC 29204	57-0370001		258,053				General Support
(8) Edgefield County Youth PO Box 224 Johnston SC 29832	68-0655851		20,000				General Support
(9) Elkins/Randolph County YMCA 400 Davis Avenue Elkins WV 26241	55-0376877		25,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Emma's Diaper Boutique 109 Gallivan Drive Columbia SC 29229	82-4361122		5,949				General Support
(2) Emmanuwheel PO Box 1626 Lexington SC 29071	27-2111013		37,649				General Support
(3) Emmaus Road Partners PO Box 11578 Columbia SC 29211	32-0567621		14,000				General Support
(4) EMS Closet 2827 Wheat St Columbia SC 29205	87-4682459		6,360				General Support
(5) Epworth Children's Home PO Box 50466 Columbia SC 29250	57-0314389		29,807				General Support
(6) ETV Endowment of South Carolina 401 E Kennedy Street Ste B-1 Spartanburg SC 29302	57-0657549		40,600				General Support
(7) Evolving Door Theatre Company 308 Delaine Woods Dr Irmo SC 29063	85-1533150		15,750				General Support
(8) Ezekiel Center Inc PO Box 30281 Columbia SC 29230	46-5632252		129,885				General Support
(9) Fact Forward 1331 Elmwood Avenue, Ste 300 Columbia SC 29201	57-0897120		6,346				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Fairfield Community Coordinating PO Box 83 Columbia SC 29180	20-5763223		50,100				General Support
(2) Fairfield County School District PO Box 605 Winnsboro SC 29180-0605	38-4033238		48,500				General Support
(3) Fairfield County First Steps PO Box 215 Winnsboro SC 29180	57-1097810		5,442				General Support
(4) Family First Inc 5509 W Gray St Suite 100 Tampa FL 33609	59-3043408		25,000				General Support
(5) Family Promise of the Midlands Inc 1333 Omarest Drive Columbia SC 29210	26-4259689		31,360				General Support
(6) FEAST, Inc 2255 Nebraska Ave Palm Harbor FL 34683	59-2981961		10,000				General Support
(7) Feeding Tampa Bay 3624 Causeway Blvd Tampa Bay FL 33619	59-2116576		10,000				General Support
(8) Feeding the Carolinas 6255 Towncenter Dr, Ste 803 Clemmons NC 27012	27-3181126		773,833				General Support
(9) Fellowship of Christian Athletes PO Box 12657 Columbia SC 29211	44-0610626		41,413				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Feral Cat Solutions of Chapin, Inc PO Box 922 Chapin SC 29036	47-4237471		15,000				General Support
(2) Fidelity Charitable 1100 Crosby Pkwy, Covington KY 41015-4325	11-0303001		98,884				General Support
(3) Final Victory Animal Rescue, Inc 810 Byron Road Columbia SC 29205	82-1744847		28,189				General Support
(4) First Baptist Church 1306 Hampton Street Columbia SC 29201	57-0324921		5,400				General Support
(5) First Impression of South Carolina 15 Grand Ave Greenville SC 29607	82-3774191		25,000				General Support
(6) First Presbyterian Church 1324 Marion Street Columbia SC 29201	57-0314437		232,256				General Support
(7) First Presbyterian Church 1500 Lady Street Columbia SC 29201	57-1031104		26,484				General Support
(8) Florence-Darlington Technical PO Box 100548 Florence SC 29502-0548	57-0679802		50,000				General Support
(9) Food Bank of Greenwood County PO Box 604 Greenwood SC 29648	57-0775160		45,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) For the Love of a Paw PO Box 3 Elloree SC 29047	47-5661631		5,519				General Support
(2) Forge 14485 East Evans Avenue Aurora CO 80014	31-1191922		44,000				General Support
(3) Fort Lawn Community Center Inc PO Box 103 Fort Laws SC 29714	31-1611139		25,000				General Support
(4) Francis Burns UMC Freedom School 5616 Farrow Road Columbia SC 29203	57-0761537		5,100				General Support
(5) Francis Marion University PO Box 100547 Florence SC 29502	57-0522624		8,650				General Support
(6) Francis Marion University PO Box 100547 Florence SC 29502	23-7432174		10,000				General Support
(7) Fraternal Order of Police of Seneca PO Box 506 Elkins WV 26241	55-0633974		25,000				General Support
(8) Free Medical Clinic of Newberry PO Box 783 Newberry SC 29108	20-0390941		40,825				General Support
(9) Friiends of African American Art & 1515 Main Street Columbia SC 29201	57-6007869		66,993				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Gamecock Club 1304 Heyward St Columbia SC 29208	93-3994323		261,666				General Support
(2) Gilbert Community Club PO Box 62 Gilbert SC 29054	57-0737727		32,500				General Support
(3) Girl Get Up Society 961 Roberts Branch Parkway, Ste 106 Columbia SC 29203	86-1179860		59,647				General Support
(4) Girl Scouts of South Carolina 1107 Williams Street Columbia SC 29201	57-0314433		10,443				General Support
(5) GiveWell 1714 Franklin Street #100335 Oakland CA 94612	20-8625442		19,000				General Support
(6) Glenforest School 1041 Harbor Drive West Columbia SC 29169	57-0982351		64,937				General Support
(7) Global Compact Network USA, Inc 685 Third Avenue, 12th Floor New York NY 10017-8409	47-1590003		20,000				General Support
(8) Global Outreach International PO Box One Tupelo MS 38802	48-1256219		73,000				General Support
(9) Golden Harvest Food Bank 81 Capital Drive Aiken SC 29803	58-1466516		52,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GOODSTOCK Consulting LLC PO Box 80504 Charleston SC 29416	83-0755270		46,250				General Support
(2) GRASP PO Box 424 Great Falls SC 29055	57-0753423		20,000				General Support
(3) Greater Greenwood United Ministry 1404 Edgefield Street Greenwood SC 29646	57-1012393		25,000				General Support
(4) Greenville Family Partnership 850 S. Pleasantburg Dr, STE 202 Greenville SC 29607	57-0783373		50,000				General Support
(5) Greer Relief and Resources Agency PO Box 1303 Greer SC 29652	57-0370331		50,000				General Support
(6) Habitat for Humanity South Carolina PO Box 1990 Mount Pleasant SC 29465	46-0980402		766,500				General Support
(7) Haggai International 4725 Peachtree Corners Circle Peachtree Corners GA 30092	58-0898309		6,000				General Support
(8) Haiti Under God Inc 1414 Lady Street Columbia SC 29201	56-2375686		8,099				General Support
(9) Hammond School 854 Galway Lane Columbia SC 29209	57-0477924		28,404				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Happy Wheels Inc 133 Dupre Mill Court Lexington SC 29072	45-3147494		27,440				General Support
(2) Harriet Hancock Center Foundation 1108 Woodrow Street Columbia SC 29205	57-0836466		14,454				General Support
(3) Hartsville High School 701 Lewellyn Drive Hartsville SC 29550	58-1988235		6,750				General Support
(4) Harvest Hope Food Bank 2220 Shop Road Columbia SC 29201	57-0725560		144,777				General Support
(5) HDLeader 9585 Harford Court Highlands Ranch CO 80126	46-1040285		15,000				General Support
(6) Health Foundation of Kershaw County 2004 West DeKalb Street Camden SC 29020	57-0900155		20,820				General Support
(7) Healthy Learners 2711 Middleburg Drive, Suite 304 Columbia SC 29204	57-1127197		58,035				General Support
(8) Heartworks Ministry Inc PO Box 4476 Columbia SC 29240	57-1119456		29,025				General Support
(9) Heathwood Hall Episcopal School 3000 South Beltline Blvd Columbia SC 29201	57-0358065		413,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Hero Homeschool Group 431 Mission Ct Irmo SC 29063-2378	85-0663321		9,648				General Support
(2) Historic Columbia Foundation 1601 Richland Street Columbia SC 29201	57-6020250		34,153				General Support
(3) Holy Innocents Episcopal School 805 Mt Vernon Highway NW Atlanta GA 30327	58-1120296		6,800				General Support
(4) Home Works of America Inc 3823 West Beltline Blvd Columbia SC 29204	56-2027026		282,335				General Support
(5) Homeless No More Inc 2411 Two Notch Road Columbia SC 29204	57-0898981		121,339				General Support
(6) Homes of Hope 3 Dunean St Greenville SC 29611	57-1069688		50,500				General Support
(7) Homeward Bound Pet Rescue PO Box 4335 Irmo SC 29063	27-2693717		9,328				General Support
(8) Hoof and Paw Benevolent Society PO Box 168 Blythewood SC 29016	45-4287583		14,351				General Support
(9) HOPE Missions of Upstate PO Box 4326 Anderson SC 29622	85-2752663		32,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Hope Unlimited for Children Inc 3130 Alpine Road, Ste 288-125 Portola Valley CA 94028	33-0480141		20,000				General Support
(2) Hopeful Horizons PO Box 1775 Beaufort SC 29901	57-1063332		7,000				General Support
(3) Humane Society for the Prevention 405 Greenlawn Drive Columbia SC 29209	57-0407367		41,366				General Support
(4) Humane Society of Marlboro County 242 Ag Street Bennetsville SC 29512	58-2360360		10,000				General Support
(5) I Like Giving 5550 Tech Center Drive, Suite 303 Springs CO 80919	32-0348113		522,000				General Support
(6) Inclusive Theatre Co of SC PO Box 2853 Columbia SC 29202	57-0522276		61,474				General Support
(7) Indian Waters Council Boy Scouts Of 715 Betsy Drive Columbia SC 29210	57-0314440		35,817				General Support
(8) International African American PO Box 22761 Charleston SC 29413	20-3398254		100,000				General Support
(9) Ironman Outdoors Ministries Inc 2331 Mueller Rd Blythewood SC 29016	20-8796367		40,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Island Dolphin Care 150 Loreland Place Key Largo FL 33037	65-0728047		10,000				General Support
(2) IT-ology Foundation 808 Lady St, Ste D-1 Columbia SC 29201	47-4933659		20,000				General Support
(3) Ivy Heritage Foundation of Irmo 7320 Broad River Road Irmo SC 29063	46-3853892		10,730				General Support
(4) Jeffrey & Harriett Lampkin 15 S Main St Sumter SC 29150-5244	81-2812490		6,167				General Support
(5) Jerusalem Methodist Church PO Box 366 Elloree SC 29047-0366	57-0760439		15,500				General Support
(6) Jewish Educational Loan Fund 6065 Roswell Rd, Ste 740 Sandy Springs GA 30328	58-0568686		7,000				General Support
(7) Jordan Thomas Foundation Inc 9005 Overlook Blvd, #742 Brentwood TN 37027	20-3498598		7,500				General Support
(8) Junior Achievement of Greater SC 2711 Middleburg Drive, Ste 301 Columbia SC 29204	57-0511131		16,808				General Support
(9) Justice 360 900 Elmwood Avenue, Ste 200 Columbia SC 29201	57-0873224		12,662				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Justin Pepper House PO Box 122 Chapin SC 29036	47-4592906		12,507				General Support
(2) Katie & Irwin Kahn Jewish Community 306 Flora Drive Columbia SC 29223	57-0369507		151,045				General Support
(3) Keep the Midlands Beautiful 1305 Augusta Road West Columbia SC 29169	57-0888246		9,284				General Support
(4) Kershaw Area Resource Exchange PO Box 364 Kershaw SC 29067	57-0789419		10,000				General Support
(5) Kershaw County Humane Society 128 Black River Road Camden SC 29020	23-7080463		27,809				General Support
(6) Kindred Hearts SC PO Box 290154 Columbia SC 29229	83-4643335		6,992				General Support
(7) Koger Center for the Arts 1051 Greene St Columbia SC 29208	57-6017985		1,144,436				General Support
(8) Lander Univesity 320 Stanley Ave Greenwood SC 29649	57-0559320		13,650				General Support
(9) Landmarks for Families 5055 Lackawanna Blvd North Charleston SC 29405-4529	57-0669877		50,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Latino Communications CDC 1805 Clemson Rd #292021 Columbia SC 29229	27-0291442		61,446				General Support
(2) Laurens Cemetery Association PO Box 21 Laurens SC 29360	51-0196849		7,785				General Support
(3) LaVie Pregancy Care Center 1271 Calks Ferry Rd Lexington SC 29072	38-4081036		7,604				General Support
(4) Leeza's Care Connection 201 St Andrews Road Columbia SC 29210	56-2356697		11,418				General Support
(5) Leukemia & Lymphoma Society PO Box 22443 New York NY 100872443	13-5644916		24,750				General Support
(6) Lexington Medical Center Foundation 2720 Sunset Boulevard West Columbia SC 29169	57-0906045		47,655				General Support
(7) Lexington Richland Alcohol and Drug PO Box 50597 Columbia SC 29250	57-0510076		6,800				General Support
(8) Liberty STEAM Charter School 15 School Street Sumter SC 29150	84-3663677		47,285				General Support
(9) Lifeline Children's Services 200 Missionary Ridge, Ste 200 Birmingham AL 35242	63-0896878		10,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Lighthouse for Life 7320 Broad River Road, Ste K #247 Irmo SC 29063	47-0969132		41,600				General Support
(2) Lighthouse Ministries PO Box 6801 Florence SC 29502	57-1053570		50,000				General Support
(3) Lions Vision Services 234-C Outlet Point Blvd Columbia SC 29210	23-7105526		72,344				General Support
(4) Live Oak Counseling Center 600 King Street Columbia SC 29205	57-0943691		216,592				General Support
(5) Livewell Greenville 770 Pelham Rd, Ste 204 Greenville SC 29615	81-1376760		50,000				General Support
(6) Lowcountry Autism Foundation 10 Pickney Colony Rd Bluffton SC 29909	26-0805420		10,000				General Support
(7) Lowcountry Food Bank 2864 Azalea Dr Charleston SC 29405	57-0751835		20,000				General Support
(8) Lowcountry Orphan Relief PO Box 70185 North Charleston SC 29415	26-1108081		11,684				General Support
(9) LRADAC Foundation 2711 Colonial Drive Columbia SC 29203	45-3949534		5,692				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Lutheran Church of Our Savior 2600 Wade Hampton Blvd Greenville SC 29615	57-0427943		10,000				General Support
(2) Lutheran Family Services 1118 Union Street Columbia SC 29201	56-1286323		72,137				General Support
(3) Lynn Brown Inspires 203 Hookston Way Irmo SC 29063	83-2907407		11,641				General Support
(4) Made with Cola Love 1501 Richland St Columbia SC 29201	93-2143804		50,000				General Support
(5) Madelyn's Fund 7804 Fairview Road PMB #259 Charlotte NC 28207	82-3577117		10,000				General Support
(6) Make a Wish Foundation SC 225 South Pleasantburg Dr, Ste C17 Greenville SC 29607	57-0786119		10,000				General Support
(7) March of Dimes 4711 Forest Drive, Ste 3 #134 Columbia SC 29206	13-1846366		10,000				General Support
(8) Meals on Wheels of Greenville 15 Oregon St Greenville SC 29605-1748	57-0531378		25,000				General Support
(9) Medical Benevolence Foundation 12946 Dairy Ashford Rd, Ste 230 Sugar Land TX 77478	62-6046138		13,122				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Medical University of SC 1 South Park Circle, Bldg 1 Charleston SC 29407	57-6000722		7,000				General Support
(2) Medical University of SC Foundation 59 Bee Street MSC 201 Charleston SC 29425	57-6028985		86,530				General Support
(3) MedNeed of SC 121 Oak Lane Cayce SC 29033	90-0340073		39,500				General Support
(4) Mental Illness Recovery Center, Inc PO Box 4246 Columbia SC 29240	57-0984185		35,349				General Support
(5) Midlands Housing Alliance 2025 Main Street Columbia SC 29201	20-3524141		181,796				General Support
(6) Midlands Technical College 6 Powers Court Hopkins SC 29061	57-0427788		45,050				General Support
(7) Mill Village Ministries 1186 Pendleton St Greenville SC 29611	90-0854058		75,000				General Support
(8) Ministry of Outreach to Slavic PO Box 1839 Columbia SC 29202	57-1133976		38,505				General Support
(9) Miss South Carolina Scholarship PO Box 297 Hartsville SC 29551	27-3688727		58,836				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Mission Lexington 216 Harmon Street Lexington SC 29072	57-0813856		24,154				General Support
(2) Mission to the World PO Box 744165 Atlanta GA 30374-4165	58-2325982		28,500				General Support
(3) Montessori School of Columbia 411 South Maple Street Columbia SC 29205	57-0760592		10,454				General Support
(4) Montreat Conference Center PO Box 969 Montreat NC 28757	56-0532142		45,000				General Support
(5) Mountaineer Food Bank 484 Enterprise Drive Gassaway WV 26624	55-0611100		300,000				General Support
(6) Mt. Horeb Church, Inc 1205 Old Cherokee Road Lexington SC 29072	93-1864953		29,500				General Support
(7) Mud Creek Baptist Church 403 Rutledge Dr Hendersonville NC 28739	56-1242194		9,800				General Support
(8) My Amigos Bilingual Education 132 Saint David Church Rd West Columbia SC 29170	36-4631695		51,019				General Support
(9) Nashville YoungLives PO Box 120681 Nashville TN 37212	84-0385934		220,165				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) National Philanthropic Trust 165 Township Line Rd, Ste 1200 Jenkintown PA 19046	23-7825575		1,148,402				General Support
(2) National Veteran Business 901 Wilshire Dr, Ste 255 Troy MI 48084	46-2033413		10,000				General Support
(3) New Destiny Center Inc PO Box 1018 Ridgeland SC 29936	26-1640743		11,250				General Support
(4) New Morning Foundation 1501 Main Street, Ste 150 Columbia SC 29201	95-4894776		1,476,261				General Support
(5) Newberry County Humane PO Box 485 Newberry SC 29108	57-0824051		10,163				General Support
(6) Newberry County Literacy Council 1208 Main St Newberry SC 29108	57-0877749		5,142				General Support
(7) Newberry Opera House Foundation 1201 McKibben Street Newberry SC 29108	57-0964360		30,742				General Support
(8) Next Level Lifestyles 1715 Hwy 72 221 E Greenwood SC 29649	83-1779751		10,000				General Support
(9) North Carolina A&T University 1601 East Market Street Greensboro NC 27411	56-6000007		11,800				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) North Carolina Central University PO Box 19713 Durham NC 27707	56-6000730		5,600				General Support
(2) Northern West Virginia Center for 109 Randolph Avenue Elkins WV 26241	55-0724177		12,000				General Support
(3) Oconee Christian Academy 150 His Way Seneca SC 29672	57-0978451		7,916				General Support
(4) Oliver Gospel Mission PO Box 7697 Columbia SC 29202	57-6027750		153,633				General Support
(5) One Columbia for Arts and History 1219 Taylor Street Columbia SC 29201	90-0784318		178,999				General Support
(6) OneWorld Health 21 D Gamecock Ave Charleston SC 29407	26-3717278		24,000				General Support
(7) Orangeburg Calhoun Technical 3250 St Matthews Rd Orangeburg SC 29118	57-0657914		13,740				General Support
(8) Orangeburg County Community of PO Box 593 Orangeburg SC 29116	05-0536718		7,301				General Support
(9) Orangeburg County Fine Arts Center PO Box 2106 Orangeburg SC 29116	57-0776091		7,819				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Orangeburg Preparatory School 2651 North Rd Orangeburg SC 29118	57-0788617		6,000				General Support
(2) Original Design 4711 Forest Dr Columbia SC 29206	86-2391812		102,014				General Support
(3) Our Place of Hope PO Box 213007 Columbia SC 29221	84-1829518		37,340				General Support
(4) Palmetto Animal Assisted Life 221 N Grampian Hills Road Columbia SC 29223	20-8666026		38,290				General Support
(5) Palmetto Conservation Foundation 722 King Street Columbia SC 29205	57-0907043		37,870				General Support
(6) Palmetto Place Children and Youth PO Box 3395 Columbia SC 29230	57-6029097		12,593				General Support
(7) Palmetto Project Inc 4500 Fort Jackson Blvd, Suite 150 Columbia SC 29204	57-0807801		28,519				General Support
(8) Palmetto State Military History 301 Gervais St Columbia SC 29201	27-1239818		21,200				General Support
(9) Pawleys Island Community Church 10304 Ocean Hwy Pawleys Island SC 29585	57-0756928		7,500				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Pawmetto Lifeline 1275 Bower Parkway Columbia SC 29212	56-2146419		12,830				General Support
(2) Pee Dee Land Trust 448 West Cheves St Florence SC 29501	57-1075947		30,711				General Support
(3) Pets Inc PO Box 6394 West Columbia SC 29171	57-0950870		18,852				General Support
(4) Phillips- Amik Foundation for 113 Smith Hines Road, Ste E Greenville SC 29607	83-2095748		260,000				General Support
(5) Piedmont Agency on Aging PO Box 997 Greenwood SC 29648	57-0524221		25,000				General Support
(6) Pilot Club of Columbia 8208 Hunt Club Rd Columbia SC 29223	57-6021502		18,105				General Support
(7) Planned Parenthood South Atlantic 2712 Middleburg Drive, Suite 107 Columbia SC 29204	56-1282557		8,753				General Support
(8) Power in Changing 2638 Two Notch Road, Suite 116 Columbia SC 29204	47-5060596		79,288				General Support
(9) Presbyterian College 503 South Broad Street Clinton SC 29325	57-0314408		243,250				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Prisma Health Medical Group 3555 Harden Street Ext, Suite 141 Columbia SC 29201	47-1345819		32,300				General Support
(2) Prisma Health Midlands Foundation 1600 Marion Street Columbia SC 29201	57-0725699		45,015				General Support
(3) Programs for Exceptional People 39 Sheridan Park Circle, Ste 2 Bluffton SC 29910	57-1036680		10,000				General Support
(4) Providence Day School 5800 Sardis Rd Charlotte NC 28270	56-0952382		6,000				General Support
(5) Providence Home PO Box 3188 Columbia SC 29201	57-0618585		26,490				General Support
(6) Providence Presbyterian Church 1112 Hummingbird Drive West Columbia SC 29169	57-0482567		7,500				General Support
(7) PULSE of NY Inc PO Box 353 Wantagh NY 11793	11-3549476		10,000				General Support
(8) Quaker Cemetery Association PO Box 788 Camden SC 29021	57-0372815		12,000				General Support
(9) Quixote Foundation 100 N Main Street Sumter SC 29150	85-0997197		10,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Radius Church 300 West Main Street Lexington SC 29072	20-2164772		131,000				General Support
(2) Rainy Day Fund 1601 Assembly St Columbia SC 29202	85-4106379		7,166				General Support
(3) Randolph College 2500 Rivermont Ave Lynchburg VA 24503	54-0505941		10,000				General Support
(4) Randolph County Humane Society PO Box 785 Elkins WV 26241	55-0691720		10,000				General Support
(5) Reading Partners South Carolina 7410 NOrthside Dr, Ste 120 North Charleston SC 29420	77-0568469		9,777				General Support
(6) Real Champions Inc PO Box 669 Ridgeland SC 29936	81-3956956		250,000				General Support
(7) Reconciliation Ministries SC 1141 St Andrews Road Columbia SC 29210	26-0067588		11,427				General Support
(8) Reformed University Fellowship Intl PO Box 890004 Charlotte NC 28289	58-1713181		12,231				General Support
(9) Richland County First Steps 1800 St Julian Place, Ste 406 Columbia SC 29204	57-1097865		6,509				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Richland County Public Education PO Box 50860 Columbia SC 29250	46-1300396		21,989				General Support
(2) Richland County Public Library 1431 Assembly St Columbia SC 29201	57-6000396		25,000				General Support
(3) Richland County Recreation 7473 Parklane Road Columbia SC 29223	30-0217851		7,800				General Support
(4) Richland Library Friends and Fdn 1431 Assembly Street Columbia SC 29201	57-0758497		19,972				General Support
(5) Richland School District Two Fdn 124 Risdon Way Columbia SC 29223	57-1106644		14,100				General Support
(6) Rio Chiquito MIssion Network 101 Terrapin Trace W Columbia SC 29229	87-3174144		10,000				General Support
(7) Riverbanks Society PO Box 1060 Columbia SC 29202	23-7278668		21,507				General Support
(8) Rivers Edge Retreat 1019 Garden Valley Lane Columbia SC 29210	26-2972281		35,963				General Support
(9) Ronald McDonald House Charities 2901 Colonial Drive Columbia SC 29203	57-0725736		22,882				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Rotary International- Elkins PO Box 546 Elkins WV 26241	55-6024083		25,000				General Support
(2) Saint Andrew's Lutheran Church 1416 Broad River Road Columbia SC 29210	57-0971395		7,200				General Support
(3) Samaritans Purse PO Box 3000 Boone NC 28607	58-1437002		64,550				General Support
(4) Sandhills School 1500 Hallbrook Drive Columbia SC 29209	57-0532678		29,271				General Support
(5) Saving Saluda Strays 436 WIlson Rd Newberry SC 29108	92-0830217		8,000				General Support
(6) SC Junior Golf Foundation PO Box 286 Irmo SC 29063	57-1021847		60,335				General Support
(7) SC School for the Deaf and the 355 Cedar Springs Road Spartanburg SC 29302	57-0693592		16,677				General Support
(8) SC State Guard Mission & PO Box 38 Columbia SC 29201	83-2580573		70,000				General Support
(9) SC Thrive PO Box 23503 Columbia SC 29224	90-1011409		55,356				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) School Ministries 101 Rice Bent Way, Ste 6 Columbia SC 29229	57-0942086		101,388				General Support
(2) Second Saturday PO Box 423 Ballentine SC 29002	92-0762078		50,000				General Support
(3) Selden K Smith Holocaust Education 18 Glenlake Road Columbia SC 29223	84-4179534		5,848				General Support
(4) Senior Centers of Cherokee County 499 W Rutledge Ave Gaffney SC 29341	57-0619799		10,000				General Support
(5) Senior Resources Inc 2817 Millwood Avenue Columbia SC 29205	57-0484965		97,139				General Support
(6) Serve & Connect PO Box 6840 Columbia SC 29260	81-1369953		33,905				General Support
(7) Seth's Giving Tree 3344 Greystone Dr Lancaster SC 29720	45-3751449		150,223				General Support
(8) Shandon Baptist Church 5250 Forest Drive Columbia SC 29206	57-0341196		399,500				General Support
(9) Shandon Presbyterian Church 607 Woodrow St Columbia SC 29205	57-0381975		28,500				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Sharing God's Love Inc 147 Friarsgate Bvld Irmo SC 29063	57-0815818		8,350				General Support
(2) Shiloh Project- Lift Inc PO Box 3118 Sumter SC 29080	84-3046191		6,100				General Support
(3) Sistercare Inc PO Box 1029 Columbia SC 29202	57-0722427		33,160				General Support
(4) Slater Marietta Health and Human PO Box 246 Slater SC 29683	57-0823752		50,000				General Support
(5) Smith Medical Clinic 90 Baskervill Dr Pawleys Island SC 29585	57-0786699		10,000				General Support
(6) Smyrna Presbyterian Church 32 Smyrna Rd Newberry SC 29108	57-0443091		30,000				General Support
(7) South Carolina Appleseed Legal PO Box 7187 Columbia SC 29202	57-1035023		9,746				General Support
(8) South Carolina Ballet 1545 Main St Columbia SC 29201	23-7133145		5,995				General Support
(9) South Carolina Center for Fathers 2711 Middleburg Drive, Ste 111 Columbia SC 29204	36-4506347		51,439				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) South Carolina Citizens for Life PO Box 5865 Columbia SC 29250	57-0657406		12,455				General Support
(2) South Carolina Council on Comp 1411 Gervais Street, Ste 450 Columbia SC 29201	20-1690146		50,000				General Support
(3) South Carolina Department of PO Box 167 Columbia SC 29202	57-6000286		286,500				General Support
(4) South Carolina Environmental Law PO Box 1380 Pawleys Island SC 29585	57-1031430		27,622				General Support
(5) South Carolina Governor's School 2711 Middleburg Dr Columbia SC 29204	57-0881347		20,000				General Support
(6) South Carolina Greenhouse Growers' 4661 Crystal Drive Columbia SC 29206	57-0868432		6,700				General Support
(7) South Carolina Humanities Council PO Box 5287 Columbia SC 29250	57-0804684		7,800				General Support
(8) South Carolina Independent Colleges PO Box 12007 Columbia SC 29211	57-0343998		43,000				General Support
(9) South Carolina Institute of Medicin 1301 Gervais St Columbia SC 29201	32-0350642		20,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) South Carolina Law Enforcement 2501 Heyward St Columbia SC 29205	57-1063879		10,935				General Support
(2) South Carolina Legal Services 2109 Bul St Columbia SC 29201	57-0485205		60,594				General Support
(3) South Carolina Lutheran Retreat 6053 Two Notch Rd Batesburg-Leesville SC 29070	57-0855630		6,021				General Support
(4) South Carolina Philharmonic 1704 Main Street, Ste 100 Columbia SC 29201	57-0742901		67,292				General Support
(5) South Carolina Railroad Museum Inc PO Box 7246 Columbia SC 29202	57-0830457		5,946				General Support
(6) South Carolina State Museum Fdn 301 Gervais Street Columbia SC 29201	57-0713243		17,744				General Support
(7) South Carolina State University PO Box 7187 Orangeburg SC 29117	23-7113930		5,030				General Support
(8) South Carolina Wildlife Federation 455 Saint Andrews Rd, Ste B1 Columbia SC 29210	57-0602549		8,592				General Support
(9) South Carolina Women in Leadership PO Box 214 Columbia SC 29202	47-4116299		57,894				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) South Carolina Youth Advocate Pgrm 140 Stoneridge Drive, Ste 350 Columbia SC 29210	34-1652048		10,470				General Support
(2) Southern Interscholastic Press Asn 800 Sumter Street Columbia SC 29208	57-0902917		9,810				General Support
(3) SPCA Albrecht Center For Animal 199 Willow Run Road Aiken SC 29801	57-0329782		23,100				General Support
(4) Special Olympics South Carolina 204 Palmetto Park Blvd Lexington SC 29072	57-0680248		39,042				General Support
(5) St Anastasia Catholic Church 5205 A1A S St Augustine FL 32080	59-3236619		18,000				General Support
(6) St John Neumann Catholic School 721 Polo Road Columbia SC 29223	57-0812070		15,416				General Support
(7) St John's Episcopal Church 2827 Wheat Street Columbia SC 29205	57-0314412		11,500				General Support
(8) St Joseph Catholic School 3700 Devine Street Columbia SC 29205	57-0379950		27,101				General Support
(9) St Lukes Free Medical Clinic PO Box 3466 Spartanburg SC 29304	57-0943232		30,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) St Peter's Catholic School 1035 Hampton Street Columbia SC 29201	57-1002093		38,004				General Support
(2) St Thomas Lutheran Church 215 St Thomas Church Road Chapin SC 29036	57-0751202		7,868				General Support
(3) St Thomas More 1610 Greene Street Columbia SC 29201	57-0872523		35,975				General Support
(4) Star Athletics Cheer Parent 14 Carl Cedar Hill Rd Winder GA 30680	85-2544659		6,000				General Support
(5) Star Gospel Mission 474 Meeting St Charleston SC 29403	57-6025786		12,500				General Support
(6) Stormwater 413 Pendleton St Columbia SC 29201	87-2728597		14,617				General Support
(7) Successteam Foundation for Youth PO Box 86 Montmorenci SC 29839	82-1831059		10,000				General Support
(8) Sumter County Gallery of Art PO Box 1316 Sumter SC 29151	23-7130803		41,733				General Support
(9) Sumter Museum 122 N Washington St Sumter SC 29150	57-0891753		27,905				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Sumter United Ministries PO Box 1017 Sumter SC 29151	57-0988602		53,810				General Support
(2) Sunset Felines Inc 105 Peaceful Lane West Columbia SC 29170	27-3936900		8,862				General Support
(3) Sustaining Way 5 Stonehedge Dr Greenville SC 29615	45-4887679		50,000				General Support
(4) Suzuki Academy of Columbia PO Box 564 Columbia SC 29202	82-3052418		5,215				General Support
(5) Syracuse University 200 Bowne Hall Syracuse NY 13244	15-0532081		7,700				General Support
(6) Tampa Bay Network to End Hunger 4532 W Kennedy Blvd Tampa FL 33609	36-4758155		10,000				General Support
(7) Temple Sinai 13 Church Street Sumter SC 29151	57-0441116		38,357				General Support
(8) The Belle W Baruch Foundation 27 Hobcaw Rd Georgetown SC 29440	57-0564080		11,500				General Support
(9) The Brookland Foundation PO Box 2026 Columbia SC 29202	57-0994150		9,017				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) The Center for Birds of Prey PO Box 1247 Charleson SC 29402	57-0966813		35,000				General Support
(2) The Community Foundation of 4 Vanderbilt Park Dr Asheville NC 28803	56-1223384		30,200				General Support
(3) The Community Kitchen of Myrtle PO Box 563 Myrtle Beach SC 29578	57-0965358		10,000				General Support
(4) The Cooperative Ministry 3821 West Beltline Blvd Columbia SC 29204	57-0825025		44,938				General Support
(5) The Door Home Inc PO Box 1032 Irmo SC 29063	92-2620069		6,051				General Support
(6) The Ernest A Finney Jr Cultural PO Box 193 Columbia SC 29204	87-2065209		9,243				General Support
(7) The Ferguson Meditation Garden PO Box 1338 Laurens SC 29360	01-0606438		7,785				General Support
(8) The Free Medical Clinic Inc PO Box 4616 Columbia SC 292404616	57-0779279		13,350				General Support
(9) The FriendShip 2827 Wheat Street Columbia SC 29205	46-4035107		12,018				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) The Hive Community Circle 4704 Colonial Drive Columbia SC 29203	47-0992295		32,836				General Support
(2) The Humane Society of the US 1255 23rd Street NW, Ste 450 Washington DC 20037	53-0225390		7,850				General Support
(3) The Jewish Federations of North Ame 25 Broadway, Ste 1700 New York NY 10004	13-1624240		18,027				General Support
(4) The Nature Conservancy 1417 Stuart Engals Blvd, Ste 100 Mt Pleasant SC 29464	53-0242652		5,590				General Support
(5) The North Eastern Strategic Allianc PO Box 100547 Florence SC 29502	30-0128034		10,000				General Support
(6) The Nurturing Center 1332 Pickens Street Columbia SC 29201	57-0875498		93,200				General Support
(7) The Period Project 413 Wilton Street Greenville SC 29609	47-5144792		44,354				General Support
(8) The Regents of the Univ of MI 3003 South State Street, Ste 9000 Ann Arbor MI 48109-1288	38-6006309		40,900				General Support
(9) The Salvation Army of Cherokee PO Box 2087 Gaffney SC 29342	58-0660607		63,407				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) The Samaritan House of Orangeburg PO Box 2392 Orangeburg SC 29116	57-1112777		17,253				General Support
(2) The Schechter Institutes Inc Box #3566, PO Box 8500 Philadelphia PA 19178	22-3342043		10,000				General Support
(3) The Shepherd's Center of St Andrews 2600 Ashland Road Columbia SC 29210	57-0882659		10,298				General Support
(4) The Sumter Little Theatre 14 Mood Avenue Sumter SC 29150	57-6028314		7,000				General Support
(5) The Therapy Place 3620 Covenant Road Columbia SC 29204	26-2197304		77,079				General Support
(6) The Trust for Public Land PO Box 889336 Los Angeles CA 90088-9336	23-7222333		6,280				General Support
(7) The Unumb Center for Neurodevelop PO Box 7514 Columbia SC 29202	27-3190242		14,289				General Support
(8) The Women's Shelter 3425 North Main Street Columbia SC 29203	57-0934329		7,723				General Support
(9) Together SC PO Box 12903 Columbia SC 29211	57-1057398		17,550				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Trac Support 2691 Wedgefield Road Sumter SC 29154	82-5480926		37,557				General Support
(2) Tranquility Point 70 Nye Drive Cross Hill SC 29332	87-3580477		12,500				General Support
(3) Travelers Rest Farmers Market PO Box 608 Travelers Rest SC 29690	46-4822158		18,000				General Support
(4) Trees Greenville Inc 660 Mauldin Rd Greenville SC 29607	16-1718587		50,000				General Support
(5) Trenholm Road United Methodist 3401 Trenholm Rd Columbia SC 29204	57-1087595		1,372,094				General Support
(6) Trent Hill Center for Children & 522 W Bobo Newsome Highway Hartsville SC 29550	47-5630788		12,500				General Support
(7) Trinity Episcopal Cathedral 1100 Sumter Street Columbia SC 29201	57-0314419		21,998				General Support
(8) Trinity Presbyterian Church 975 Willington Road Orangeburg SC 29118	57-0827261		15,000				General Support
(9) Troop Appreciation Fishing Fund PO Box 876 Chapin SC 29036	81-3104561		5,369				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Trustus Theatre 520 Lady Street Columbia SC 29201	57-0804610		9,577				General Support
(2) Truth Chapel PO Box 790 Loganville GA 30052	45-5509156		50,000				General Support
(3) Turn90 630 Blue Ridge Terrace Columbia SC 29203	46-0671501		50,214				General Support
(4) TyJasKey Academic Enrichment 205 Stafford Road Columbia SC 29223	04-3845791		6,317				General Support
(5) United Way of Hartsville PO Box 756 Hartsville SC 29551	23-7125629		9,793				General Support
(6) United for Baby 9 Jonquil Court Elgin SC 29045	87-3012050		57,192				General Support
(7) United Negro College Fund Inc Pee Dee Area, PO Box 2503 Florence SC 29503	13-1624241		10,000				General Support
(8) United States Association of Blind 1 Olympic Plaza Colorado Springs CO 80909	31-0977121		35,000				General Support
(9) United Way of Aiken County PO Box 699 Aiken SC 29802	57-0360086		55,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) United Way of Anderson County PO Box 2067 Anderson SC 29622	57-0510602		50,000				General Support
(2) United Way of Florence County 1621 West Palmetto Street Florence SC 29501	57-0368721		14,110				General Support
(3) United Way of Horry County Inc 761 Century Circle Conway SC 29526	57-0558692		7,000				General Support
(4) United Way of Laurens County PO Box 544 Clinton SC 29325	23-7011064		40,000				General Support
(5) United Way of Oconee County PO Box 1693 Seneca SC 29679	57-0479292		50,000				General Support
(6) United Way of Pickens County PO Box 96 Easley SC 29641	57-0476249		50,000				General Support
(7) United Way of the Lakelands 929 Phoenix St Greenwood SC 29646	57-6005943		25,000				General Support
(8) United Way of the Midlands 1818 Blanding Street Columbia SC 29201	57-0314396		327,501				General Support
(9) United Way of the Piedmont PO Box 5624 Spartanburg SC 29304	57-0314377		50,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Unity Health on Main 505C North Main St Greenville SC 29601	81-1080067		50,000				General Support
(2) University of Iowa Center for PO Box 4550 Iowa City IA 52244	42-0796760		6,000				General Support
(3) University of South Carolina 1 University Blvd Bluffton SC 29909	57-6001153		219,715				General Support
(4) Upstate Family Resource Center 340 Blalock Road Boiling Springs SC 29316	06-1806404		50,500				General Support
(5) VALEO 7520 Monticello Road Columbia SC 29203	52-1863010		6,848				General Support
(6) Vietnam Veterans of America Inc PO Box 467 Elkins WV 26241	55-0763911		25,000				General Support
(7) Village Presbyterian Church 13115 S Village Dr Tampa FL 33618	59-1582660		10,000				General Support
(8) Virginia Union University 1500 N Lombardy St Richmond VA 23220	54-0524516		7,900				General Support
(9) Vision to Learn 12100 Wilshire Blvd Los Angeles CA 90025	45-3457853		10,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Voterheads LLC 105 High Pointe Dr Blythewood SC 29016	92-1377431		40,000				General Support
(2) WarriorWOD Foundation 4176 Home Town Ln Ravenel SC 29470	87-1065126		10,000				General Support
(3) Water Mission 1150 Molly Greene Way North Charleston SC 29405	57-1116978		206,000				General Support
(4) Wilson Hall School 520 Wilson Hall Road Sumter SC 29150	57-0485507		8,600				General Support
(5) Wofford College 124 War Admiral Dr West Columbia SC 29170	57-0314422		70,500				General Support
(6) Women's Rights and Empowerment Net 1201 Main Street, Ste 1820 Columbia SC 29201	81-0775184		168,092				General Support
(7) Yeshiva University PO Box 21801 New York NY 10087	13-1624225		15,000				General Support
(8) YMCA of Columbia 1612 Marion Street, Ste 100 Columbia SC 29201	57-0314423		7,543				General Support
(9) YMCA of the Upper Pee Dee 111 East Carolina Avenue Hartsville SC 29550	57-0794011		75,000				General Support

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

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

SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Youth Corps PO Box 211126 Columbia SC 29221	33-1111258		41,969				General Support
(2) YWCA of the Upper Lowlands 246 Church St Sumter SC 29150	57-0443375		5,075				General Support
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							

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

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

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						

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 - Procedures for Monitoring the Use of Grant Funds
For all grants that are not general support, the Foundation requires signed agreements, written reports and verbal feedback on the progress and use of the grant dollars.

SCHEDULE J
(Form 990)
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Central Carolina Community Foundation**

Employer identification number **57-0793960**

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? **2**		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
	☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☐ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? **4a**		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**		X
c	Participate in or receive payment from an equity-based compensation arrangement? **4c**		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? **5a**		X
b	Any related organization? **5b**		X
	If "Yes" on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? **6a**		X
b	Any related organization? **6b**		X
	If "Yes" on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7**		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**		

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

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

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

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
	Kevin Patten	(i)	178,047	12,525	0	10,706	0	201,278	0
1	Vice President - Fin	(ii)	0	0	0	0	0	0	0
	Michelle Hardy	(i)	156,856	7,665	0	9,805	0	174,326	0
2	Vice President - Adv	(ii)	0	0	0	0	0	0	0
	Erin Johnson	(i)	153,915	7,600	0	9,643	0	171,158	0
3	Vice President - Com	(ii)	0	0	0	0	0	0	0
4		(i)							
		(ii)							
5		(i)							
		(ii)							
6		(i)							
		(ii)							
7		(i)							
		(ii)							
8		(i)							
		(ii)							
9		(i)							
		(ii)							
10		(i)							
		(ii)							
11		(i)							
		(ii)							
12		(i)							
		(ii)							
13		(i)							
		(ii)							
14		(i)							
		(ii)							
15		(i)							
		(ii)							
16		(i)							
		(ii)							

Part III Supplemental Information

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

SCHEDULE O (Form 990) (Rev. December 2024)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to *www.irs.gov/Form990* for instructions and the latest information.	Open to Public Inspection

Name of the organization	Employer identification number
Central Carolina Community Foundation	57-0793960

Form 990 - Organization's Mission or Most Significant Activities
Central Carolina Community Foundation connects and mobilizes people and resources to strengthen communities across the Midlands of South Carolina and beyond by promoting charitable giving, managing philanthropic funds, awarding grants and scholarships, and addressing critical community needs.

Form 990 - Organization's Mission
Central Carolina Community Foundation is a nonprofit community foundation that connects and mobilizes people and resources to strengthen the Midlands of South Carolina. The Foundation partners with donors, nonprofit organizations, businesses, and community leaders to increase charitable giving, invest in community priorities, and create lasting impact through grantmaking, scholarships, charitable fund management, and collaborative leadership initiatives. The Foundation also leads statewide philanthropic initiatives including the One SC Fund, the statewide philanthropic response to natural disasters.

Form 990, Part III, Line 4a - First Accomplishment
Central Carolina Community Foundation awarded grants to nonprofit organizations and community initiatives in its 11-county service area of the Midlands of South Carolina, statewide, and nationally.

Grantmaking supported a broad range of charitable purposes, including education, human services, health, arts and culture, community development, and disaster relief, including in response to Hurricane Helene. The Foundation administers competitive grant programs, donor-advised grantmaking, designated funds, agency endowments, field-of-interest funds, and scholarship programs designed to address current and emerging community needs.

The Foundation also convened nonprofit leaders, funders, and community stakeholders to foster collaboration and create a vibrant and engaged community where generosity abounds and all people thrive.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
Before filing, the Form 990 was reviewed by senior management and distributed to the Board of Trustees.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
The Foundation maintains a written conflict of interest policy applicable to trustees, officers, and employees. Covered individuals are required to annually disclose potential conflicts of interest and affirm compliance with the policy. Potential conflicts are reviewed by appropriate leadership and, when necessary, by the Board of Trustees or applicable committee. Individuals with a conflict are recused from discussions and voting related to the matter under consideration.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
Compensation for the President & CEO is reviewed and approved by independent members of the Board of Trustees using appropriate

comparability data, market information, and performance considerations. The process and decisions are documented.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
The Foundation makes its governing documents, conflict of interest policy, audited financial statements, and Form 990 available to the public upon request and through its website, as applicable.

SCHEDULE R (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: **Central Carolina Community Foundation**

Employer identification number: **57-0793960**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CCCF Re Holdings (Tram NW), LLC 2142 Boyce St, Suite 402 Columbia SC 29201	Real Est	SC			CCCF
(2) CCCF Re Holdings (Tram SW), LLC 2142 Boyce St, Suite 402 Columbia SC 29201	Real Est	SC			CCCF
(3)					
(4)					
(5)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1)							
(2)							
(3)							
(4)							
(5)							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispro-portionate alloc.? Yes	(h) Dispro-portionate alloc.? No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) General or managing partner? No	(k) Percentage ownership
(1)												
(2)												
(3)												
(4)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) Section 512(b)(13) controlled entity? No
(1)									
(2)									
(3)									
(4)									

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

		Yes	No
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?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)	1b		
c Gift, grant, or capital contribution from related organization(s)	1c		
d Loans or loan guarantees to or for related organization(s)	1d		
e Loans or loan guarantees by related organization(s)	1e		
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	1i		
j Lease of facilities, equipment, or other assets to related organization(s)	1j		
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o Sharing of paid employees with related organization(s)	1o		
p Reimbursement paid to related organization(s) for expenses	1p		
q Reimbursement paid by related organization(s) for expenses	1q		
r Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

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)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Part VII **Supplemental Information.**
Provide additional information for responses to questions on Schedule R. See instructions.

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
	$ 340,505	$ 120,612	$ 92,364	$ 127,529
Total	$ 340,505	$ 120,612	$ 92,364	$ 127,529

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
	$ 37,217,397
Total	$ 37,217,397

Schedule A, Part II, Line 12 - Current year

Description	Amount
Taxable Dividends and Interest from Securities	$ 5,209,444
Other Income	2,044,808
Total	$ 7,254,252