Enclosed are the original and one copy of the 2018 Exempt Organization return, as follows...

2018 Form 990

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by November 15, 2019.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Elliott Davis, LLC/PLLC
TAX RETURN FILING INSTRUCTIONS
FORM 990

FOR THE YEAR ENDING
June 30, 2019

Prepared For:

Lowcountry Land Trust, Inc.
635 Rutledge Ave No. 107
Charleston, SC  29403

Prepared By:

Elliott Davis, LLC/PLLC
100 Calhoun Street, Suite 300
Charleston, SC  29401

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us as soon as possible

Mail a copy of 2018 Form 990 for SC Secretary of State on or before November 15, 2019:

Office of the Secretary of State
Public Charities Division
1205 Pendleton Street, Suite 525
Columbia, SC 29201
**IRS e-file Signature Authorization for an Exempt Organization**

For calendar year 2018, or fiscal year beginning **JUL 1**, 2018, and ending **JUN 30**, 2019

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

---

**Name of exempt organization**

**LOWCOUNTRY LAND TRUST, INC.**

57-0809313

**Employer identification number**

**DAVID MAYBANK III**

**CHAIRMAN OF THE BOARD OF TRUSTEES**

---

**Part I**  Type of Return and Return Information  (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below.

- **1a** Form 990 check here  
  - **b** Total revenue, if any (Form 990, Part VIII, column (A), line 12)  
  - **1b** 1,963,124.

- **2a** Form 990-EZ check here  
  - **b** Total revenue, if any (Form 990-EZ, line 9)  
  - **2b**

- **3a** Form 1120-POL check here  
  - **b** Total tax (Form 1120-POL, line 22)  
  - **3b**

- **4a** Form 990-PF check here  
  - **b** Tax based on investment income (Form 990-PF, Part VI, line 5)  
  - **4b**

- **5a** Form 8856 check here  
  - **b** Balance Due (Form 8868, line 3c)  
  - **5b**

---

**Part II**  Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I authorize the aforementioned ERO to enter my PIN as my signature on the organization's tax year 2018 electronically filed return and, if applicable, the organization's consent to electronic funds withdrawal.

**Officer’s PIN: check one box only**

- [X] I authorize  **ELLIOTT DAVIS, LLC/PLLC**  to enter my PIN  
  - **71483**
  - **Enter five numbers, but do not enter all zeros**

  as my signature on the organization’s tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

- [ ] As an officer of the organization, I will enter my PIN as my signature on the organization’s tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return’s disclosure consent screen.

**Officer’s signature**  

[Signature]  

**Date**  

Nov 15, 2019

---

**Part III**  Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

- **57298229401**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of  **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

**ERO’s signature**  

[Signature]  

**Date**  

11/15/19

---

**ERO Must Retain This Form - See Instructions**

**Do Not Submit This Form to the IRS Unless Requested To Do So**

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**LHA**  For Paperwork Reduction Act Notice, see instructions.

10191115 792811 33681  2018.05000 LOWCOUNTRY LAND TRUST, IN 33681__1
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.

A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JUN 30, 2019

B Name of organization

LOWCOUNTRY LAND TRUST, INC.

C Employer identification number

57-0809313

D Name and address of principal officer

DAVID MAYBANK, III
SAME AS C ABOVE

E Telephone number

843-577-6510

F Fax number

G Gross receipts

2,936,920.

H(a) Is this a group return for subordinates?

Yes [X] No [ ]

H(b) Are all subordinates included?

Yes [X] No [ ]

I Tax-exempt status:

501(c)(3) 501(c) ( )

J Website

WWW.LOWCOUNTRYLANDTRUST.ORG

K Form of organization:

[ ] Corporation  [ ] Association  [ ] Trust  [ ] Other

L Year of formation: 1985

M State of legal domicile: SC

Part I Summary

1 Briefly describe the organization’s mission or most significant activities:

PROTECTING IRREPLACEABLE LOWCOUNTRY LANDS INCLUDING WORKING FARMS AND FORESTS, SCENIC VISTAS,

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)

18

4 Number of independent voting members of the governing body (Part VI, line 1b)

18

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

20

6 Total number of volunteers (estimate if necessary)

773

7a Total unrelated business revenue from Part VIII, column (C), line 12

0.

7b Net unrelated business taxable income from Form 990-T, line 38

0.

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

438,433.

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

98,008.

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

1,447,703.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

0.

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)

1,057,797.

16a Professional fundraising fees (Part IX, column (A), line 11e)

0.

16b Total fundraising expenses (Part IX, column (D), line 25)

383,181.

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

749,627.

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

1,807,424.

19 Revenue less expenses. Subtract line 18 from line 12

-359,721.

20 Total assets (Part X, line 16)

22,918,076.

21 Total liabilities (Part X, line 26)

7,780,004.

22 Net assets or fund balances. Subtract line 21 from line 20

15,138,072.

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

DAVID MAYBANK, III, CHAIRMAN OF THE BOARD OF TRUSTEES

Type or print name and title

BRANDON T. RENAUD

Preparer’s signature

Preparer’s EIN

PTIN

Firm’s name

ELLIOTT DAVIS, PLLC

Firm’s EIN

57-0381582

Firm’s address

100 CALHOUN STREET, SUITE 300

Charleston, SC 29401

Phone no. (843) 577-7040

May the IRS discuss this return with the preparer shown above? (see instructions)

[ ] Yes [X] No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
Part III - Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission:

TO HONOR THE RELATIONSHIP BETWEEN PEOPLE AND LAND BY PROTECTING IRREPLACEABLE LOWCOUNTRY LANDS INCLUDING WORKING FARMS AND FORESTS, SCENIC VISTAS, RELATIVELY NATURAL HABITATS AND HISTORIC LANDSCAPES USING BOTH ESTABLISHED AND INNOVATIVE CONSERVATION APPROACHES. FROM

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 $ 411,141. including grants of $ ______) (Revenue $ 56,770.)

   LAND PROTECTION:

   DURING FY19, THE LOWCOUNTRY LAND TRUST (LLT) COMPLETED 5 NEW CONSERVATION EASEMENT PROJECTS AND 1 CONSERVATION EASEMENT AMENDMENT TO ADD ACREAGE, FOR A TOTAL OF 4,835 NEWLY PROTECTED ACRES. THIS BRINGS LLT'S TOTAL PROTECTED ACREAGE TO 144,992 ACRES AS OF JUNE 30, 2019. THIS FY19 ACREAGE TOTAL INCLUDES THE 1,712-ACRE DRIFTWOOD PLANTATION CONSERVATION EASEMENT, WHICH HAS NOT PREVIOUSLY BEEN COUNTED IN LLT'S ACREAGE. THAT EASEMENT CONTAINS A PROVISION THAT STATES THAT IF THE GRANTEE (THE NATURE CONSERVANCY, OR "TNC") ENTERS INTO FEE TITLE OWNERSHIP OF THE PROPERTY, "ALL RIGHTS AND PRIVILEGES OF ENFORCEMENT OF THE [EASEMENT TERMS] SHALL BE HELD BY BOTH GRANTEE AND BY THE LOWCOUNTRY OPEN LAND TRUST [NOW KNOWN AS LOWCOUNTRY LAND TRUST]." THIS

   4b (Code: ______) (Expenses $ 545,000. including grants of $ ______) (Revenue $ 1,010.)

   STEWARDSHIP:

   IN THE 2018 CALENDAR YEAR, LLT MONITORED 100% OF ITS PROTECTED PROPERTIES (CONSERVATION EASEMENTS, DEED RESTRICTIONS AND FEE-OWNED) BY ON-THE-GROUND MONITORING. LLT SUPPLEMENTED SEVERAL MONITORING VISITS WITH ADDITIONAL AERIAL MONITORING. FOR THE FISCAL YEAR JULY 1, 2018 JUNE 30, 2019, LLT CLOSED TWO AMENDMENTS TO EXISTING CONSERVATION EASEMENTS- ONE TO ADD ACREAGE AND ONE TO CLARIFY AND REDUCE RESERVED RIGHTS.

   LLT CONTINUES TO MEET AS MANY LANDOWNERS AS POSSIBLE ON MONITORING VISITS TO ESTABLISH DEEP WORKING RELATIONSHIPS AND PROVIDE APPROPRIATE EDUCATION MATERIALS RELATED TO MANAGEMENT. THE ORGANIZATION INCREASED

   4c (Code: ______) (Expenses $ 90,596. including grants of $ ______) (Revenue $ 36,250.)

   OUTREACH/COMMUNICATIONS:

   IN FY19, LLT HELD FOUR SIGNATURE DONOR EVENTS, INCLUDING THE ANNUAL SPRING PICNIC, SOUL OF THE LOWCOUNTRY OYSTER ROAST, FARM TO TABLE DINNER, AND LONGLIFEB SOCIETY CELEBRATION. MORE THAN 840 GUESTS ATTENDED THESE EVENTS. EACH EVENT WAS HELD ON A SPECIAL PROTECTED PROPERTY, WHICH SHOWCASED THE LAND TRUST'S WORK AND VALUES. IN FY19, WE CONTINUED ROBUST SOUL OF THE LOWCOUNTRY OUTREACH AND EDUCATIONAL PROGRAMMING. IN COORDINATION WITH OTHER COMMUNITY PARTNERS, LLT PRODUCED 17 VOLUNTEER EVENTS, ENGAGING OVER 770 VOLUNTEERS THAT DONATED OVER 2,020 HOURS OF WORK TO SUPPORT LLT. THESE EVENTS INCLUDE EIGHT LIVING SHORELINE OYSTER REEF BUILDS, THREE OYSTER SHELL BAGGING AND RECYCLING EVENTS, FIVE LITTER AND MARSH SWEEPS, AND ONE TRAIL MAINTENANCE DAY AT ROSEBROCK

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

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

   4e Total program service expenses $ 1,046,737.
**Part IV Checklist of Required Schedules**

<table>
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<th>Yes</th>
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</table>

**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**

Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? **If Yes, complete Schedule C, Part III**

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**

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**

Did the organization maintain collections of works of art, historical treasures, or other similar assets? **If Yes, complete Schedule D, Part III**

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**

Did the organization report the sum of lines 1 through 6, and line 11e? **If Yes, complete Schedule D, Part V**

If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? **If Yes, complete Schedule D, Part VI**
- 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**
- 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**
- 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**
- Did the organization report an amount for other liabilities in Part X, line 25? **If Yes, complete Schedule D, Part X**
- 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**
- Did the organization obtain separate, independent audited financial statements for the tax year? **If Yes, complete Schedule D, Parts XI and XII**
- Did the organization's financial statements include a footnote addressing the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? **If Yes, complete Schedule D, Part XI**

- Was the 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**

Is the organization a school described in section 170(b)(1)(A)(ii)? **If Yes, complete Schedule E**

Did the organization maintain an office, employees, or agents outside of the United States? **If Yes, complete Schedule F, Parts I and IV**

Did the organization report the sum of lines 1 through 6, and line 11e? **If Yes, complete Schedule F, Parts II and IV**

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**

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**

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**

Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? **If Yes, complete Schedule G, Part II**

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**

Did the organization operate one or more hospital facilities? **If Yes, complete Schedule H**

Did the organization receive a grant or other assistance or make a contribution to any domestic organization or governmental organization on Part IX, column (A), line 7? **If Yes, complete Schedule I, Parts I and II**
### Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule I, Parts I and III.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>23. Did the organization answer &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule J.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24c. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24d. Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>25b. If the organization is 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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If &quot;Yes,&quot; complete Schedule L, Part II.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>27. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If &quot;Yes,&quot; complete Schedule L, Part III.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>28. Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. A current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. A family member of a current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c. An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>29. Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>30. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>31. Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>32. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>34. Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35a. Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>35b. 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>36. Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part VI</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>38. Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

### 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.

- 1a. Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable. (X)
- 1b. Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable. (0)
- 1c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? (X)
Part V  Statements Regarding Other IRS Filings and Tax Compliance (continued)

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.  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>20</td>
</tr>
</tbody>
</table>

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  

Note.  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td>X</td>
</tr>
</tbody>
</table>

b If "Yes," has it filed a Form 990-T for this year?  If "No" to line 3b, provide an explanation in Schedule O  

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)?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>X</td>
</tr>
</tbody>
</table>

b If "Yes," enter the name of the foreign country:  


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5a</td>
<td>X</td>
</tr>
</tbody>
</table>

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5c</td>
<td>X</td>
</tr>
</tbody>
</table>

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?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a</td>
<td>X</td>
</tr>
</tbody>
</table>

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  

7 Organizations that may receive deductible contributions under section 170(c).  

d If "Yes," indicate the number of Forms 8282 filed during the year  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>7d</td>
<td></td>
</tr>
</tbody>
</table>

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>7e</td>
<td>X</td>
</tr>
</tbody>
</table>

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>7f</td>
<td>X</td>
</tr>
</tbody>
</table>

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  

8 Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

9 Sponsoring organizations maintaining donor advised funds.  

a Did the sponsoring organization make any taxable distributions under section 4966?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td></td>
</tr>
</tbody>
</table>

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  

10 Section 501(c)(7) organizations. Enter:  

a Initiation fees and capital contributions included on Part VIII, line 12  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td></td>
</tr>
</tbody>
</table>

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10b</td>
<td></td>
</tr>
</tbody>
</table>

11 Section 501(c)(12) organizations. Enter:  

g Gross income from members or shareholders  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
</tr>
</tbody>
</table>

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11b</td>
<td></td>
</tr>
</tbody>
</table>

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12a</td>
<td></td>
</tr>
</tbody>
</table>

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12b</td>
<td></td>
</tr>
</tbody>
</table>

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.  

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  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>13b</td>
<td></td>
</tr>
</tbody>
</table>

c Enter the amount of reserves on hand  

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>13c</td>
<td></td>
</tr>
</tbody>
</table>

14a Did the organization receive any payments for indoor tanning services during the tax year?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>14a</td>
<td>X</td>
</tr>
</tbody>
</table>

b If "Yes," has it filed a Form 720 to report these payments?  If "No," provide an explanation in Schedule O  

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?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>X</td>
</tr>
</tbody>
</table>

If "Yes," see instructions and file Form 4720, Schedule N.  

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.
### Part VI Governance, Management, and Disclosure

**Section A. Governing Body and Management**

<table>
<thead>
<tr>
<th>1a</th>
<th>Enter the number of voting members of the governing body at the end of the tax year</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b</td>
<td>Enter the number of voting members included in line 1a, above, who are independent</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

2. Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 

3. Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 

4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 

5. Did the organization become aware during the year of a significant diversion of the organization's assets? 

6. Did the organization have members or stockholders? 

7. 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? 

8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
   - The governing body? 
   - Each committee with authority to act on behalf of the governing body? 

9. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (explain in Schedule O).

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

10a. Did the organization have local chapters, branches, or affiliates? 

   b. If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 

11a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 

   b. Describe in Schedule O the process, if any, used by the organization to review this Form 990. 

12a. Did the organization have a written conflict of interest policy? If "No," go to line 13

   b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

   c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.

13. Did the organization have a written whistleblower policy? 

14. Did the organization have a written document retention and destruction policy? 

15. Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

   a. The organization's CEO, Executive Director, or top management official 

   b. Other officers or key employees of the organization 

   If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 

   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? 

**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) only) available for public inspection. Indicate how you made these available. Check all that apply.

   - Own website
   - Another's website
   - Upon request
   - Other (explain in Schedule O)

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

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

   MEGAN RAMSEY - 843-410-0672

   635 RUTLEDGE AVE., SUITE 107, CHARLESTON, SC 29403
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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.
- List all of the organization’s current key employees, if any. See instructions for definition of “key employee.”
- List the organization’s five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MR. BOB BALDWIN</td>
<td>3.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TREASURER</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DR. W. MAC BAUGHMAN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) DR. WALTER BLESSING, JR</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) MRS. AMANDA DAVIS</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) MR. J. STANFIELD GRAY</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) MR. THOMAS D. W. HUTTO</td>
<td>3.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SECRETARY</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) MRS. ELEANOR MOORE KUHL</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) DR. ANN G. KULZE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) MR. DAVID MAYBANK III</td>
<td>3.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD CHAIR</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) MR. BURNIE MAYBANK III</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) MR. LINDSAY NEVIN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) MR. TELFAIR PARKER</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) MR. ROBERT DANIEL PERRY</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) MR. JOSHUA B. RAGLIN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) MR. RANDELL C. STONEY, III</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16) MR. G. TRENHOLM WALKER</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) MR. R. SCOTT WALLINGER</td>
<td>3.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Position</th>
<th>(C) Average hours per week</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>MR. EUGENE H. WALPOLE, IV TRUSTEE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>ASHLEY DEMOSTHENES CHIEF EXECUTIVE OFFICER</td>
<td>40.00</td>
<td>X</td>
<td>126,875.</td>
<td>0.</td>
<td>13,790.</td>
</tr>
</tbody>
</table>

1b Sub-total | ▶ | 126,875. | 0. | 13,790. |
1c Total from continuation sheets to Part VII, Section A | ▶ | 0. | 0. | 0. |
1d Total (add lines 1b and 1c) | ▶ | 126,875. | 0. | 13,790. |

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

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

### 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

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 VIII Statement of Revenue

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f $</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total, Add lines 1a-1f $</td>
<td></td>
<td></td>
<td></td>
<td>$1,251,558.</td>
</tr>
<tr>
<td>2 a TRANSFER FEES</td>
<td>900099</td>
<td>56,770.</td>
<td>56,770.</td>
<td></td>
</tr>
<tr>
<td>b EDUCATIONAL EVENTS</td>
<td>900099</td>
<td>36,250.</td>
<td>36,250.</td>
<td></td>
</tr>
<tr>
<td>c MERCHANDISE SALES</td>
<td>900099</td>
<td>1,010.</td>
<td>1,010.</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total, Add lines 2a-2f $</td>
<td></td>
<td></td>
<td></td>
<td>94,030.</td>
</tr>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
<td>290,293.</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
<td>290,293.</td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 a Gross rents</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td>27,307.</td>
</tr>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
<td>1,234,502.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost or other basis and sales expenses</td>
<td>953,051.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td>281,451.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td>281,451.</td>
</tr>
<tr>
<td>8 a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
<td>8,485.</td>
</tr>
<tr>
<td>9 a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 a MISCELLANEOUS INCOME</td>
<td>900099</td>
<td>10,000.</td>
<td>10,000.</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total, Add lines 11a-11d $</td>
<td></td>
<td></td>
<td></td>
<td>10,000.</td>
</tr>
<tr>
<td>12 Total revenue, See instructions</td>
<td></td>
<td></td>
<td></td>
<td>1,963,124.</td>
</tr>
</tbody>
</table>

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

All other contributions, gifts, grants, and similar amounts not included above

Add lines 11a-11d

Miscellaneous Revenue

Lowcountry Land Trust, Inc.

Federal Campaigns

Membership Dues

Fundraising Events

Related Organizations

Government Grants (Contributions)

Noncash Contributions Included in Lines 1a-1f $832,009 12-31-18

Total Revenue

Investment Income (Including Dividends, Interest, and Other Similar Amounts)

Transfer Fees

Educational Events

Merchandise Sales

All Other Program Service Revenue

Other Revenue

Gross Income from Fundraising Events (Not Including $ of Contributions Reported on Line 1c). See Part IV, Line 18

Less: Direct Expenses

Net Income or (Loss) from Fundraising Events

Gross Income from Gaming Activities. See Part IV, Line 19

Less: Direct Expenses

Net Income or (Loss) from Gaming Activities

Gross Sales of Inventory, Less Returns and Allowances

Less: Cost of Goods Sold

Net Income or (Loss) from Sales of Inventory

MISCELLANEOUS INCOME

Add lines 11a-11d

Total Revenue

See instructions Form 990 (2018)

Revenue Excluded from Tax Under Sections 512-514

Lowcountry Land Trust, Inc.

57-0809313

Page 9
### 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

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>130,000</td>
<td>74,864</td>
<td>28,595</td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>828,621</td>
<td>477,184</td>
<td>182,265</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>142,180</td>
<td>84,650</td>
<td>31,540</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>71,551</td>
<td>40,571</td>
<td>15,393</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>41,121</td>
<td>41,121</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>90,136</td>
<td>90,136</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>164,810</td>
<td>81,563</td>
<td>61,016</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>21,618</td>
<td>5,640</td>
<td>6,449</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>12,001</td>
<td>4,183</td>
<td>5,693</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>31,608</td>
<td>12,355</td>
<td>3,906</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>113,576</td>
<td>63,098</td>
<td>25,239</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>28,348</td>
<td>19,811</td>
<td>3,260</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>20,000</td>
<td>20,000</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>27,806</td>
<td>15,448</td>
<td>6,179</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>TELEPHONE</td>
<td>35,950</td>
<td>23,718</td>
<td>6,136</td>
</tr>
<tr>
<td>b</td>
<td>TAXES AND INSURANCE</td>
<td>35,183</td>
<td>20,341</td>
<td>7,447</td>
</tr>
<tr>
<td>c</td>
<td>EVENTS AND SPEAKERS</td>
<td>21,051</td>
<td>300</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>DUDES AND SUBSCRIPTIONS</td>
<td>11,807</td>
<td>20</td>
<td>11,047</td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>52,796</td>
<td>12,855</td>
<td>14,959</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>1,880,163</td>
<td>1,046,737</td>
<td>450,245</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A) Beginning of year</td>
<td>(B) End of year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>-----------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>260,426.</td>
<td>430,867.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9,644.</td>
<td>50,294.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50,294.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8,863,101.</td>
<td>8,670,782.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13,772,134.</td>
<td>22,918,076.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>89,154.</td>
<td>13,683,049.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13,682,980.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45,630.</td>
<td>56,226.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1,087,302.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13,697,153.</td>
<td>22,926,212.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>820,787.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1,000,000.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6,727,000.</td>
<td>7,780,004.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7,858,102.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15,138,072.</td>
<td>15,068,110.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22,918,076.</td>
<td>22,926,212.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Assets**

1. Cash - non-interest-bearing
2. Savings and temporary cash investments
3. Pledges and grants receivable, net
4. Accounts receivable, net
5. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L
6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L
7. Notes and loans receivable, net
8. Inventories for sale or use
9. Prepaid expenses and deferred charges
10. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D
   - Less: accumulated depreciation
11. Investments - publicly traded securities
12. Investments - other securities. See Part IV, line 11
13. Investments - program-related. See Part IV, line 11
14. Intangible assets
15. Other assets. See Part IV, line 11
16. Total assets. Add lines 1 through 15 (must equal line 34)
17. Accounts payable and accrued expenses
18. Grants payable
19. Deferred revenue
20. Tax-exempt bond liabilities
21. Escrow or custodial account liability. Complete Part IV of Schedule D
22. Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L
23. Secured mortgages and notes payable to unrelated third parties
24. Unsecured notes and loans payable to unrelated third parties
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
26. Total liabilities. Add lines 17 through 25

**Liabilities**

**Net Assets or Fund Balances**

1. Organizations that follow SFAS 117 (ASC 958), check here [X] and complete lines 27 through 29, and lines 33 and 34.
2. Unrestricted net assets
3. Temporarily restricted net assets
4. Permanently restricted net assets
5. Organizations that do not follow SFAS 117 (ASC 958), check here [ ] and complete lines 30 through 34.
6. Capital stock or trust principal, or current funds
7. Paid-in or capital surplus, or land, building, or equipment fund
8. Retained earnings, endowment, accumulated income, or other funds
9. Total net assets or fund balances
10. Total liabilities and net assets/fund balances
### Part XI  Reconciliation of Net Assets

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1,963,124.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>1,880,163.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>82,961.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>15,138,072.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>-152,923.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>0.</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>15,068,110.</td>
</tr>
</tbody>
</table>

### Part XII  Financial Statements and Reporting

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td>Accrual</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other</td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Separate basis</td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
</tbody>
</table>
### 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.)

<table>
<thead>
<tr>
<th></th>
<th>Reason for Public Charity Status</th>
<th>Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
<td>☐</td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)</td>
<td>☐</td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
<td>☐</td>
</tr>
<tr>
<td>4</td>
<td>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:</td>
<td>☐</td>
</tr>
<tr>
<td>5</td>
<td>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.)</td>
<td>☐</td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
<td>☒</td>
</tr>
<tr>
<td>7</td>
<td>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.)</td>
<td>☐</td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</td>
<td>☐</td>
</tr>
<tr>
<td>9</td>
<td>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:</td>
<td>☐</td>
</tr>
<tr>
<td>10</td>
<td>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.)</td>
<td>☐</td>
</tr>
<tr>
<td>11</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
<td>☐</td>
</tr>
<tr>
<td>12</td>
<td>An organization organized and operated exclusively to perform the functions of, 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.</td>
<td>☐</td>
</tr>
</tbody>
</table>

#### 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.**

#### f. Enter the number of supported organizations

- **[ ]**

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Name of supported organization</td>
<td>(ii) EIN</td>
</tr>
<tr>
<td>(iii) Type of organization (described on lines 1-10 above see instructions)</td>
<td>(iv) Is the organization listed in your governing document?</td>
</tr>
<tr>
<td>(v) Amount of monetary support (see instructions)</td>
<td>(vi) Amount of other support (see instructions)</td>
</tr>
</tbody>
</table>
### Section A. Public Support

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2844924</td>
<td>1340843</td>
<td>4875059</td>
<td>781,890</td>
<td>1251558</td>
<td>11094274</td>
</tr>
<tr>
<td>2</td>
<td>2844924</td>
<td>1340843</td>
<td>4875059</td>
<td>781,890</td>
<td>1251558</td>
<td>11094274</td>
</tr>
<tr>
<td>3</td>
<td>2844924</td>
<td>1340843</td>
<td>4875059</td>
<td>781,890</td>
<td>1251558</td>
<td>11094274</td>
</tr>
<tr>
<td>4</td>
<td>2844924</td>
<td>1340843</td>
<td>4875059</td>
<td>781,890</td>
<td>1251558</td>
<td>11094274</td>
</tr>
<tr>
<td>5</td>
<td>2844924</td>
<td>1340843</td>
<td>4875059</td>
<td>781,890</td>
<td>1251558</td>
<td>11094274</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>2844924</td>
<td>1340843</td>
<td>4875059</td>
<td>781,890</td>
<td>1251558</td>
<td>11094274</td>
</tr>
<tr>
<td>8</td>
<td>282,039</td>
<td>251,664</td>
<td>242,952</td>
<td>263,940</td>
<td>317,600</td>
<td>1358195</td>
</tr>
<tr>
<td>9</td>
<td>846</td>
<td>41,465</td>
<td>19,830</td>
<td>10,000</td>
<td>72,159</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>12524628</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>12524628</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a</td>
<td>33 1/3% support test - 2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a</td>
<td>10% -facts-and-circumstances test - 2018</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Private foundation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>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</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>3. Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>4. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>5. The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>6. Total. Add lines 1 through 5</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>7a. Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>7b. Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>7c. Add lines 7a and 7b</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>8. Public support. (Subtract line 7c from line 6)</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. Amounts from line 6</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>10a. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>10b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>11. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>12. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>13. Total support. (Add lines 9, 10a, 11, and 12)</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>14. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2014</th>
<th>(b) 2015</th>
<th>(c) 2016</th>
<th>(d) 2017</th>
<th>(e) 2018</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>18. Investment income percentage from 2017 Schedule A, Part III, line 17</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

**Note:** For the given section, please refer to the instructions and check the appropriate boxes based on the organization's tax status and activities.
### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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. **Yes**

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). **Yes**

3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
   
   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. **Yes**

   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. **Yes**

4a. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
   
   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. **Yes**

   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. **Yes**

5a. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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). **Yes**

5b. 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? **Yes**

5c. Substitutions only. Was the substitution the result of an event beyond the organization’s control? **Yes**

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. **No**

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 or 990-EZ). **No**

8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). **No**

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. **Yes**

9b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. **Yes**

9c. Did a disqualified person (as defined in 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. **Yes**

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 10b below. **No**

10b. 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.) **No**
Part IV  Supporting Organizations (continued)

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 in (b) and (c) below, the governing body of a supported organization?
   b A family member of a person described in (a) above?
   c A 35% controlled entity of a person described in (a) or (b) above? If “Yes” to a, b, or c, provide detail in Part VI.

Section B. Type I Supporting Organizations

1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization’s 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

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.

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

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?

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).

3 By reason of the relationship described in (2), 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.

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 government entity (see instructions).

2 Activities Test. Answer (a) and (b) 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 those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

   b Did the activities described in (a) constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have 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.

3 Parent of Supported Organizations. Answer (a) and (b) 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? Provide details in Part VI.

   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.
Schedule A (Form 990 or 990-EZ) 2018  LOWCOUNTRY LAND TRUST, INC.  57-0809313  Page 6

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 (explan 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

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section C - Distributable Amount  Current Year

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)</td>
</tr>
<tr>
<td>7</td>
<td>[ ] Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions).</td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2018

832026  10-11-18

10191115 792811 33681  2018.05000 LOWCOUNTRY LAND TRUST, IN 33681__1
### Part V

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

#### Section D - Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
</tr>
<tr>
<td><strong>2</strong></td>
</tr>
<tr>
<td><strong>3</strong></td>
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<tr>
<td><strong>4</strong></td>
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<td><strong>5</strong></td>
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<td><strong>6</strong></td>
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<td><strong>7</strong></td>
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<tr>
<td><strong>8</strong></td>
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<tr>
<td><strong>9</strong></td>
</tr>
<tr>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2018</th>
<th>(iii) Distributable Amount for 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>Distributable amount for 2018 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>Excess distributions carryover, if any, to 2018</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2013</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2014</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2015</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2016</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2017</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td><strong>Total</strong> of lines 3a through e</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2018 distributable amount</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2013 not applied (see instructions)</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
</tr>
<tr>
<td><strong>4</strong></td>
<td>Distributions for 2018 from Section D, line 7:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2018 distributable amount</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
</tr>
<tr>
<td><strong>5</strong></td>
<td>Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td><strong>6</strong></td>
<td>Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td><strong>7</strong></td>
<td><strong>Excess distributions carryover to 2019.</strong> Add lines 3j and 4c.</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2014</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2015</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2016</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2017</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2018</td>
<td></td>
</tr>
</tbody>
</table>

### Schedule A (Form 990 or 990-EZ) 2018 LOWCOUNTRY LAND TRUST, INC. 57-0809313 Page 7
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.)

Schedule A Part II

ADDITIONAL INCOME FOR THE YEAR ENDING JUNE 30, 2019 INCLUDED:

NET INCOME FROM REALIZED GAINS ON SECURITY SALES: $281,451

NET INCOME FROM FUNDRAISING EVENTS: $8,485
Schedule B
(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

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

2018

Name of the organization

LOWCOUNTRY LAND TRUST, INC.

Employer identification number

57-0809313

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ

X 501(c)(3) (enter number) organization

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>THE GAYLORD AND DOROTHY DONNELLEY FOUNDATION</strong>&lt;br&gt;35 EAST WACKER DRIVE&lt;br&gt;CHICAGO, IL 60601</td>
<td><strong>$ 185,000.</strong></td>
<td><strong>Person</strong></td>
</tr>
<tr>
<td></td>
<td><strong>NORFOLK SOUTHERN FOUNDATION</strong>&lt;br&gt;125 BROSNAN FOREST ROAD&lt;br&gt;DORCHESTER, SC 29437</td>
<td><strong>$ 30,000.</strong></td>
<td><strong>Person</strong></td>
</tr>
<tr>
<td></td>
<td><strong>HENRY M. BLACKMER FOUNDATION</strong>&lt;br&gt;171 CHURCH STREET, STE. 1254&lt;br&gt;CHARLESTON, SC 39402</td>
<td><strong>$ 30,000.</strong></td>
<td><strong>Person</strong></td>
</tr>
<tr>
<td></td>
<td><strong>LOWCOUNTRY LAND TRUST, INC.</strong>&lt;br&gt;57-0809313</td>
<td><strong>$</strong></td>
<td><strong>Person</strong></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td>----------------------</td>
<td>------------------------------------------</td>
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</tr>
</tbody>
</table>
Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) $ __________

<table>
<thead>
<tr>
<th>#</th>
<th>Purpose of gift</th>
<th>Use of gift</th>
<th>Description of how gift is held</th>
<th>Transferee's name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

Use duplicate copies of Part III if additional space is needed.

**LOWCOUNTRY LAND TRUST, INC.**

<table>
<thead>
<tr>
<th>Employer identification number</th>
<th>57-0809313</th>
</tr>
</thead>
</table>

**Part III**

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

<table>
<thead>
<tr>
<th>#</th>
<th>Purpose of gift</th>
<th>Use of gift</th>
<th>Description of how gift is held</th>
<th>Transferee's name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

Use duplicate copies of Part III if additional space is needed.
**Schedule C**  
(Form 990 or 990-EZ)  
Department of the Treasury  
Internal Revenue Service  

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527  

- Complete if the organization is described below.  
- Attach to Form 990 or Form 990-EZ.  
- Go to www.irs.gov/Form990 for instructions and the latest information.

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

### Name of organization

| LOWCOUNTRY LAND TRUST, INC. | 57-0809313 |

#### Part I-A  
Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2. Political campaign activity expenditures: $___.
3. Volunteer hours for political campaign activities: ___ hours.

#### Part I-B  
Complete if the organization is exempt under section 501(c)(3).

1. Enter the amount of any excise tax incurred by the organization under section 4955: $___.
2. Enter the amount of any excise tax incurred by organization managers under section 4955: $___.
3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No.
4a. Was a correction made? ☐ Yes ☐ No.
   b. If "Yes," describe in Part IV.

#### Part I-C  
Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities: $___.
2. Enter the amount of the filing organization’s funds contributed to other organizations for section 527 exempt function activities: $___.
3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b: $___.
4. Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization’s funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization. If additional space is needed, provide information in Part IV.

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization’s funds. If none, enter -0-.</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

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

Schedule C (Form 990 or 990-EZ) 2018  
LHA  
832041 11-08-18  

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OMB No. 1545-0047  
Department of the Treasury  
Internal Revenue Service  

832041 11-08-18  

2018.05000 LOWCOUNTRY LAND TRUST, IN 33681_1
Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

| 1a | Total lobbying expenditures to influence public opinion (grassroots lobbying) |
| 1b | Total lobbying expenditures to influence a legislative body (direct lobbying) |
| 1c | Total lobbying expenditures (add lines 1a and 1b) |
| 1d | Other exempt purpose expenditures |
| 1e | Total exempt purpose expenditures (add lines 1c and 1d) |
| 1f | Lobbying nontaxable amount. Enter the amount from the following table in both columns. |

- **If the amount on line 1e, column (a) or (b) is:**
- **The lobbying nontaxable amount is:**
  - Not over $500,000: 20% of the amount on line 1e.
  - Over $500,000 but not over $1,000,000: $100,000 plus 15% of the excess over $500,000.
  - Over $1,000,000 but not over $1,500,000: $175,000 plus 10% of the excess over $1,000,000.
  - Over $1,500,000 but not over $17,000,000: $225,000 plus 5% of the excess over $1,500,000.
  - Over $17,000,000: $1,000,000.

- **g** | Grassroots nontaxable amount (enter 25% of line 1f) |
- **h** | Subtract line 1g from line 1a. If zero or less, enter -0- |
- **i** | Subtract line 1f from line 1c. If zero or less, enter -0- |
- **j** | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? [Yes/No] |

### 4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Lobbying ceiling amount (150% of line 2a, column(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td>Grassroots ceiling amount (150% of line 2d, column(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f</td>
<td>Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Schedule C (Form 990 or 990-EZ) 2018

LOWCOUNTRY LAND TRUST, INC.

57-0809313

Page 3

Part II-B  Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements?</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td>X</td>
<td>0.</td>
</tr>
<tr>
<td>i</td>
<td>Other activities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Total. Add lines 1c through 1i</td>
<td></td>
<td>227.</td>
</tr>
</tbody>
</table>

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | X |

b If "Yes," enter the amount of any tax incurred under section 4912 |

c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 |

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? |

Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1 Were substantially all (90% or more) dues received nondeductible by members? | Yes | No |
2 Did the organization make only in-house lobbying expenditures of $2,000 or less? | 1 |
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? | 2 |

Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Part IV  Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART I-A, LINE 1:

REPRESENTATIVES OF THE ORGANIZATION ATTEMPTED TO INFLUENCE THE FOLLOWING PIECES OF LEGISLATION: HR.1992 AND S.170 - CHARITABLE CONSERVATION EASEMENT INTEGRITY ACT, NORTH AMERICAN WETLANDS CONSERVATION ACT REAUTHORIZATION, LAND AND WATER CONSERVATION FUND REAUTHORIZATION, AND FUNDING.
**SCHEDULE D (Form 990) 2018**

**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.

**Name of the organization**: LOWCOUNTRY LAND TRUST, INC.  
**Employer identification number**: 57-0809313

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

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

**Part II  Conservation Easements.**

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

1. **Purpose(s) of conservation easements held by the organization (check all that apply).**
   - [X] Preservation of land for public use (e.g., recreation or education)
   - [X] Preservation of a historically important land area
   - [X] Protection of natural habitat
   - [ ] Preservation of a certified historic structure
   - [X] 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.**

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

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** | 1 |

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

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</td>
</tr>
</tbody>
</table>

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

8. **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.

1. **If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.**

   a. **Revenue included on Form 990, Part VIII, line 1** | $ |
   b. **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 SFAS 116 (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 are a significant use of its collection items (check all that apply):
   a  Public exhibition  d  Loan or exchange programs
   b  Scholarly research  e  Other
   c  Preservation for future generations

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:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
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<tbody>
<tr>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td></td>
</tr>
</tbody>
</table>

2a  Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No
   b  If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

1a  Beginning of year balance ................................................. 55,712.
   b  Contributions ..................................................................... 370.
   c  Net investment earnings, gains, and losses ...................... 46,627.
   d  Grants or scholarships ......................................................... 9,455.
   e  Other expenditures for facilities and programs ................. 56,108.
   f  Administrative expenses ....................................................... 56,108.
   g  End of year balance ............................................................. 56,108.

2  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a  Board designated or quasi-endowment ► 100.00 %
   b  Permanent endowment ► %
   c  Temporarily restricted 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:
   (i)  unrelated organizations ☐ Yes ☐ No
   (ii) related organizations ☐ Yes ☐ No
   b  If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

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.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>b  Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c  Leasehold improvements</td>
<td>24,515.</td>
<td>4,914.</td>
<td>19,601.</td>
<td></td>
</tr>
<tr>
<td>d  Equipment</td>
<td>98,762.</td>
<td>84,240.</td>
<td>14,522.</td>
<td></td>
</tr>
<tr>
<td>e  Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total.  Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ► 13,682,980.
### 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.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
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<tr>
<td>(B)</td>
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<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
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<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

### 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.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
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<tr>
<td>(2)</td>
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<tr>
<td>(3)</td>
<td></td>
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<td>(7)</td>
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<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

### Part IX Other Assets

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
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<td>(5)</td>
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<td>(6)</td>
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<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 15.)

### Part X Other Liabilities

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

1. (a) Description of liability | (b) Book value
   
   (1) Federal income taxes
   
   (2) **LAND CONTRIBUTION PAYABLE** | 6,727,000.
   
   (3) 
   
   (4) 
   
   (5) 
   
   (6) 
   
   (7) 
   
   (8) 
   
   (9) 

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. **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.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains (losses) on investments</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td></td>
</tr>
</tbody>
</table>

### 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.

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

### 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 II, LINE 9:**

**THE FOOTNOTES TO THE AUDITED FINANCIAL STATEMENTS REFLECT THE FOLLOWING:**

PART X, LINE 2:

MANAGEMENT HAS EVALUATED THE CORPORATION'S TAX POSITIONS AND CONCLUDED THAT THE CORPORATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES 20,745.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES 20,745.
Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOWCOUNTRY LAND TRUST, INC.</td>
<td>57-0809313</td>
</tr>
</tbody>
</table>

### Part I  Fundraising Activities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - Mail solicitations
   - Internet and email solicitations
   - Phone solicitations
   - In-person solicitations
   - Solicitation of non-government grants
   - Solicitation of government grants
   - Special fundraising events

2. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?
   - Yes
   - No

   If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

Total

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

---

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

Schedule G (Form 990 or 990-EZ) 2018
## Part II: Fundraising Events
Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events</th>
</tr>
</thead>
<tbody>
<tr>
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<td>OYSTER ROAST</td>
<td>FARM TO TABLE</td>
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</tr>
<tr>
<td>1</td>
<td>Gross receipts</td>
<td>13,450.</td>
<td>15,350.</td>
<td>430.</td>
</tr>
<tr>
<td>2</td>
<td>Less: Contributions</td>
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<tr>
<td>3</td>
<td>Gross income (line 1 minus line 2)</td>
<td>13,450.</td>
<td>15,350.</td>
<td>430.</td>
</tr>
</tbody>
</table>

### Direct Expenses

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<tr>
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<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash prizes</td>
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<td></td>
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<td>Noncash prizes</td>
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<td>Rent/facility costs</td>
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<tr>
<td>Food and beverages</td>
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<td></td>
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<tr>
<td>Entertainment</td>
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<td></td>
<td></td>
<td>5,295.</td>
<td>5,642.</td>
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<tr>
<td>Other direct expenses</td>
<td></td>
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<td></td>
<td></td>
<td>9,808.</td>
<td>20,745.</td>
</tr>
</tbody>
</table>

- **Direct expense summary**: Add lines 4 through 9 in column (d) ▶ 20,745.
- **Net income summary**: Subtract line 10 from line 3, column (d) ▶ 8,485.

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
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<tr>
<td>3 Noncash prizes</td>
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<tr>
<td>4 Rent/facility costs</td>
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<tr>
<td>5 Other direct expenses</td>
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</tbody>
</table>

- **Direct expense summary**: Add lines 2 through 5 in column (d) ▶

**Net gaming income summary**: Subtract line 7 from line 1, column (d) ▶

### Enter the state(s) in which the organization conducts gaming activities:
- a Is the organization licensed to conduct gaming activities in each of these states? □ Yes □ No
  
  **If "No," explain:**

- b Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? □ Yes □ No
  
  **If "Yes," explain:**

---

**Schedule G (Form 990 or 990-EZ) 2018**
Does the organization conduct gaming activities with nonmembers?  
☐ Yes  ☐ No

Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  
☐ Yes  ☐ No

Indicate the percentage of gaming activity conducted in:

- The organization’s facility
- An outside facility

<p>| | |</p>
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</thead>
<tbody>
<tr>
<td>13a</td>
<td>%</td>
</tr>
<tr>
<td>13b</td>
<td>%</td>
</tr>
</tbody>
</table>

Enter the name and address of the person who prepares the organization’s gaming/special events books and records:

Name ▶
Address ▶

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

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

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

Name ▶
Address ▶

Gaming manager information:

Name ▶

Gaming manager compensation ▶ $  

Description of services provided ▶

☐ Director/officer  ☐ Employee  ☐ Independent contractor

Mandatory distributions:

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

- Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ▶ $.

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RELATIVELY NATURAL HABITATS AND HISTORIC LANDSCAPES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
1986 THROUGH THE CLOSE OF FY19, LLT HAS PERMANENTLY PROTECTED 483
PROPERTIES ENCOMPASSING OVER 144,992 ACRES SPANNING THE 17 COUNTIES OF
SOUTH CAROLINA’S COASTAL PLAIN. THE PROPERTIES INCLUDE WORKING FARMS
AND FORESTLANDS, WATERWAYS AND WATERSHEDS, HUNTING PROPERTIES, HUMMOCK
ISLANDS, VIBRANT MARSH TIDAL ECOSYSTEMS, BLACKWATER STREAMS AND
LONGLEAF PINE RESTORATION AREAS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PROVISION TOOK EFFECT WITH THE NATURE CONSERVANCY’S ACQUISITION OF FEE TITLE ON DECEMBER 8, 2015.

ONE KEY PROJECT IN FY 19 WAS THE PROTECTION OF SILVER BLUFF, A 3,250
ACRE AUDUBON SANCTUARY ON THE BANKS OF THE SAVANNAH RIVER. WITH LIMITED
PUBLIC ACCESS, BIRD FRIENDLY FOREST MANAGEMENT, AND A VARIETY OF NATIVE
HABITATS AND SPECIES, THE PERMANENT PROTECTION OF THIS PROPERTY IS A
HUGE CONSERVATION WIN FOR THE SOUTH LOWCOUNTRY.

DURING FY19, LLT CONTINUED TO IMPLEMENT A PLAN TO SELL THE 589-ACRE
HYDE PARK PLANTATION ENCUMBERED BY A CONSERVATION EASEMENT. THIS
PROJECT WILL REVOLVE FUNDS BACK INTO THE EAST BRANCH REVOLVING LAND
FUND FOR ADDITIONAL LAND CONSERVATION IN THE HISTORIC COOPER RIVER
CORRIDOR, WHICH HAS BEEN THE FOCUS OF PUBLIC AND PRIVATE CONSERVATION
EFFORTS FOR DECADES. ACKNOWLEDGING THIS FOCUS OF CONSERVATION EFFORTS IN THE EAST BRANCH AREA, LLT HIRED A NORTH COAST PROJECT MANAGER IN FY19. THE CREATION OF THIS ROLE ALLOWS LLT TO STRATEGICALLY CONSERVE AND INVEST IN THE EAST BRANCH OF THE COOPER, THE BLACK RIVER AREA, AND MANY OTHER SENSITIVE AND ECOLOGICALLY SIGNIFICANT HABITATS IN SC'S NORTHERN COASTAL PLAIN.

IN ADDITION, LLT HAS BEEN INVOLVED IN CONSERVATION PLANNING WITH CONSERVATION AND COMMUNITY PARTNERS, THE BUSINESS COMMUNITY, AND ACADEMIC INSTITUTIONS BOTH AT THE REGIONAL AND LOCAL SCALES TO IDENTIFY CONSERVATION OPPORTUNITIES AND DEVELOP NEW AND CREATIVE TOOLS FOR LAND PROTECTION, STABILIZATION, MANAGEMENT, AND STEWARDSHIP. THESE EFFORTS INCLUDE THE JOHNS ISLAND COMMUNITY CONSERVATION INITIATIVE, A JOINT EFFORT WITH NORTH CAROLINA STATE UNIVERSITY'S COLLEGE OF NATURAL RESOURCES AND THE CENTER FOR HEIRS PROPERTY PRESERVATION. IN FY 19, LLT SECURED A CONTRACTOR WITH ROOTS IN JOHNS ISLAND TO FOCUS SOLELY ON THE RE-ENGAGEMENT WITH AND SUCCESSFUL COMPLETION OF THIS CONSERVATION INITIATIVE. THE INITIATIVE CONTINUES INTO FY20 AND WILL CULMINATE IN A CONSERVATION AND IMPLEMENTATION PLAN. LLT ALSO HAS CONDUCTED A RESILIENCE PLANNING PROCESS FOR SOUTH CAROLINA'S COASTAL PLAIN THAT WILL BE COMPLETED IN FY 20 AND WILL BE PRESENTED AT THE NATIONAL LAND TRUST ALLIANCE RALLY IN OCTOBER 2019.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: ITS STEWARDSHIP CAPACITY THROUGH THE HIRING OF A PART TIME STEWARDSHIP ASSOCIATE IN FEBRUARY 2019. STEWARDSHIP STAFF HAS MAINTAINED AND CONTINUES TO IMPLEMENT RESTORATION AND MITIGATION ACTIVITIES ON LLT'S FEE SIMPLE KEYSTONE, FRENCH QUARTER CREEK, AND MALLARD TRACT PROPERTIES. THROUGH THE ADMINISTRATION OF A GRANT AWARDED TO LLT
THROUGH THE UNITED STATES FISH AND WILDLIFE SERVICE, LLT WAS ALSO ABLE
TO ASSIST IN LONGLEAF RESTORATION AND MANAGEMENT OF AN HISTORIC INLAND
RICE FIELD ON TWO PROPERTIES PROTECTED THROUGH CONSERVATION EASEMENTS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
PARK. LLT PARTNERED WITH SCDNR, CHARLESTON WATERKEEPER, KEEP CHARLESTON
BEAUTIFUL, KEEP DORCHESTER COUNTRY BEAUTIFUL, DORCHESTER COUNTY PARKS
AND REC, EDISTO ISLAND OPEN LAND TRUST, SUMMERVILLE SALTWATER ANGLERS,
AMERICAN RIVERS, LOWCOUNTRY MARSH SWEEPERS, SEA GRANT, NATIONAL PARK
SERVICE AT FORT MOULTRIE, USFWS AND CCA THROUGH THIS FISCAL YEAR'S
VOLUNTEER PROGRAMMING.

TO ENGAGE WITH THE CHARLESTON COMMUNITY AT LARGE, LLT HAD A PRESENCE AT
VARIOUS COMMUNITY EVENTS, INCLUDING MUSC EARTH DAY, CHARLESTON PRIDE
FESTIVAL, REVEL ON THE RIVER, OUTDOOR PROJECT BLOCK PARTY AND FIRE
FEST. WE ALSO PRESENTED AT CHARLESTON GREEN DRINKS AND HOSTED SOUL
SESSIONS, A FREE HAPPY HOUR EVENT WHERE WE BRING TOGETHER DYNAMIC
SPEAKERS FROM LOCAL BUSINESSES AND ORGANIZATIONS TO DISCUSS THEIR WORK
AND HOW IT'S AN EXPRESSION OF THEIR DEEP CONNECTION TO LOWCOUNTRY LAND
AND WATER. THROUGHOUT THE FISCAL YEAR, WE ALSO CONTINUED THE
IMPLEMENTATION AND EXECUTION OF ORGANIZATION AND PROGRAMMATIC BRANDING
AND COMMUNICATION EFFORTS, INCLUDING ENHANCEMENTS TO THE WEBSITE,
REGULAR SOCIAL MEDIA POSTS, AND PRODUCTION OF TWO NEWSLETTERS.

FORM 990, PART VI, SECTION A, LINE 4:
BYLAWS WERE UPDATED TO CHANGE THE NAME FROM LOLT TO LLT, TO EXPAND THE
EXECUTIVE COMMITTEE MEMBERSHIP, AND OTHER MINOR EDITS. ALL POLICIES UPDATED
IN MAY 2019 TO CHANGE NAME FROM LOLT TO LLT. THE SLD INVESTMENT POLICY
STATEMENT WAS UPDATED ALLOWING WELLS FARGO TO DIRECT THE INVESTMENTS USING A MODERATE RISK TOLERANCE. RECORDS STORAGE AND RETENTION POLICIES UPDATED TO REFLECT CHANGES IN CLOUD SERVER FROM EGNYTE TO MORE GENERIC "CLOUD SERVER".

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

FORM 990 IS REVIEWED BY THE CEO/PRESIDENT AND CFO, APPROVED BY THE FINANCE COMMITTEE, AND REVIEWED BY THE BOARD OF TRUSTEES PRIOR TO FILING.

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

THE CEO/PRESIDENT, BOARD CHAIR, ALONG WITH THE BOARD OF TRUSTEES REVIEW THE CONFLICT OF INTEREST STATEMENTS ON AN ANNUAL BASIS. EXECUTIVE ASSISTANT/BOARD LIAISON MONITORS BOARD MEETINGS, COMMITTEE MEETINGS AND OPERATIONS TO IDENTIFY AND ADDRESS POTENTIAL CONFLICT ISSUES PRIOR TO MEETINGS. DURING COMMITTEE MEETINGS THE POLICY IS ENFORCED BY THE CHAIR PERSON.

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

DETERMINING SALARY FOR THE CEO/PRESIDENT WAS SUBSTANTIATED BY REVIEWING THE LTA NATIONAL SALARY SURVEY, SURVEYING LOCAL ORGANIZATIONS, AND WAS BASED ON YEARS OF EXPERIENCE AND EXPERTISE. SALARY WAS APPROVED BY THE BOARD OF TRUSTEES.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

FORM 990, PART XI, LINE 2C

THE PROCESS FOR OVERSIGHT OF THE AUDIT AND REVIEW OF THE FINANCIAL
LOWCOUNTRY LAND TRUST, INC.

STATEMENTS HAS NOT CHANGED FROM THE PREVIOUS YEAR.
**Part I** Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
</table>
| WADMACON, LLC  
635 RUTLEDGE AVE, STE 107  
CHARLESTON, SC 29403  
BACONS BRIDGE, LLC  
635 RUTLEDGE AVE, STE 107  
CHARLESTON, SC 29403  
ASHEM, LLC  
635 RUTLEDGE AVE, STE 107  
CHARLESTON, SC 29403  
ANGEL OAK LLC  
635 RUTLEDGE AVE, STE 107  
CHARLESTON, SC 29403 | HOLDS PROTECTED LAND  
SOUTH CAROLINA  
TRANSFER OF LAND INCLUDED A  
REVERTER CLAUSE, EXISTS IN PERPETUITY  
PERPETUITY  
HOLDS OPTION FOR OFFICE  
SITE  
HOLDS PROTECTED LAND  
SOUTH CAROLINA | 356,600  
LLT  
341,800  
LLT  
343,000  
LLT | | | |

**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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part I  Continuation of Identification of Disregarded Entities

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>QUEMBY BARONY LLC 635 RUTLEDGE AVE, STE 107</td>
<td>HOLDS PROTECTED LAND</td>
<td>SOUTH CAROLINA</td>
<td></td>
<td></td>
<td>LLT</td>
</tr>
<tr>
<td>CHARLESTON, SC 29403</td>
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<tr>
<td>FRENCH QUARTER CREEK LLC 635 RUTLEDGE AVE, STE 107</td>
<td>HOLDS PROTECTED LAND</td>
<td>SOUTH CAROLINA</td>
<td></td>
<td>1,381,000</td>
<td>LLT</td>
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<td>CHARLESTON, SC 29403</td>
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<tr>
<td>HYDE PARK LLC 635 RUTLEDGE AVE, STE 107</td>
<td>HOLDS PROTECTED LAND</td>
<td>SOUTH CAROLINA</td>
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<td>3,510,000</td>
<td>LLT</td>
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<td>CHARLESTON, SC 29403</td>
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</tbody>
</table>
### 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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
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</table>

### 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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
<th>(j) Yes</th>
<th>(k) No</th>
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</table>
Part V  Transactions With Related Organizations.  Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

<table>
<thead>
<tr>
<th>Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
</tr>
<tr>
<td>a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity 1a</td>
</tr>
<tr>
<td>b Gift, grant, or capital contribution to related organization(s) 1b</td>
</tr>
<tr>
<td>c Gift, grant, or capital contribution from related organization(s) 1c</td>
</tr>
<tr>
<td>d Loans or loan guarantees to or for related organization(s) 1d</td>
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<tr>
<td>e Loans or loan guarantees by related organization(s) 1e</td>
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<tr>
<td>f Dividends from related organization(s) 1f</td>
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<tr>
<td>g Sale of assets to related organization(s) 1g</td>
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<tr>
<td>h Purchase of assets from related organization(s) 1h</td>
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<tr>
<td>i Exchange of assets with related organization(s) 1i</td>
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<tr>
<td>j Lease of facilities, equipment, or other assets to related organization(s) 1j</td>
</tr>
<tr>
<td>k Lease of facilities, equipment, or other assets from related organization(s) 1k</td>
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<tr>
<td>l Performance of services or membership or fundraising solicitations for related organization(s) 1l</td>
</tr>
<tr>
<td>m Performance of services or membership or fundraising solicitations by related organization(s) 1m</td>
</tr>
<tr>
<td>n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1n</td>
</tr>
<tr>
<td>o Sharing of paid employees with related organization(s) 1o</td>
</tr>
<tr>
<td>p Reimbursement paid to related organization(s) for expenses 1p</td>
</tr>
<tr>
<td>q Reimbursement paid by related organization(s) for expenses 1q</td>
</tr>
<tr>
<td>r Other transfer of cash or property to related organization(s) 1r</td>
</tr>
<tr>
<td>s Other transfer of cash or property from related organization(s) 1s</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
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</table>
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 tax 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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners sec. 501(c)(3) orgs.?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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Part VII
Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.