Form **990-PF** 

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Open to Public Inspection

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For	caiena	iar year 2024 or tax year beginning , a	and ending				
		foundation SOURCE CHARITABLE FOUNDATION	pec	tio		oyer identification num	ber
Nu	ımber a	nd street (or P.O. box number if mail is not delivered to street add	ress) R	coom/suite	<b>B</b> Telep	hone number (see instru 1-288-2432	uctions)
		vn, state or province, country, and ZIP or foreign postal code			00-	1-200-2132	
	-	NVILLE SC 29615			C If exe	mption application is pen	iding, check here
G	Check a	all that apply: Initial return Initial return	n of a former public ch	arity	<b>D</b> 1. Fo	reign organizations, chec	ck here
		Final return Amended	return		<b>2.</b> Fo	reign organizations meet	ing the
		Address change Name cha	nge		85	% test, check here and a	attach computation .
H (	Check t	ype of organization: X Section 501(c)(3) exempt private	foundation		E If priv	ate foundation status was	s terminated under
			e private foundation			n 507(b)(1)(A), check he	I
		ket value of all assets at J Accounting method:		rual	F If the	foundation is in a 60-mo	nth termination
er	nd of ye	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), ch	eck here
lir	ne 16)	\$ 4,701,991 (Part I, column (d), must I	be on cash basis.)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) Not in	.cotmont	(a) Adjusted not	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net invincor		(c) Adjusted net income	for charitable purposes
	Τ.						(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	201,145				
	2	Check if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	161 240	1	C1 240		
	4	Dividends and interest from securities	161,349		61,349		
	5a	Gross rents					
ne	b	Net rental income or (loss)	120 175				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	132,175				
	b	Gross sales price for all assets on line 6a 575,236		1	22 175		
	7	Capital gain net income (from Part IV, line 2)			32,175	0	
	8	Net short-term capital gain				<u> </u>	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	11	Gross profit or (loss) (attach schedule)					
	12	Other income (attach schedule) <b>Total.</b> Add lines 1 through 11	494,669	2	93,524	0	
<u></u>	13	Compensation of officers, directors, trustees, etc.	131,003		33,321		
Şe	14	Other employee salaries and wages					
Expenses	15	Pension plans, employee benefits					
Š	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) STMT 1	5,000		2,500		2,500
<u>.</u>	С	Other professional fees (attach schedule) STMT 2	54,672		54,672		
ā	17	Interest					
Administrative	18	Taxes (attach schedule) (see instructions) STMT 3	3,533		336		
₹	19	Depreciation (attach schedule) and depletion					
Þ	20	Occupancy					
	21	Travel, conferences, and meetings					
and	22	Printing and publications					
	23	Other expenses (att. sch.) STMT 4	101,114		199		100,915
ĭţi	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	164,319		57,707	0	103,415
o	25	Contributions, gifts, grants paid	462,060				462,060
_	26	Total expenses and disbursements. Add lines 24 and 25	626,379		57,707	0	565,475
	27	Subtract line 26 from line 12:	101 610				
	a	Excess of revenue over expenses and disbursements	-131,710		25 017		
	b	Net investment income (if negative, enter -0-)			35,817	0	
	С	Adjusted net income (if negative, enter -0-)					

Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year — Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 4,599,572 1 2 Enter amount from Part I, line 27a -131,710 3 Other increases not included in line 2 (itemize) SEE STATEMENT 9 234,129 4 Add lines 1, 2, and 3 4 4,701,991 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29 4,701,991 6

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d е

а

b С d е

(i) FMV as of 12/31/69

(d) Date sold (mo., day, yr.)

113,528 18,647

113,528

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18,647

(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))

SCAN29	959 05/12/2025 11:14 AM						
Form	990-PF (2024) <b>SCANSOU</b>	RCE CHARITABLE	FOUNI	DATION	57-1002959		
Pa	rt IV Capital Gains a	and Losses for Tax on	Investm	ent Income			
	(a) List and describe th 2-story brick ware	ne kind(s) of property sold (for exan shouse; or common stock, 200 shs.	nple, real es . MLC Co.)	state,	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	( <b>d)</b> Da (mo., c
1a	PUBLICLY TRADED						
b	ML LT CAPITAL G						
С		IIC INC		OCT			
d				GUI			
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	d		other basis nse of sale	(h) Gain ((e) plus (f)	
а	556,589				443,061		11
b	18,647						1
С			•				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(j) Adjusted basis

as of 12/31/69

2	Capital gain net income or (net capital loss)	4	nter in Part I, line 7	٦.				
-	Capital gain not moonle of (not capital 1000)	If (loss), enter	-0- in Part I, line 7	╛	2			132,175
3	Net short-term capital gain or (loss) as defined	in sections 1222(5) ar	nd (6):					
	If gain, also enter in Part I, line 8, column (c). S	ee instructions. If (los	s), enter -0- in	ገ.				
	Part I, line 8			<u> </u>	3			113,528
Pa	ert V Excise Tax Based on Inve	stment Income	(Section 4940(a)	, 4940(b)	, or 4948—see	instru	uctions)	
1a	Exempt operating foundations described in sec	tion 4940(d)(2), check	here and	enter "N/A"	on line 1.			
	Date of ruling or determination letter:	(attach	copy of letter if nec	essary — s	ee instructions)	1		3,278
b	All other domestic foundations enter 1.39% (0.0	139) of line 27b. Exer	mpt foreign organization	ns, enter	ſ			
	4% (0.04) of Part I, line 12, col. (b)							
2	Tax under section 511 (domestic section 4947(					2		C
3	Add lines 1 and 2					3		3,278
4	Subtitle A (income) tax (domestic section 4947(	a)(1) trusts and taxab	le foundations only; ot	hers, enter -	0-)	4		C
5	Tax based on investment income. Subtract li					5		3,278
6	Credits/Payments:		• •					
а	2024 estimated tax payments and 2023 overpay	ment credited to 2024	4	6a	2,800			
b	Exempt foreign organizations — tax withheld at			6b				
С	Tax paid with application for extension of time to			6c				
d	Dead on 1966 at Property of the 197			6d				
7	Total credits and payments. Add lines 6a through	jh 6d				7		2,800
8	Enter any <b>penalty</b> for underpayment of estimate	ed tax. Check here	if Form 2220 is a	ttached		8		
9	Tax due. If the total of lines 5 and 8 is more that		t awad			9		478
10	Overpayment. If line 7 is more than the total of	lines 5 and 8, enter the				10		
11	Enter the amount of line 10 to be: Credited to 2				Refunded	11		

(k) Excess of col. (i)

over col. (j), if any

<u>Par</u>	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.	V		
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	SEE STATEMENT 10			
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes,"			37
	complete Part XIII	9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			3,7
	names and addresses	10		X
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			<b>.</b>
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	40		$ \mathbf{x} $
	person had advisory privileges? If "Yes," attach statement. See instructions	12	Х	
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address	13	Λ	<u> </u>
	The backs are in care of TADISSA KNEZEVICH Telephone no 864-7	86-	197	 วั
14	6 LOGUE COURT	.00-	Ŧ	·
		5		
	0 5 4047( )(4)			
	and enter the amount of tax-exempt interest received or accrued during the year			
	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority		Yes	No
	and hard accomplish an attention and the formation of ancient account in	16	. 55	X
		<b>—</b>		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			

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Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. No Yes **1a** During the year, did the foundation (either directly or indirectly): Х (1) Engage in the sale or exchange, or leasing of property with a disqualified person? 1a(1) (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified Chan X 1a(2) Х (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? 1a(3) Х (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? 1a(4) (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Х 1a(5) (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) X 1a(6) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in N/A Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions 1b Organizations relying on a current notice regarding disaster assistance, check here С Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that N/A were not corrected before the first day of the tax year beginning in 2024? 1d Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024? If "Yes," list the years Х 2a 20 ..... , 20 ..... , 20 ..... , 20 ..... Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement — see instructions.) N/A2b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the vears here. 20 ..... , 20 ..... , 20 ..... , 20 ..... Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Х If "Yes," did it have excess business holdings in 2024 as a result (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2024.) N/A3b Did the foundation invest during the year any amount in a manner that would jeopardize its charitable Х Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2024?

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Forn	1 990-PF (2024) SCANSOURCE CHARITABLE FOUNDATION	<u>v 5/-1</u>	.002959			F	age
P	art VI-B Statements Regarding Activities for Which Form	4720 May Be	Required (cor	ntinued)			
5a						Yes	_
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945)				5a(1)		X
	(2) Influence the outcome of any specific public election (see section 4955); or to ca	arry on, directly or					
	indirectly, any voter registration drive?				5a(2)		X
	(3) Provide a grant to an individual for travel, study, or other similar purposes?				5a(3)		X
	(4) Provide a grant to an organization other than a charitable, etc., organization des						l
	(4)(A)? See instructions				5a(4)		X
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or edit	ucational purposes,	or for				١
	the prevention of cruelty to children or animals?				5a(5)		X
b	If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify under the			37 / 3			
	in Regulations section 53.4945 or in a current notice regarding disaster assistance?	See instructions		N/A	5b		
C	Organizations relying on a current notice regarding disaster assistance, check here						
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the			37/3			
	maintained expenditure responsibility for the grant?			N/A	5d		
_	If "Yes," attach the statement required by Regulations section 53.4945-5(d).		_				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay pr	emiums on a perso	nal				- V
	benefit contract?				6a		X
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a person	al benefit contract?			6b		┢
7-	If "Yes" to 6b, file Form 8870.	transaction?			70		x
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter If "Yes," did the foundation receive any proceeds or have any net income attributable				7a		
b	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000				7b		
8	excess parachute payment(s) during the year?				8		x
D	art VII Information About Officers, Directors, Trustees, Fo	undation Mar	agore Highly	, Paid Emplo		and	
Г	Contractors	diluation wai	iagers, riigini	y i ald Emplo	yccs	, and	4
1	List all officers, directors, trustees, and foundation managers and their compe	nsation. See instr	uctions.				
<u> </u>				(d) Contributions to			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		pense a	
	,,	devoted to position	enter -0-)	plans and deferred compensation	Otne	er allowa	inces
SI	EE STATEMENT 11						
2	Compensation of five highest-paid employees (other than those included on	line 1 — see instr	uctions). If none,	, enter			
	"NONE."						
		(b) Title, and average		(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		pense a er allowa	
		devoted to position		compensation			
N	ONE						
					1		
					+		
					_		
_					_		
Tota	Il number of other employees paid over \$50,000				1		(

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Part VII Information About Officers, Directors, Trustees, Foundation Ma	nagers, Highly Paid Emp	loyees, and
Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See instructi	ons. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MERRILL LYNCH COLUMBIA PO BOX 11269 SC 29211	INVEST ADVISORY	54,672
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informatio organizations and other beneficiaries served, conferences convened, research papers produced, etc.	n such as the number of	Expenses
1 N/A		
2		
3		
4		
Part VIII-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see Part IX instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 4,690,279 1a Average of monthly cash balances ...... 1b 225,742 . . . . . . . . . . . . Fair market value of all other assets (see instructions) 1c С 4,916,021 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 2 4,916,021 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see 73,740 4,842,281 Net value of noncharitable-use assets. Subtract line 4 from line 3 5 Minimum investment return. Enter 5% (0.05) of line 5 242,114 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part X and certain foreign organizations, check here | and do not complete this part.) 242,114 Minimum investment return from Part IX, line 6 Tax on investment income for 2024 from Part V, line 5 3,278 2a 2a Income tax for 2024. (This does not include the tax from Part V.) 2c 3,278 С 238,836 Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 4 238,836 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 238,836 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 ...... Part XI Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 1a 565,475 Program-related investments — total from Part VIII-B 1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 565,475 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4 ... 4

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Part XII **Undistributed Income** (see instructions) (a) (b) (c) (d) Years prior to 2023 2023 2024 Corpus 238,836 1 Distributable amount for 2024 from Part X, line 7 Undistributed income, if any, as of the end of 2024: a Enter amount for 2023 only **b** Total for prior years: 20 Excess distributions carryover, if any, to 2024: **a** From 2019 ..... 238,939 **b** From 2020 ..... 453,619 **c** From 2021 229,366 139,463 **d** From 2022 **e** From 2023 388,432 f Total of lines 3a through e ..... 1,449,819 Qualifying distributions for 2024 from Part XI, line 4: \$ 565,475 a Applied to 2023, but not more than line 2a **b** Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2024 distributable amount 238,836 e Remaining amount distributed out of corpus 326,639 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 1,776,458 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount — see instructions e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount - see instructions f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025 0 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) ..... 8 Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions) 238,939 Excess distributions carryover to 2025. 9 Subtract lines 7 and 8 from line 6a 1,537,519 10 Analysis of line 9: Excess from 2020 453,619 Excess from 2021 229,366 Excess from 2022 139,463 Excess from 2023 388,432 Excess from 2024 ..... 326,639

Pa	Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)										
1a	If the foundation has received a ruling or d	etermination letter that i	t is a private operating	•							
	foundation, and the ruling is effective for 20	024, enter the date of th	ne ruling								
b	Check box to indicate whether the foundat				942(j)(3) or 494	2(j)(5)					
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	9/1/						
	income from Part I or the minimum	(a) 2024	<b>(b)</b> 2023	(c) 2022	(d) 2021	(e) Total					
	investment return from Part IX for	inc		tion							
	each year listed			LIUII	UUL	JV					
b	85% (0.85) of line 2a					J					
С	Qualifying distributions from Part XI,										
	line 4, for each year listed										
d	Amounts included in line 2c not used directly										
	for active conduct of exempt activities										
е	Qualifying distributions made directly										
	for active conduct of exempt activities.										
	Subtract line 2d from line 2c										
3	Complete 3a, b, or c for the										
	alternative test relied upon:										
а	"Assets" alternative test — enter:										
	(1) Value of all assets										
	(2) Value of assets qualifying under										
	section 4942(j)(3)(B)(i)										
b	"Endowment" alternative test — enter 2/3										
	of minimum investment return shown in										
	Part IX, line 6, for each year listed										
С	"Support" alternative test — enter:										
	(1) Total support other than gross										
	investment income (interest, dividends, rents, payments on										
	securities loans (section										
	512(a)(5)), or royalties)										
	(2) Support from general public										
	and 5 or more exempt										
	organizations as provided in										
	section 4942(j)(3)(B)(iii)										
	an exempt organization										
Pa	art XIV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5.000 or mo	re in assets at					
	any time during the y	• •	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
1	Information Regarding Foundation Ma		•								
а	List any managers of the foundation who h	nave contributed more th	nan 2% of the total cont	tributions received by the	e foundation						
	before the close of any tax year (but only i	f they have contributed	more than \$5,000). (Se	e section 507(d)(2).)							
	N/A										
b	List any managers of the foundation				equally large portic	on of the					
	ownership of a partnership or other entity)	of which the foundation	has a 10% or greater i	interest.							
	N/A										
2	Information Regarding Contribution, G		., .								
			•	organizations and does	•						
	unsolicited requests for funds. If the found		s, etc., to individuals of	r organizations under ot	ner conditions,						
	The name address and telephone number		no norcon to whom and	lications should be sel-	occod:						
а	The name, address, and telephone number C/O SCANSOURCE CHARI				<del>c</del> ວວ <b>c</b> u.						
	6 LOGUE COURT GREENV			· <b>J</b>							
	The form in which applications should be s			should include:							
J	SEE STATEMENT 12	Sastimus and initindu	on and materials they s	nodia moluuc.							
С	Any submission deadlines:										
•	SEE STATEMENT 13										
	Any restrictions or limitations on awards, s	uch as by geographica	l areas, charitable fields	s, kinds of institutions, o	r other factors:						

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year A CHILD'S HAVEN 20 MARTIN DRIVE N/A PC GREENVILLE SC 29617 PROGRAM AREA: CHILDREN 6,000 A MOMENT OF MAGIC 390 5TH AVE, 800 N/APC NEW YORK NY 10018 4,000 PROGRAM AREA: CHILDREN ACCEL PC 10251 N 35TH AVE N/APHOENIX AZ 85051 PROGRAM AREA: EDUCATION 2,000 ANDERSON INTERFAITH MINISTRIES INC PO BOX 1136 N/A PC ANDERSON SC 29622 PROGRAM AREA: EDUCATION 5,000 ARIZONA FRIENDS OF FOSTER CHILDREN 360 E CORONADO ROAD PC N/A PHOENIX AZ 85004 PROGRAM AREA: CHILDREN 2,000 ARIZONA'S CHILDREN ASSOCIATION 4524 N MARYVALE PKWY N/A PC PHOENIX AZ 85031 PROGRAM AREA: CHILDREN 700 ASHER HOUSE 138 B NORTH MAIN STREET N/APC ANDERSON SC 29621 PROGRAM AREA: CHILDREN 2,500 AUGUSTINE LITERACY PROJECT 2435 EAST NORTH STREET N/APC GREENVILLE SC 29615 PROGRAM AREA: EDUCATION 3,000 BELOVED ASHEVILLE 32 OLD CHARLOTTE HWY N/A PC ASHEVILLE NC 28805 HURRICANE HELENE RELIEF 3,700 BIG BROTHERS BIG SISTERS OF UPSTATE 620 N MAIN ST STE 102 N/A PC GREENVILLE SC 29601 PROGRAM AREA: CHILDREN 5,000 462,060 Total За **b** Approved for future payment N/A 3b Total

Fo	rm 990-PF (2024)	SCANSOURCE	CHARITABLE	FOUNDATI	<u> </u>	<u> 10029</u>	<u>59</u>	Page <b>12</b>
	Part XV-A	Analysis of Inc	ome-Producing A	ctivities				
En	ter gross amounts	unless otherwise indica	ated.	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	
				(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e)  Related or exempt function income (See instructions.)
1	Program service  a  b	אוואוויי	clns	spe	ctio	h	Cor	
	c							J
	е			-				
	f	ntracta from governmen	at agencies	-				
2	g Fees and co	s and assessments	t agencies					
2	Internation coving	s and temperary each	investments					
_	Dividende end in	toract from accurition	investments			14	161,349	
4		e or (loss) from real esta					101,545	
J		` '						
	<ul><li>a Debt-finance</li><li>b Not debt-fina</li></ul>	u property			<del> </del>			
6	Net rental income	or (lose) from persona	al property					
8	Gain or (loss) fro	m sales of assets other	than inventory		<del> </del>	18	132,175	
					<del> </del>	+	102/175	
10	Gross profit or (le	oss) from sales of inven	ntory					
		a						
•				-				
					1			
	e			^	1			
12	Subtotal. Add co	lumns (b), (d), and (e)		-	(	0	293,524	0
13	Total. Add line 1	2, columns (b), (d), and	I (e)			•	13	293,524
(Se	ee worksheet in lin	e 13 instructions to veri	fy calculations.)					
F	Part XV-B	Relationship of	Activities to the	Accomplishn	nent of Exempt	Purpos	es	
	of		activity for which income in the purposes (other than by					omplishment
	N/A							
_								
_								
_								
_								
_								
_								
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_								
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_								
_								
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_								

Part 2		Informati Organiza		arding Tr	ansfers to an	d Transactio	ns and Relationships W	ith Noncharitab	le E	kemp	it
1 Did				ectly engage	in any of the follow	ing with any othe	r organization described			Yes	No
					rganizations) or in s						
	anizations						ing to pointed.				
			ting foundat	tion to a non	charitable exempt of	organization of:	otion (	'OD	. /		
							,     ( )     (	,( )( )	1a(1)		х
` '	Other as								1a(2)		X
	ner transa								14(2)		
			n a n a h a rital	hla avament a	vacai-ation				4 15/4 \		х
(1)	Sales of	assets to a	noncharitat	ole exempt o	organization				1b(1)		-
(2)	Purchase	es of assets	from a nor	ncharitable e	xempt organization				1b(2)		X
(3)	Rental o	f facilities, e	quipment, c	or other asse	ets				1b(3)		X
(4)	Reimbur	sement arra	angements						1b(4)		X
(5)	Loans or	loan guarai	ntees						1b(5)		X
(6)	Performa	ance of serv	ices or me	mbership or	fundraising solicitat	ions			1b(6)		X
<b>c</b> Sha	aring of fa	cilities, equip	pment, mail	ling lists, othe	er assets, or paid e	mployees			1c		X
d If the	ne answer	to any of th	ne above is	"Yes," comp	lete the following so	chedule. Column	<b>(b)</b> should always show the fair ma	ırket			
val	ue of the	goods, other	assets, or	services give	en by the reporting	foundation. If the	foundation received less than fair	market			
val	ue in any	transaction (	or sharing a	arrangement,	show in column (d	) the value of the	goods, other assets, or services re	eceived.			
(a) Li	ne no.	(b) Amoun	t involved	(c) Nam	ne of noncharitable exem	pt organization	(d) Description of transfers, tr	ansactions, and sharing ar	rangeme	ents	
N/A											
<b>2a</b> ls t	he founda	tion directly	or indirectly	y affiliated wit	th, or related to, one	e or more tax-exe	empt organizations				_
des	scribed in	section 501	(c) (other th	nan section 5	501(c)(3)) or in sect	ion 527?			Y	es X	No
b If "	Yes," com	plete the fol	llowing sche	edule.							
	(a	) Name of orga	anization		(b) Type of o	organization	(c) Descrip	tion of relationship			
N/2	A										
	Under pen	alties of periury	. I declare tha	at I have examin	led this return, including	accompanying schedu	Lules and statements, and to the best of my	knowledge and belief, it is	true.		
							nich preparer has any knowledge.				
C: aux								May the IRS disc with the preparer			
Sign								See instructions.		Yes	No
Here						ı	<b></b>		ш		
							PRESIDENT			_	
	Signature of	of officer or trus	tee			Date	Title				
	Prepare	's name				Preparer's signatu	re	Date		Check	☐ if
Doid										self-em	ployed
Paid	CHRIS	TOPHER	S. CAU	JLEY		CHRISTOPH	ER S. CAULEY	05/12	/25	<u> </u>	
Preparer	Firm's name GREENE FINNEY CAULEY LLP						PTIN POO	534	004		
Use Only	Firm's a	ddress	908 N	MAIN	ST			Firm's EIN 52-	221	283	7
	<u> </u>		ANDER	SON, S	SC 29621			Phone no. 864	-22	5-8	713

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year BLUE RIDGE COUNCIL OF BOY SCOUTS 1 PARK PLAZA N/A PC GREENVILLE SC 29607 PROGRAM AREA: CHILDREN 2,500 BLUE RIDGE INNOVATION (BRIEF) 220 PERSHING AVENUE PC N/A CLEMSON SC 29631 PROGRAM AREA: EDUCATION 2,000 BON SECOURS WELLNESS ARENA PC 650 N ACADEMY STREET N/AGREENVILLE SC 29601 PROGRAM AREA: COMMUNITY 10,000 BOOKEM PC 161 RAINS AVENUE N/A COMMUNITY NASHVILLE TN 37203 OUTREACH 463 BOYS & GIRLS CLUB OF THE VALLEY 4309 E BELLEVIEW STREET PC N/A PHOENIX AZ 85008 PROGRAM AREA: CHILDREN 2,500 CALVARY HOME FOR CHILDREN 110 CALVARY HOME CIRCLE N/APC ANDERSON SC 29621 PROGRAM AREA: CHILDREN 5,000 CAMERONS HOUSE OF HOPE SC 421 GAP CREEK RD N/APC MARIETTA SC 29661 PROGRAM AREA: CHILDREN 2,500 CAMPERDOWN ACADEMY 65 VERDAE COMMONS DRIVE N/A PC GREENVILLE SC 29607 PROGRAM AREA: EDUCATION 5,000 CANDICE M CROSBY FOUNDATION 416 SHELLSTONE COURT N/A PC 3,000 BOILING SPRINGS SC 29316 PROGRAM AREA: COMMUNITY CHILD CRISIS 817 N COUNTRY CLUB DRIVE N/APC OUTER OFFICE GRANT MESA AZ 85201 3,500 Total 3a **b** Approved for future payment N/A 3b Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year CHILDREN'S ATTENTION HOME INC PO BOX 2912 N/A PC ROCK HILL SC 29732 PROGRAM AREA: CHILDREN 1,000 CHILDREN'S CANCER PARTNERS 900 S PINE STREET STE F N/APC SPARTANBURG SC 29302 PROGRAM AREA: CHILDREN 5,000 CHILDREN'S RECEIVING HOME PC 3555 AUBURN BOULEVARD N/ASACRAMENTO CA 95821 OUTER OFFICE GRANT 1,000 CHRISTMAS SHOES 411 SWEETWATER ROAD N/A PC **GREER SC 29650** PROGRAM AREA: CHILDREN 5,000 CONVERSE UNIVERSITY PC 580 E MAIN STREET N/ASPARTANBURG SC 29302 VALKYRIE SUPPLY **PROJECT** 1,000 CORNERSTONES INC 11150 SUNSET HILLS RD N/APC RESTON VA 20190 COMMUNITY OUTREACH 500 DANCE COLLABORATIVE PO BOX 5432 N/A PC GREENVILLE SC 29607 PROGRAM AREA: COMMUNITY 1,550 EXTENDED HANDS OF GOD SERVANTS 110 MONTANA STREET N/A PC GREENVILLE SC 29611 PROGRAM AREA: CHILDREN 3,500 FAMILY SERVICE ASSOCIATION OF BUCKS PC 4 CORNERSTONE DRIVE N/A LANGHORNE PA 19047 COMMUNITY OUTREACH 500 FEED & SEED CO PO BOX 3005 N/APC COMMUNITY GREENVILLE SC 29602 PROGRAM AREA: 2,000 Total За **b** Approved for future payment N/A 3b Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year FEEDING THE FOOTHILLS 8284 INDUSTRIAL AVENUE N/A PC ROSEVILLE CA 95678 OUTER OFFICE GRANT 1,000 FIRST IMPRESSION OF SOUTH CAROLINA 15 GRAND AVENUE N/A PC GREENVILLE SC 29607 COMMUNITY 7,500 PROGRAM AREA: GIFT OF ADOPTION FUND PC 1200 SHERMER ROAD STE 111 N/A NORTHBROOK IL 60062 PROGRAM AREA: CHILDREN 5,000 GIRL SCOUTS OF SOUTH CAROLINA 3 INDEPENDENCE POINTE N/A PC GREENVILLE SC 29615 PROGRAM AREA: CHILDREN 5,000 GIRLS ON THE RUN PO BOX 170773 PC N/A SPARTANBURG SC 29301 PROGRAM AREA: CHILDREN 3,000 GIRLUP GVL PO BOX 1446 N/APC GREENVILLE SC 29602 PROGRAM AREA: COMMUNITY 4,500 GOATLANDIA 2336 OLIVET LANE N/APC SANTA ROSA CA 95401 OUTER OFFICE GRANT 1,000 GREENVILLE HEALTH SYSTEMS 701 GROVE ROAD N/APC GREENVILLE SC 29605 COMMUNITY **OUTREACH** 5,000 GREENVILLE SYMPHONY ORCHESTRA 200 S MAIN STREET N/APC 5,000 GREENVILLE SC 29601 PROGRAM AREA: EDUCATION GREENVILLE TECH FOUNDATION 556 PERRY AVE STE B110 N/APC PROGRAM AREA: EDUCATION GREENVILLE SC 29611 10,000 Total 3a **b** Approved for future payment N/A 3b Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year GREENVILLE THEATRE 444 COLLEGE STREET N/A PC GREENVILLE SC 29601 PROGRAM AREA: EDUCATION 5,000 GREER RELIEF PO BOX 1303 N/APC **GREER SC 29652** COMMUNITY PROGRAM AREA: 5,000 HISPANIC ALLIANCE PO BOX 17934 PC N/AGREENVILLE SC 29606 PROGRAM AREA: EDUCATION 5,000 HOME OF THE INNOCENTS 1100 E MARKET STREET N/A PC LOUISVILLE KY 40206 PROGRAM AREA: CHILDREN 2,000 HOMES OF HOPE PC 3 DUNEAN STREET N/A GREENVILLE SC 29611 PROGRAM AREA: COMMUNITY 2,000 INSIDE THE LINES TRAINING 321 NORTH SHAWNEE TERRACE N/A PC LOUISVILLE KY 40212 PROGRAM AREA: EDUCATION 5,000 JASMINE ROAD INC PO BOX 25452 N/A PC GREENVILLE SC 29616 PROGRAM AREA: COMMUNITY 5,000 JUDSON COMMUNITY PARTNERSHIP PO BOX 6 N/APC GREENVILLE SC 29602 PROGRAM AREA: CHILDREN 5,000 JULIE VALENTINE CENTER 2905 WHITE HORSE ROAD N/APC GREENVILLE SC 29611 PROGRAM AREA: COMMUNITY 4,290 JW HOUSE 3850 HOMESTEAD ROAD N/APC PROGRAM AREA: COMMUNITY SANTA CLARA CA 95051 10,000 Total 3a **b** Approved for future payment N/A 3b Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year LIZ'S BIRTHDAY CLOSET 4275 COUNTY LINE RD #20 N/A PC CHALFONT PA 18914 OUTER OFFICE GRANT 250 LOAVES & FISHES 25 WOODS LAKE RD STE 810 PC N/AGREENVILLE SC 29607 COMMUNITY PROGRAM AREA: 5,000 MAKE-A-WISH FOUNDATION OF SC INC PC 225 S PLEASANTBURG DRIVE N/AGREENVILLE SC 29607 PROGRAM AREA: CHILDREN 7,500 MILL VILLAGE MINISTRIES 1186 PENDLETON STREET N/A PC COMMUNITY GREENVILLE SC 29611 PROGRAM AREA: 105,000 MOUNTAIN STRONG PC PO BOX 128 N/ABURNSVILLE NC 28714 HURRICANE RELIEF 9,469 NAMI GREENVILLE 130 INDUSTRIAL DRIVE N/APC GREENVILLE SC 29607 PROGRAM AREA: CHILDREN 3,000 OPERATION AIR DROP PO BOX 292068 N/A PC LEWISVILLE TX 75029 HURRICANE HELENE RELIEF 38,026 PHOENIX CHILDREN'S 33109 N 23RD AVE N/APC PHOENIX AZ 85085 PROGRAM AREA: CHILDREN 10,000 PICKENS COUNTY YMCA 101 BURNS ROAD N/A PC EASLEY SC 29640 PROGRAM AREA: CHILDREN 2,500 PLUMSDALE FIRE DEPARTMENT 5064 STUMP ROAD N/APC PLUMSTEADVILLE PA 18949 OUTER OFFICE GRANT 250 Total 3a **b** Approved for future payment N/A 3b Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year PUBLIC EDUCATION PARTNERS 225 S PLEASANTBURG DRIVE N/A PC GREENVILLE SC 29607 PROGRAM AREA: EDUCATION 6,000 REFUGE FOR WOMEN INC PO BOX 99 N/A PC WILMORE KY 40390 PROGRAM AREA: CHILDREN 5,000 ROPER MOUNTAIN SCIENCE CENTER PC 402 ROPER MOUNTAIN ROAD N/AGREENVILLE SC 29615 PROGRAM AREA: EDUCATION 6,500 SC GOVERNOR'S SCHOOL FOR SCIENCE 1122 LADY STREET N/A PC COLUMBIA SC 29201 PROGRAM AREA: EDUCATION 10,000 SC GOVERNOR'S SCHOOL FOR THE ARTS PO BOX 8458 PC N/A GREENVILLE SC 29604 PROGRAM AREA: EDUCATION 6,000 SC SCHOOL FOR THE DEAF AND BLIND 355 CEDAR SPRINGS ROAD N/A PC SPARTANBURG SC 29302 PROGRAM AREA: EDUCATION 2,500 SLEEP IN HEAVENLY PEACE 1560 ELDRIDGE AVENUE N/APC TWIN FALLS ID 83301 PROGRAM AREA: CHILDREN 4,000 SONOMA FAMILY MEAL 1370 REDWOOD WAY N/A PC PETALUMA CA 94954 OUTER OFFICE GRANT 1,250 SPECIALIZED ALTERNATIVES FOR 5 CENTURY DRIVE N/A PC PROGRAM AREA: 3,000 GREENVILLE SC 29607 CHILDREN STRIDES SYSTEMATIC TUTORING 109 NEW PERRY ROAD N/A PC PROGRAM AREA: EDUCATION GREENVILLE SC 29617 4,000 Total 3a **b** Approved for future payment N/A 3b Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year THE FAMILY EFFECT 1400 CLEVELAND STREET N/A PC GREENVILLE SC 29607 PROGRAM AREA: CHILDREN 5,800 THE REDWOOD EMPIRE FOODBANK PC 3990 BRICKWAY BOULEVARD N/AOUTER OFFICE GRANT SANTA ROSA CA 95403 1,250 TOMORROW'S RAINBOW PC 1114 PINE LOG FORD RD N/ATRAVELERS REST SC 29690 PROGRAM AREA: EDUCATION 5,000 TRAVELERS REST UNITED METHODIST 19 SOUTH MAIN STREET N/A PC TRAVELERS REST SC 29690 PROGRAM AREA: CHILDREN 5,000 TRI-COUNTY TECHNICAL COLLEGE FOUND. 7900 HIGHWAY 76 PC N/A PENDLETON SC 29670 PROGRAM AREA: EDUCATION 2,000 TUCSON JEWISH COMMUNITY CENTER 3800 E RIVER ROAD N/A PC TUCSON AZ 85718 PROGRAM AREA: CHILDREN 1,500 UNIVERSITY OF SC 1600 HAMPTON STREET N/APC COLUMBUA SC 29208 PROGRAM AREA: COMMUNITY 2,500 UPCOUNTRY HISTORY MUSEUM 540 BUNCOMBE STREET N/APC GREENVILLE SC 29601 PROGRAM AREA: EDUCATION 1,500 UPSTATE CIRCLE OF FRIENDS 29 RIDGEWAY DRIVE N/A PC 5,000 GREENVILLE SC 29605 PROGRAM AREA: CHILDREN WEST GREENVILLE SCHOOL 15 ENDEL STREET N/APC PROGRAM AREA: EDUCATION GREENVILLE SC 29611 3,562 Total 3a **b** Approved for future payment N/A 3b Total

Part XIV	Supplementary Information (	continued)			
3 Grants	and Contributions Paid During	the Year or Approved for	or Future Payment		
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	nd address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid duri WISH	FOR WHEELS	nspec	tion	COR	
4600	SOUTH ULSTER STREET	N/A	PC		
DENV	ER CO 80237	1	PROGRAM AREA:	CHILDREN	13,000
				3a	
	for future payment				
N/A					
Total		-		3b	

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**Federal Statements** 

# Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	 Total		Net Investment		Adjusted Net		Charitable Purpose		
ACCOUNTING FEES	\$	5,000	\$	2,500	\$		\$	2,500	
TOTAL	\$	5,000	\$	2,500	\$	0	\$	2,500	

## Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total		Net Investment		Adjusted Net		Charitable Purpose	
INVESTMENT ADVISORY FEES	\$	54,672	\$	54,672	\$		\$	
TOTAL	\$	54,672	\$	54,672	\$	0	\$	0

## Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total	_	Net estment	,	usted let	ritable pose
FOREIGN TAXES PAID FEDERAL EXCISE TAX	\$ 336 3,197	\$	336	\$		\$
TOTAL	\$ 3,533	\$	336	\$	0	\$ 0

## Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$
EXPENSES				
COMMUNITY PROJECTS (LOCAL)	85,845			85,845
OUTER OFFICE PROJECTS	5,533			5,533
STATE FILINGS/REGISTRATIONS	3,483			3,483
SOFTWARE	2,983			2,983
BANK SERVICE CHARGES	214	199		15

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**Federal Statements** 

Pul	Sta	tement 4 - F	orm 990-PF.	Part I, Line 2	3 - Other E	xpenses (con	tinued)

Description	_ <u> </u>	otal	Inve	Net estment	Adjuste Net	ed	Charitable Purpose
DUES & SUBSCRIPTIONS	\$	180	\$		\$		\$ 180
OFFICE EXPENSES		100					100
POSTAGE		122					122
MEETING EXPENSE		63					63
MISCELLANEOUS EXPENSE		2,591					 2,591
TOTAL	\$	101,114	\$	199	\$	0	\$ 100,915

## Statement 5 - Form 990-PF, Part II, Line 10a - US and State Government Investments

Description	B	seginning of Year	 End of Year	Basis of Valuation	F 	air Market Value
ML#204 FIXED INCOME	\$	218,440	\$ 188,500	MARKET	\$	188,500
TOTAL	\$	218,440	\$ 188,500		\$	188,500

## Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
ML#205 EQUITIES	\$ 1,968,144	\$ 2,043,702	MARKET	\$ 2,043,702
TOTAL	\$ 1,968,144	\$ 2,043,702		\$ 2,043,702

## Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description	E	Beginning of Year	 End of Year	Basis of Valuation	Fa	air Market Value
ML#204 CORPORATE BONDS	\$	105,927	\$ 77,569	MARKET	\$	77,569
TOTAL	\$	105,927	\$ 77,569		\$	77,569

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**Federal Statements** 

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## Statement 8 - Form 990-PF, Part II, Line 13 - Other Investments

Description	<ul><li>Beginning of Year</li></ul>	End of Year	Basis of Valuation	Fair Market Value
ML #204 MUTUAL FUNDS	\$ 105,651	\$ 90,166	MARKET	\$ 90,166
ML #204 EST ACCRUED INTEREST	2,184	2,180	MARKET	2,180
ML #206 MUTUAL FUNDS	1,530,900	1,606,641	MARKET	1,606,641
ML #206 ALTERNATIVE INVESTMENT	497,059	493,414	MARKET	493,414
TOTAL	\$ 2,135,794	\$ 2,192,401		\$ 2,192,401

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**Federal Statements** 

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## Statement 9 - Form 990-PF, Part III, Line 3 - Other Increases

Description Amount NONDIVIDEND DISTRIBUTIONS \$ 3,479 230,593

UNREALIZED GAIN ON INVESTMENTS

BASIS ADJUSTMENT

TOTAL

234,129

57

## Statement 10 - Form 990-PF, Part VI-A, Line 8a - States to which the Foundation Reports

## Postal

Code

ΑK AL

AR

CA CO

CTDE

FLGΑ

HIIL

KS ΚY

MA MD ME

MIMN

MO MS

NC ND

NH NJ

NM NV

NY ОН OK

OR PΑ

RΙ SC TN

UT VA WA

WΙ WV

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**Federal Statements** 

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## Statement 11 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

I GOILO III			OOPY		
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
HASSIE DEMUTH 6 LOGUE CT GREENVILLE SC 29615	PRESIDENT	5.00	0	0	0
LIZ DONAHUE 6 LOGUE CT GREENVILLE SC 29615	VICE PRES.	3.00	0	0	0
TARISSA KNEZEVICH 6 LOGUE CT GREENVILLE SC 29615	TREASURER	3.00	0	0	0
JILL ROCKENSTEIN 6 LOGUE CT GREENVILLE SC 29615	SECRETARY	1.00	0	0	0
MEGHAN BLEVINS 6 LOGUE CT GREENVILLE SC 29615	DIRECTOR	0.50	0	0	0
KRIS FRAESSDORF 6 LOGUE CT GREENVILLE SC 29615	DIRECTOR	0.50	0	0	0
ALEXANDRA HARRIS 6 LOGUE CT GREENVILLE SC 29615	DIRECTOR	0.50	0	0	0
TREVOR POPE 6 LOGUE CT GREENVILLE SC 29615	DIRECTOR	0.50	0	0	0
TONY SORBIN 6 LOGUE CT GREENVILLE SC 29615	DIRECTOR	0.50	0	0	0
TIM TOTTEN	DIRECTOR	0.50	0	0	0

SCAN2959 SCANSOURCE CHARITABLE FOUNDATION

**Federal Statements** 

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Statement 11 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address

Title

Average

Hours

Compensation

**Benefits** 

Expenses

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GREENVILLE SC 29615

SCAN2959 SCANSOURCE CHARITABLE FOUNDATION

**Federal Statements** 57-1002959

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## Statement 12 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

## Description

INFORMATION ON APPLYING FOR GRANTS IS AVAILABLE AT SCANSOURCE.COM/EN/ABOUT/SCANSOURCE-CHARITABLE-FOUNDATION. APPLICANTS CAN APPLY ONLINE.

## Statement 13 - Form 990-PF, Part XIV, Line 2c - Submission Deadlines

## Description

THE GRANT SUBMISSION WINDOW IS OPEN MARCH 1 THROUGH SEPTEMBER 30 EACH YEAR.

## Statement 14 - Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations

## Description

501(C)(3) ORGANIZATIONS CAN REQUEST FUNDING FOR SPECIFIC NEEDS. FUNDS SHOULD BE USED TO SUPPORT THE NEED; EVENTS TO RAISE FUNDS FOR THE NEED WILL NOT BE CONSIDERED.

#### Schedule B (Form 990) (Rev. December 2024))

(Rev. December 2024))
Department of the Treasury
Internal Revenue Service

## **Schedule of Contributors**

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

OMB No. 1545-0047

Name of the organization

SCANSOURCE CHARITABLE FOUNDATION

Employer identification number

57-1002959

Organization type (check one)	one maperenon copy						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	rered by the <b>General Rule</b> or a <b>Special Rule</b> .  (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General Rule							
_	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a butions.						
Special Rules							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
must answer "No" on Part IV, lin	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it ne 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 the filing requirements of Schedule B (Form 990).						

SCANSOURCE CHARITABLE FOUNDATION

Employer identification number 57-1002959

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
.1	SCANSOURCE (EMPLOYEE DONATIONS) 6 LOGUE CT GREENVILLE SC 29615	\$ 56,494	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2	SCANSOURCE (COMPANY MATCH) 6 LOGUE CT GREENVILLE SC 29615	\$ 56,494	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
3	WOMBLE BOND DICKINSON 310 WEST 4TH SREET WINSTON SALEM NC 27101	\$ 11,120	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
4	WOMBLE BOND DICKINSON (US) LLP 3105 OAK MEADOW DRIVE SNELLVILLE GA 30078	\$ 10,275	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
5	MIKE BAUR 102 HIGH PLAINS ROAD SIMPSONVILLE SC 29681	\$ 5,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No	Name, address, and ZIP + 4  INTERNATIONAL TECHNOLOGIES & SYSTEMS 10721 WALKER STREET  CYPRESS CA 90630	Total contributions  \$ 28,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)					