Form	99	0	Return	of Organization Exen	ont From	Inco	-mo	Гах		OMB No. 154	15-0047
		_		-	•					2020	0
				27, or 4947(a)(1) of the Internal F					ions)		
•		Treasury		er social security numbers on th		-	•			Open to P	网络网络哈姆根德国
	Revenue or the 2		■ Go to w ar year, or tax year beginn	<u>ww.irs.gov/Form990 for instructi</u> ing						Inspecti	on 🦕
-	eck if app					:020, an	nd endir	ig I		5-30 , <b>20</b> 21	·
	dress cha			VIDSON-DAVIE COMMUNITY	COLLEGE				D Emplo	over identification nu	
	me chang	•	Doing business as FO						· · · · · ·	23-707934	7
	tiat return		1	), box if mail is not delivered to street address	SJ	1	Room/suite	•	E Teleph	ione number	
F		terminated	PO BOX 1287	ippo ocupito and ZIB of foreign postel and		I				(336) 249-8	3186
Ē	hended re			ince, country, and ZIP or foreign postal code					G Gross	•	
E	plication		EXINGTON, NC F Name and address of prir						\$		24,398
· •	procession	ponong	1 Hane and address of phi	olpar oncor.			{			or subordinates?	es X No
I Ta	x-exempt	status <sup>,</sup> X	501(c)(3) 501(c) (	) 🛋 (insert no.) 🗌 4947(a)(1) or	527			H(b) Are all s			es No
	ebsite: P	-						H(c) Group e		t. See instructions	
••••			Corporation Trust Asso	ociation Other >	L Year of	formation				ai domicile: NC	
Pari		Summar			12 100 01	Tormation	, 190	0 1	sale of leg	a conticate. INC	<u></u>
	<b>1</b> E	Briefly descril	oe the organization's missic	n or most significant activities:	TO PROVI	DE SC	HOLAR	SHTPS		THER FORMS	ОF
e				OF DAVIDSON-DAVIE COM							
Activities & Governance						<b>%</b>	•				
, Lu	_			**************************************		AN.					,
Š	2 (	Check this bo	🗴 🕨 📋 if the organization	discontinued its operations or disp	osed of more t	than 259	% of its i	net assets.			
ഗ് ഷ	1		ting members of the gover				<b>.</b>		3		35
ŝ	4 r	Number of in	dependent voting members	of the governing body (Part VI, line	e 16		NN.		4		35
vitie				calendar year 2020 (Part V, line 2a			<b>€</b> ₿		. 5		0
cti	1		of volunteers (estimate if n			Ø			. 6		¥
<	7a 7	Fotal unrelate	d business revenue from P	art VIII, column (C), line 12					. 7a	······································	0
	1				and the second	<b>)</b>			. 7b		0
				All Aller	AHS		T	Prior Year		Current Ye	
	8 (	Contributions	and grants (Part VIII, line 1	h)	man and a second se				,646		71,426
ue			vice revenue (Part VIII, line	2g)						0	0
Revenue			come (Part VIII, column (A	0115. 30353				632	,184	5	42,583
Вé	11 (	Other revenu	e (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)					,751		88,263
	1			nust equal Part VIII, column (A), lin	e 12)			1,128			02,272
			imilar amounts paid (Part I)						,969		77,867
			to or for members (Part IX,	THE REAL PLANT AND A					<u> </u>		0
'n				benefits (Part IX) column (A), lines	s 5-10) ,						0
Expenses	16a F	Professional	fundraising fees (Part IX, c	olumn (A), line 11e)							0
per	b1	l'otal fundrais	ing expenses (Part IX, col	mn (D), line 25) 🕨		0					
Ä	17 (	Other expense	ses (Part IX, column (A), lin	es 11a-11d, 11f-24e)		· · · .		357	,715	2	92,810
	18 '	Total expens	es. Add lines 13-17 (muste	equal Part IX, column (A), line 25)				1,045	6,684		70,677
	19	Revenue les:	s expenses. Subtract line 1	8 from line 12				82	2,897		31,595
ces			I WAR I				Begin	ning of Curro	ent Year	End of Yea	ar
Net Assets or Fund Balances	20 7	Total assets	(Part X, line 16)					22,562	2,019	26,4	90,221
or Ass Ass Ass Ass Ass Ass Ass Ass Ass As	21 -	Total liabilitie	s (Part X) line 26)					3	3,393		0
			fund balances, Subtract li	ne 21 from line 20				22,558	3,626	26,4	90,221
Par	SCHOOL STREET	5143.55	re Block 🖤								
Under true c	penalties	s of perjuity, I dec	lare that I have examined this retur	n, including accompanying schedules and st cer) is based on all information of which prep	atements, and to the	he best of	my knowle	edge and belie	eL, it is		
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Ciar											
Sign	· IJ	Signatur	e of officer						Da	le	
Here		1976	easurer								
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Paid		EDDIE C	ARRICK		11-1	2-202		self-en	ployed	P0131506	54
-	barer	Firm's name	EDDIE CA	RRICK CPA PC			F	irm's EIN 🕨			
Use	Only	Firm's addres	s 🏲 🛛 151 YOUN	G DRIVE			P	hone no.			
				on NC 27292					336-	249-2545	
				wn above? (see instructions)	• • • • • • •	• • • •			• • • •	🕱 Yes	No No
For P	aperwo	ork Reduction	on Act Notice, see the sep	arate instructions.						Form	<b>990</b> (2020)

	990 (2020) DAVIDSON-DAVIE COMMUNITY COLLEGE 23-7079347 Page
на	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE SCHOLARSHIPS AND OTHER FORMS OF SUPPORT FOR THE STUDENTS OF DAVIDSON-DAVIE COMMUNITY
	COLLEGE .
•	
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?
	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	
ча	(Code:) (Expenses \$677,867 including grants of \$) (Revenue \$)
	SCHOLARSHIPS AND STUDENT SUPPORT.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses
EEA	Form 990 (2020)

Leart W.         Checklist of Required Schedules           1 is the organization describes in acoing Strictly of Adr7[a](1) (other than a private foundation? # Yes; "         1           2 is the organization required action of Strictly of Adr7[a](1) (other than a private foundation? # Yes; "         2           2 is the organization required action of Strictly of Adr7[a](1) (other than a private foundation of the compation of action of the compation action on bandled or in specialism of a condition of the compation of the compatis and the compation of the compation of the compation of	Form	990 (2020) DAVIDSON-DAVIE COMMUNITY COLLEGE	23-7	0793	47	F	age 3
1         Is the organization describe Since (SI) or 447(a)(1) (clifter stan a private broudsdor) # Yrss."         1         x           2         Is the organization requeries (index of midter optical campaign activities on basked of on incposition or contributes of midter optical campaign activities on basked of on incposition or contributes of the organization requeries (index of midter optical campaign activities on basked of on incposition to contributes of the organization organization of the organization organization of the organization organization of the organization organization that receives membership dues, assessments, or similar amounts a defined in Parvace Proceeding of the organization in the organization of the organization organization organization is subtracted or control of the organization material organization activity and on a done of the organization is audulined or args (index) and the organization cambes of the organization material organization advected (index or arg similar function) is subtracted accounts? // Yrse, "complete Schedule Q, Part II         5           0         Did to organization material organization advecter? // Yrse," complete Schedule Q, Part II         7         7           0         Did to organization material organization advecter? // Yrse," complete Schedule Q, Part II         7         7           0         Did to organization material calculations of volume organization. Individue accounts? // Yrse," complete Schedule Q, Part II         7         7           0         Did to organization material calculations of volume organization. Individue accounts? // Yrse," complete Schedule Q, Part II         7         7           0	Par	t IV Checklist of Required Schedules					<u> </u>
complete Schwälz         1         1         2         X           2         1s bit organization regage in direct or infered political campaign activities on baland of or in copparison to candidates for a number of the transmission of the copparization regage in direct or infered political campaign in babying activities, or have a excision 50 (n)         3           4         Section 10 effect or infered or infered or infered political campaign in babying activities, or have a excision 50 (n)         4           5         Is the cognitization asset on 50 (a)(0), 501 (a)(0), or 301 (a)(0) granization that recovers member hip dues, assessments, or dining amounts as durined in Person Proceedings 4-107 H*Ce <sup>+</sup> campaign Schwalz C, Part II         5           6         D0 the organization mention and over adviced that are assessment in the over an analytic hind hold cores member hip dues, assessments, or dining activities, or any similar financial or accounts for which donors have the night to proke advice on the distribution or investment of amounts in such funds or accounts in which donors have the night to proke advice or dark in higher advice advice advice advice of a number financial cases advice adv						Yes	No
2         Is the organization require the complete Schedule D, Schedule C Contributors See instructions?         2         2           3         Didth congruinations require their or index political comparing nativities on balantial of or in oppeation to candidates for public office? If 'Yes, 'complete Schedule C, Part I         3           4         Beaton S01 (c)(d) organizations. Do the organization engage in hobbing activities on these a societon S01 (c)(d). Society of 'Yes, 'complete Schedule C, Part I         4           5         Ib the organization as officed in Parts 2: Schedule C, Part I         5           6         Diff the organization activities of the organization metages in hobbing activities on their organization metage in the distribution or the Schedule C, Part I         5           7         Diff the organization metage on the distribution or theoremetal of annound in such thick or accurate for Which donors have the right to provide acids activities and the activities on the distribution or theoremetal of annound in such thick or accurate for Which donors the environment, historia canding assemble Schedule D, Part I         7           9         Did the organization metage to not accorementation activities and measures on or on the activities on the activitis on theactitis on the activitis on the activities on the activit	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			[		
30       Did the organization regages in direct or indirect policital campaign activities on based or in nogosition to candidese through output of campaign activities. Determined of the organization regimes activities on the section S01(h) disclose in the direct during bits by year of MY viss, "complete Schedule C, Part II       4         5       In the organization regimes and works of the organization engage, in bits/ying activities, or have a section S01(h) disclose in the direct during bits by year of Yros, "complete Schedule C, Part II       5         6       Did the organization regimes and works of the organization that receives membership dues, assessments, or earlier and works of the organization mathem and year of hands of any similar that or account in which denots have the fifth to provide schedule D, Part I       6         7       Did the organization mathem and works of art, historical treasures, or holds account limbly, serve as a custodian for anount in Part X, Inte 21, for serve organization mathem collections of works of art, historical treasures, or relations tange center organization the assess? If Yros," complete Schedule D, Part I       9         0       Did the organization regimes an amount in Part X, Inte 21, for serve or custodial account limbits, serve as a custodian for any simple schedule D, Part II       9         10       Did the organization have the part X, Inte 21, for serve or custodial account limbits, serve as a custodian for any of the following questions is "New, Yeange and Yeange or the account in Part X, Inte 21, Pa		•			1	x	
a Section 501(c)[6] organizations. Did the organization reagange in lobbing activities, or have a societ 501(h)         4           5 Is the organization a section 501(h)         4           5 Is the organization a section 501(h)         4           5 Is the organization a section 501(h)         4           6 Did the organization maritan any Coron advised funds or any similar tocks or accounts for which donors have the right provide advice on the distribution or investment of announts in such that or accounts? // ***         5           7 Did the organization maritan any Coron adviced funds or any similar tocks or accounts? // ***         6           7 Did the organization maritan any Coron adviced funds or any similar tocks or accounts? // ***         7           8 Did the organization maritan any Coron adviced funds or any similar tocks or accounts? // ***         7           9 Did the organization maritan any Coron advice of an thickorial transace, or othe similar access? // ***         8           9 Did the organization maritan any Coron advice of an thickorial transace, or othe similar access? // ***         8           9 Did the organization access on an annount in Part X, the 21, for secret or caused at account liability, serve as a cutodiain account insuth the access on a cutodiain account any of the organization access on an annount in Part X, the 21, for secret access on a similar to access on a count of a secret access on a count of a similar access on a count of a secret access on access of the tocks on access on a count of a secret access on ac	2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?			2	x	
9         Section 601(q)(3) capanizations. Did the capanization engage in lobhying onthies, or have a section 501(n)         4           1         Is the organization a section 501(a)(4), 501(a)(5), or 501(a)(6) capanization that receives mandurship dues, assessments, or almit a manufus as defined in fervious Procedure 86 (127 // Ym, "complete Schedule C, Part //         5           10         Did the organization marked and in fervious Procedure 86 (127 // Ym, "complete Schedule C, Part //         5           10         Did the organization marked and in fervious Procedure 86 (127 // Ym, "complete Schedule C, Part //         6           11         Did the organization marked and in fervious Procedure 61 amounts in such funds or accounts //         7           11         Did the organization marked and the exerce on the initial control is simple Schedule D, Part //         7           12         Did the organization marked and the Part X, in provide coeft counseling, debt management, credit parts, or debt acquisation environs // they, "complete Schedule D, Part //         9           12         Did the organization of lated in Part X, in provide coeft counseling, debt management, credit parts, or debt acquisation environs // they, "complete Schedule D, Part //         9           13         Did the organization origon anount for the association is 'Yes, "then complete Schedule D, Part //         11           14         debt acquisation report an anount for the association is 'Yes, "then complete Schedule D, Part //         11           14         d	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to					
election in effect during the tax year // *Yes,* complete Schedule Q, Part II       4         5       is the organization market any done advised fund or any similar funds or accounts? If Yes,* complete Schedule Q, Part III       5         6       Did the organization market any done advised fund or any similar funds or accounts? If Yes,* complete Schedule Q, Part II       6         7       Pest,* complete Schedule D, Part I       7         8       Did the organization market on of did a conservation easement, including easements to preserve open space, the environment, historic and accounts of the "inclusion" account is a similar schedule D, Part I       7         9       Did the organization market on ofdid a conservation easement, including easements to preserve open space, the environment, historic and account is a similar schedule D, Part II       7         9       Did the organization, market or addecons of verice of an upsice Schedule D, Part II       7         9       Did the organization, finder of mough a related organization, hold cases in donor restricting protore oreits or a cast of a similar schedule D, Part IV       9         9       Did the organization schedule D, Part IV       9         10       Did the organization, directly any of the boliving questions in "Yes," to market Schedule D, Part V       10         11       If the organization report an amount for land, buildings, and explorement in Part X, Inte 27 Histore Schedule D, Part V       10         11       Did the organization repor		candidates for public office? If "Yes," complete Schedule C, Part I			3		x
5         Is the organization task defined in Service Proceedings 64-97 If "Vice," complete Schedule C, Part II         5           6         Did the organization maintain any donor advised funds or any almätr funds or accounts for which donors have the right to provide advise on the datibution or investment of amounts in such funds or accounts of which donors have the right to provide advise on the datibution or investment of amounts in such funds or accounts of If "Yice," complete Schedule D, Part I         6           7         Did the organization receive or hold a conservation exerement, including essements to preserve open space, the environment, instruction adress, or hakinor advised transpace, complete Schedule D, Part I         7           8         Did the organization report an amount in Part X, line 21, for earcow or custodial account liabity, serve as a custodian for amounts not listed in Part X, on provide cardi counseling, debt management, conterpain, or debt negoliation services? If "Yes," complete Schedule D, Part I         9           9         Did the organization report an amount for land, baldings, and equipment in Part X, line 32, to Xes, "then complete Schedule D, Part IV         9           10         X         10         X           11         If the organization report an amount for land, baldings, and equipment in Part X, line 32, to Xes, "complete Schedule D, Part I         10           11         If the organization report an amount for Investments - provem related in Part X, line 32, the Xes Xes AD, Part X         10           12         If the organization report an amount for Investments - prov	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)				,	
assessmerts, or similar amounts as defined in Revenue Procedure 69-197 // Yes, "complete Schedule C, Part II         5           6         Did the organization mainteen any donner advice drug of link funds or accounts? If         6           7         Did the organization mainteen to dols on any sentiment of amounts in such funds or accounts? If         7           8         Did the organization mainteen to dols on conservation essenteent, including assements to preserve open space, the environment, linkacing and the organization mainteen collectors of which of att, historical trassures, or done arising reserve open space, the environment, linkacing and the organization for advice of att, historical trassures, or done arising reserve open space, the environment, linkacing and the organization for advice of att, historical trassures, or done arising reserve open space, the environment, linkacing organization for advice of att, historical trassures, or done arising reserve open space, the environment, linkacing environment, linkacing environment, linkacing environment, and the organization, fold assets in donor-reserve as a custorial account liability, serve as a custorial account liability, serve as a environment of an environment in a reserve or any done following questions in Yes, "tempter Schedule D, Part V         10           10         Did the enganization, control an amount for fund, buildings, and outpernet in Part X, line 12, linka 25% or more of a to liability serve.         118         2           0         Did the enganization report an amount for time stements - other assettiles for hark 12, line 12% if Yes, "complete Schedule D, Part X         119         110           0         Did the organization		election in effect during the tax year? If "Yes," complete Schedule C, Part II			4		х
6         Did the organization maintein any done advised funds or any similar funds or accounts for which donors have the right portvoid advise on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I         6           7         Did the organization receive or hold a conservation eserverin, including essements to preserve open space, the environment, historic later asses, or historic structures II 'Yes,' complete Schedule D, Part II ''''''''''''''''''''''''''''''''''	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,					
have the right to provide achies on the distribution or investment of amounts in such funds or accounts? If         6           Dot the organization receive on hold a conservation essemant, including essements to preserve open space, the environment, instoci and areas, or instocie structures? If Yes, "complete Schedule D, Part II         7           Dot the organization machine of an instocie of art, historic at measures, or other ainiting assets? If Yes,"         8           Dot the organization machine and X, the 21, for encover or ustadial account liability, serve as a custodial for amounts not listed in Part X, the 21, for encover or ustadial account liability, serve as a custodial nor amounts not listed in Part X, the 21, for encover or ustadial account liability, serve as a custodial nor amounts not listed in Part X, the 21, for encover or ustadial account liability, serve as a special of eth respiration services? If Yes, "complete Schedule D, Part V         10           If the organization, directly or through a related organization, hold assets in donor-restrict grant dorganization services to any of the following usestions in Yes, "then complete Schedule D, Part V, If If the organization report an amount for Investments - other securities (Part X, Inn 12, Inst8 5% or more of its total assets report on Part X, Inn 167 If Yes, "complete Schedule D, Part X         11a           D Id the organization report an amount for three stearts - other securities (Part X, Inn 12, Inst8 5% or more of its total assets report on Part X, Inn 167 If Yes, "complete Schedule D, Part X         11a           D Id the organization report an amount for three stearts - other securities (Part X, Inn 12, Inst8 5% or more of its total asseter report on Part X, Inn 167 If Yes, "complete Schedule D, Part		assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III			5		x
****       ****       ****       *****       *****       ******       ************************************	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors					
7       Did the organization receive or hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? If "ree," complete Schedule D, Part II       7         7       Did the organization mathematic collections of vortices of the structures? If "ree," complete Schedule D, Part III       8         9       Did the organization reports an encourt in Part X, Ine 21, for earcrow or custodial account lability, serve as a outsidian services? If "ree," complete Schedule D, Part IV       9         10       Did the organization, reports an encourt in Part X, ine 21, for earcrow or custodial account lability, serve as a outsidian services? If "ree," complete Schedule D, Part IV       9         10       Did the organization reports an encourt for leaded organization, hold assets in done-restricting molecules.       10         11       If the organization report an amount for leaded organization, hold assets in done-restricting molecules.       10         11       If the organization report an amount for lead, buildings, and equipment in Part X, ine 12, thatils 5% or more of its total assets reported in Part X, Ine 147 (****, complete Schedule D, Part VI)       11b         11       Did the organization report an amount for investments - other securities in Part X, Ine 12, thatils 5% or more of its total assets reported in Part X, Ine 167 (*****, complete Schedule D, Part X)       11c         11       Did the organization report an amount for other assets in Part X, Ine 167 (*****, complete Schedule D, Part X)       11d         11		have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If					
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7         8       Did the organization maintain collections of works of art, historical treasures, or other similar assuts? If "Yes," complete Schedule D, Part III       8         9       Did the organization report an amount in Part X, line 21, for encrow or custodial account liability, serve as a custodian for amounts not liabed in Part X, provide credit counseling, debt management, credit prepair, or debt negoliation services? If "Yes," complete Schedule D, Part V       9         10       Did the organization report an amount for the following questions is "Yes," then complete Schedule D, Part V       10         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V       10         12       Did the organization report an amount for investments - other securities in Part X, line 10, Hat is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII       11         13       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XIII       11         14       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X       110         111       Did the organization report an amount for there assets in Part X, line 167 If "Yes," complete Schedule D, Part			• • •		6		x
B         Did the organization maintain collections of works of art, historical treasures, or other similar assets? # "Yes,"         B           B         Did the organization report an amount in Part X, line 21, for encrow or custodial account liability serve as a custodian for amounts not listed in Part X; or provide credit courseling, debt management, credit repair, or debt negatilation reports and the analysis of the courseling, debt management, credit repair, or debt negatilation serves." // "Yes," complete Schedule D, Part V         9           10         Did the organization, directly or through a related organization, hold assets in donor-restriction anometers or in quasi andownents? (* "Yes," complete Schedule D, Part V         10         x           11         If the organization report an amount for land, buildings, and equipment in Part X, line 102, flasts," complete Schedule D, Part V         118         x           12         Did the organization report an amount for investments - other securities in Part X, line 13, flast is % or more of its total assets reported in Part X, line 167 / "Yes," complete Schedule D, Part VII         110         110           13         X         114         X         115         X           14         Did the organization report an amount for investments - organization report an amount for other lassitism in Part X, line 15 // "Yes," complete Schedule D, Part X         110           11         Did the organization report an amount for other lassitism in Part X, line 16 // "Yes," complete Schedule D, Part X         110           11 <t< td=""><td>7</td><td>Did the organization receive or hold a conservation easement, including easements to preserve open space,</td><td></td><td></td><td></td><td></td><td></td></t<>	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,					
a Did the organization report an amount in Part X, Ine 21, for escrow or custodial account liability serve as a custodial for amounts not listed in Part X, or provide credit counseling, dobt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V       9         Did the organization, directly or through a related organization, hold assets in donor-restrifted and wments       9         If the organization, directly or through a related organization, hold assets in donor-restrifted and wments       10       x         If the organization, directly or through a related organization, hold assets       No. 7 X as applicable.       10       x         a Did the organization report an amount for investments - other securities in Part X, line 12, mails 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       x         b Did the organization report an amount for investments - other securities in Part X, line 12, mails 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       11c         Did the organization report an amount for investmenters the tax V, line 15? If Yes," complete Schedule D, Part X       11d       11c         Did the organization report an amount for other labilities in Part X, line 15? If Yes," complete Schedule D, Part X       11d       11d         d Did the organization report an amount for other labilities in Part X, line 15? If Yes," complete Schedule D, Part X       11d       11d         d Did the organization neyber an amount for other l		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			7		x
9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, drebt repair, or       9         10       Did the organization services? If "res," complete Schedule D, Part V       9         11       If the organization services? If "res," complete Schedule D, Part V       10         12       Did the organization services? If "res," complete Schedule D, Part V       10         13       Did the organization report an amount for land, buildings, and equipment in Part X, line 127, lines," complete Schedule D, Part VI       11a         2       Did the organization report an amount for investments - other securities [h Part X, line 127, lines," complete Schedule D, Part VI       11b         2       Did the organization report an amount for investments - program related in Part X, line 158, line 158, or more of lis total assets reported in Part X, line 167, lines 36, line X, line 158, line 158, or more of lis total assets reported in Part X, line 167, line 177, line 167, line 177, line 1	8						
custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or       9         debt negotiation services? If "Yes," complete Schedule D, Part V       9         D lid the organization, directly or through a related organization, hold assets in donor-restricting end, wments       10         If the organization, directly or through a related organization, hold assets in donor-restricting end, wments       10         Z       If the organization, report an amount for land, buildings, and equipment in Part X, the 107 Lt/Ss."       10         Z       Did the organization report an amount for investments - other securities of Part X, the 127 Lt/Ss."       111a         Z       Did the organization report an amount for investments - other securities of Part X, the 127 Lt/Ss."       111a         D Did the organization report an amount for investments - protein related in Part X, line 127, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X       111d         D Did the organization report an amount for investments for the tax, view include a chorohos that addressets in the tax V line 257 If "Yes," complete Schedule D, Part X       111d         D Did the organization report an amount for other labilities in Part X, line 127 If "Yes," complete Schedule D, Part X       111d         D Did the organization report an amount for other labilities in Part X, line 157 If "Yes," complete Schedule D, Part X       111d         D Did the organization report an amount for other labilities in Part X, line		complete Schedule D, Part III			8		x
debt negotiation services? If "Yes," complete Schedule D, Part V       9         10       Did the organization, directly or through a related organization, hold assets in donor-restrictific endowments       10         11       If the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V       10         11       If the organization report an amount for land, buildings, and equipment in Part X, line 102 // Mes,"       111         12       Did the organization report an amount for investments - other securities (Part X, line 12, think 5% or more of its total assets reported in Part X, line 16? // Yes, "complete Schedule D, Part V       111         11       Did the organization report an amount for investments - program related in Part X, line 16? // Yes, "complete Schedule D, Part VIII       111         0       Did the organization report an amount for other liabilities in Part X, line 15. The 15 % or more of its total assets reported in Part X, line 16? // Yes, "complete Schedule D, Part X       111         11       Did the organization report an amount for other liabilities in Part X, line 15. The 15 % or more of its total assets       111         11       Did the organization report an amount for other liabilities in Part X, line 15. Wes, "complete Schedule D, Part X       111         11       Did the organization report on amount for other liabilities in Part X, line 25? // Yes, "complete Schedule D, Part X       111         12       Did the organization report an amount for other liabilities in Part X, l	9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a					
10       Did the organization, directly or through a related organization, hold assets in donor-restrict@donors.innexs       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V.       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V.       11a       X         2       Did the organization report an amount for investments - other securities (Part X, line 12, thatis 5% or more of its total assets reported in Part X, line 167. If "Yes," complete Schedule D, Part VI       11b       11c         2       Did the organization report an amount for investments - other securities (Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167. If "Yes," complete Schedule D, Part VI       11c       11c         11d       Did the organization report an amount for other assets in Part X, line 157. If "Yes," complete Schedule D, Part X       11d       11c         11d       Did the organization report an amount for other assets in Part X, line 157. If "Yes," complete Schedule D, Part X       11d       11d         11d       Did the organization report an amount for other isolatises in Part X, line 157. If "Yes," complete Schedule D, Part X       11d         11d       Did the organization separate or consolidated inpacial atterments for the tax year ridule as formote that addreseses the organization asthere and XI       11d         11d       Did the organi							
or in quasi endowment? If Yes, "complete Schedule D, Part V     10     x       11     If the organization's answer to any of the following questions is Yes," then complete Schedule D, Part V,     11       a)     Did the organization report an amount for land, buildings, and equipment in Part X, line 102.11 yes,"     11       b)     Did the organization report an amount for investments - other securities in Part X, line 102.11 yes,"     11       complete Schedule D, Part VI     11     11       c)     Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of lis total assets reported in Part X, line 167.11 "Yes," complete Schedule D, Part VII     11       c)     Did the organization report an amount for other assets in Rart X, line 15, that is 5% or more of lis total assets     11       d)     Did the organization report an amount for other liabilities in Part X, line 167.11 "Yes," complete Schedule D, Part X     11       e)     Did the organization report an amount for other liabilities in Part X, line 257.11 "Yes," complete Schedule D, Part X     11       e)     Did the organization report an amount for other liabilities in Part X, line 17.11 Net 267.11 "Yes," complete Schedule D, Part X     111       f)     Did the organization report an amount for other liabilities in Part X, line 27.11 "Yes," complete Schedule D, Part X     111       f)     Did the organization report an amount for other liabilities in Part X, line 127.11 "Yes," complete Schedule D, Part X     111		debt negotiation services? If "Yes," complete Schedule D, Part IV			9		x
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts V, VII, VIII, VII, VII, VII, VII, VII,	10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments					
VII, VIII, IX, or X as applicable.       118         a Did the organization report an amount for land, buildings, and equipment in Part X, line 107, <i>IV</i> , <i>Iss</i> , "       118         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167, <i>II'</i> Yes, "complete Schedule D, Part VIII       119         c Did the organization report an amount for investments - other securities in Part X, line 167, <i>II'</i> Yes, "complete Schedule D, Part VIII       111         c Did the organization report an amount for other labilities in Part X, line 15, <i>II'</i> Yes, "complete Schedule D, Part VIII       111         c Did the organization report an amount for other labilities in Part X, line 15, <i>II'</i> Yes, "complete Schedule D, Part X       111         e Did the organization report an amount for other labilities in Part X, line 167, <i>II'</i> Yes, "complete Schedule D, Part X       111         e Did the organization report an amount for other labilities in Part X, line 167, <i>II'</i> Yes, "complete Schedule D, Part X       111         e Did the organization report an amount for other labilities in Part X, line 167, <i>II'</i> Yes, "complete Schedule D, Part X       111         112       Did the organization obtain separate, independent audied inancial statements for the tax year? I' Yes, "complete Schedule D, Part X       111         12a       Did the organization asknow d'No' for Ine 72a. then completing Schedule D, Part X in 112       12a         13 Is the organization aschool descrips in exton 17(2(b)(1(A)(0)? I' Y		or in quasi endowments? If "Yes," complete Schedule D, Part V			10	x	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 102, 14, 455, "       111       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167, if "Yes," complete Schedule D, Part VI       111       111         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167, if "Yes," complete Schedule D, Part VI       111         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167, if "Yes," complete Schedule D, Part X       111         d Did the organization report an amount for other labilities in Part X, line 25, if "Yes," complete Schedule D, Part X       111         112       Did the organization separate, independent auxilied financial statements for the tax year include a footnote that addresses the organization site is separate or consolidated financial statements for the tax year? if "Yes," complete Schedule D, Part X       111         120       Did the organization included in consolidated, financial statements for the tax year? if "Yes," complete Schedule D, Part X       111         121       Did the organization as esparate, independent auxilied financial statements for the tax year? if "Yes," complete Schedule D, Part X       111         122       X       N       No financial Schedule D, Part X       111         123       Is the organization	11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,					
a Did the organization report an amount for Irand, buildings, and equipment in Part X, three 192, ft Yes,"       11a       X         b Did the organization report an amount for investments - other securities in Part X, three 12, that is 5% or more of its total assets reported in Part X, the 16? if Yes," complete Schedule D, Part VII       11b         c Did the organization report an amount for investments - organam related in Part X, the 13, that is 5% or more of its total assets reported in Part X, the 16? if Yes," complete Schedule D, Part VII       11c         d Did the organization report an amount for other assets in Part X, this 15, that is 5% or more of its total assets       11d         d Did the organization report an amount for other assets in Part X, this 25% if Yes," complete Schedule D, Part X       11d         d Did the organization report an amount for other labilities in Part X, this 25% if Yes," complete Schedule D, Part X       11d         d Did the organization report an amount for other labilities in Part X, this 25% if Yes," complete Schedule D, Part X       11d         112       Did the organization report an amount for other labilities in Part X, this 25% if Yes," complete Schedule D, Part X       11d         112       Did the organization otabin separate, independent audited financial statements for the tax year? If Yes," complete Schedule D, Part X       11d         12a       X       12a       X       12a         13       Is the organization asked regregate fevenues or expenses of more than \$10,000 from grantmaking, tundrataing, busineses, investingen		VII, VIII, IX, or X as applicable.					
b       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b         c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets       11c         d       Did the organization report an amount for other assets in Part X, line 57 If "Yes," complete Schedule D, Part X       11c         d       Did the organization report an amount for other labilities in Part X, line 57 If "Yes," complete Schedule D, Part X       11c         d       Did the organization separate or consolidated intarioal statements for the tax year include a footnote that addresses the organization is lability for uncertain tax positions, under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11t         12a       Did the organization included in consolidated, Independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11t         12a       Not the organization answered "To" foil in 12a, then completing Schedule D, Part X and XII is optional       12a         12a       Not the organization antaffica, employees, or agents outside of the United States, or aggregate foremus of part X, lone 11a       11d         13       Is the or	а						
of lits total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of lits total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c         d Did the organization report an amount for other assets in Part X, line 16, that is 5% or more of lits total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d         e Did the organization report an amount for other liabilities in Part X, line 16? If "Yes," complete Schedule D, Part X       11d         e Did the organization separate or consolidated inarbial statements for the tax year include a footnote that addresses the organization bian separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11f         12a       Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11t         12a       Was the organization answered "No" (b) Ine 12a, then completing Schedule D, Part X and XII is optional       12b         13       Is the organization answered "No" (b) Ine 12a, then completing Schedule D, Part X and XII is optional       12b         14a       Did the organization answered "No" (b) Ine 12a, then completed Schedule E       13a         14a       Did the organization answered "No" (b) Ine 12a, then completed Schedule E, Parts I and IV       14b         15 Did the organization answered		complete Schedule D, Part VI			11a	x	
c       Did the organization report an amount for investments - program related in PartX, line 13, that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VIII       11         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part X       114         e       Did the organization report an amount for other assets in Part X, line 257 if "Yes," complete Schedule D, Part X       116         f       Did the organization's separate or consolidated inaripial statements for the tax year include a forborie that addresses the organization's lability for uncertain tax positions under FIN 48 (ASC 7407) if "Yes," complete Schedule D, Part X       111         12a       Did the organization obtain separate, independent auched linaripial statements for the tax year? If "Yes," complete Schedule D, Part X and XII       112         13 Is the organization aschool described in ascistion 17Q(b)(1)(A)(ii)? If "Yes," complete Schedule E       13         14a       Did the organization maintain an office, emprise sort and statements for the tax year? If "Yes," complete Schedule E       13         14b       Did the organization aschool described in sciol 17Q(b)(1)(A)(ii)? If "Yes," complete Schedule E       13         14a       Did the organization maintain an office, emprise sort and statements for other assistance to or for any foregin organization, IF Yes," complete Schedule F, Parts I and IV       14b         15       Did the organizatio	b	353.6 Kitte					
of its total assets reported in Part X, line 16? If "Yas," complete Schedule D, Part VIII       11c         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets       11d         e Did the organization report an amount for other lasbitiles in Part X, line 15, that is 5% or more of its total assets       11d         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d         f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d         12a       Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d         12a       Did the organization is separate or consolidated inancial statements for the tax year? If "Yes," complete Schedule D, Part X       11d         13a       Is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule E       13d         14a       Did the organization answerd "No" 10 line 12a, then completing Schedule D, Parts X and XII is optional       12b         13       Is the organization matrian an pfice, empleyees, or agents outside of the United States?       14d         14b       Did the organization matrian and program service activities outside the United States?       14d         15       Did the organization matria.       10d Pres," complete Schedule F, Pa		of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			11b		x
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets       11d         e Did the organization report an amount for other liabilities in Part X, line 25% or more of its total assets       11d         e Did the organization's expande to consolidated inartial statements for the tax year include a footnote that addresses       11t         the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11t         12a       Did the organization obtain separate, independent audited inartial statements for the tax year? If "Yes," complete Schedule D, Part X and XII       11t         12a       Did the organization notuded in consolidated, independent audited financial statements for the tax year? If "Yes," and II the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization maintain an provide station T2(b)(1)(A)(II)" If "Yes," complete Schedule E       13a         14a       Did the organization have aggregate evenus or expenses of more than \$10,000 from grantmaking, fundraising, busines, investment, and program service activities outside of the United States, or aggregate foreign investments valued at \$100 000 or more? If "Yes," complete Schedule F, Parts I and IV       14b         15       Did the organization neport on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization (A). line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign invivuluals? If "Yes," complete Schedule F,	c						
reported in Part X, line 16? // "Yes," complete Schedule D, Part X       11d         • Did the organization report an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X       11e         • Did the organization's separate or consolidated inancial statements for the tax year include a foothole that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740?) "Yes," complete Schedule D, Part X       11f         12a       Did the organization obtain separate, independent audied inancial statements for the tax year? If "Yes," complete Schedule D, Part X and XII       12a       x         b       Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization maintain an office, employees, or agents outside of the United States?       14a         14       Did the organization have aggregate evenues for expenses of more than \$10,000 from grantmaking, fundrating, busines, investment, and brogard service activities outside the United States?       14a         15       Did the organization?       14b       14b         16       Did the organization?       14b       14b         17       Did the organization?       14c       14c         18       the organization maintain an office, employees, or agents outside of the United States?       14d       14b					11c		x
e Did the organization report an amount for other liabilities in Part X, line 257 if "Yes," complete Schedule D, Part X       11e         f Did the organization's separate or consolidated than claid 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       111         12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII       111         13 Is the organization answered "No" 60 ine 12a, then completing Schedule D, Parts XI and XII is optional       12b         13 Is the organization maintain an office, employees, or agents outside of the United States?       14a         b Did the organization nanother agengate revenues/or expenses of more than \$10,000 from grantmaking, fundraising, busines\$ investment, and program service activities outside the United States?       14a         14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts I and IV       14b         15 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 II and IV       16         16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16         17       Did the organization	d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets					
f       Did the organization's iseparate or consolidated invarial 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       111         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         14       Did the organization maintain an office, employees, or agents outside of the United States?       14a         b       Did the organization have agregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busines\$ investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16         17       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 an		Martin Physics and American State St			11d		x
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       111         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answerd "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E       13         14a       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busines\$, investment, and program service activities outside the United States?       14a         b       Did the organization have aggregate revenues or more than \$10,000 from grantmaking, fundraising, busines\$ investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b         15       Did the organization? If "Yes," complete Schedule F, Parts II and IV       15         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for roreign individuals? If "Yes," complete Schedule F, Parts II and IV       16         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assist	e				11e		x
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       x         b       Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         11a       "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         11a       Is the organization a school described in section 70(b)(1)(A)(li)? If "Yes," complete Schedule E       13         11a       Did the organization maintain an office, employees, or agents outside of the United States?       14a         11b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activities outside the United States, or aggregate foreign investment, and program service activitie	f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses					
Schedule D, Parts XI and XII       12a       x         b       Was the organization included in consolidated, independent audited financial statements for the tax year? If       12b         13       Is the organization answered "No" to line 12e, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization answered "No" to line 12e, then completing Schedule E       13         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busines\$ investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for rary foreign organization, "Port 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 II and IV       16         17       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 G, Part I See instructions       17         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part XIII, line 9a? If "Yes," complete Schedule G, Part II       18		962336	• • •		11f		x
b       Was the organization included in consolidated, independent audited financial statements for the tax year? If       1         "Yes," and if the organization answered "No" to line 12e, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization as school described in a school of the United States?       13         14a       Did the organization naintain an office, employees, or agents outside of the United States?       14a         b       Did the organization and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization, if "Yes," complete Schedule F, Parts II and IV       14b         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions       17         18       Did the organization report more than \$15,000 ot al of fundraising event gross income and contributions on Part XVIII, lines 1c and 82 if "Yes," complete Schedule G, Part II       18         19       Did the organization report more than \$15,000 of gr	12a						
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         13       Is the organization a school described in section 170(b)(1)(A) (ii)? If "Yes," complete Schedule E       13         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a         b       Did the organization maintain an office, employees, or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b         15       Did the organization ("Feorit on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization?, If "Yes," complete Schedule F, Parts II and IV       15         16       Did the organization, report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for orign individuals? If "Yes," complete Schedule F, Parts III and IV       16         17       Did the organization, report at total of more than \$15,000 of expenses for professional fundralising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions       17         18       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 II       18         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H					12a	x	
<ul> <li>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</li> <li>13</li> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>14a</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14b</li> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign regarization report an 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 II and IV</li> <li>16 Did the organization report at Data I to any foreign individuals? If "Yes," complete Schedule F, Parts III and IV</li> <li>17 Did the organization report at total of more than \$15,000 of gross income and contributions on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I</li> <li>18 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 II</li> <li>19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>20a</li> <li>20b</li> <li>20 a Did the organization report more than \$5,000 of gross income from gaming activities on Part VIII, line 9a, did the organization attach a copy of its audited financial statements to this return?</li> <li>20b</li> <li>21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domesting activities or any domestic organization or domesting activities or any domestic organization or domesting activities on Part VIII, line 9a?</li> <li>17 Did the organization operate one or more hospital faciliti</li></ul>	b						
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20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a         b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21	19						
b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21			• • • •		19		x
21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21					20a		x
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II					20b		
	21						
		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		• • •	21		x
EEA Form 990 (2	EEA				Form	990 (2	020)

	990 (2020) DAVIDSON-DAVIE COMMUNITY COLLEGE	23-70793	47	Pa	age <b>4</b>
Part	V Checklist of Required Schedules (continued)				
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	land the second s		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22	x	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1			
	employees? If "Yes," complete Schedule J		23		x
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	through 24d and complete Schedule K. If "No," go to line 25a		24a		х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				
	to defease any tax-exempt bonds?		24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?				
	If "Yes," complete Schedule L, Part I		25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member or any of these persons? If "Yes," complete Schedule Li Panul.		26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key		1		
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			ĺ	
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these		1		
	persons? If "Yes," complete Schedule L, Part III		27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part				
	IV instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				1
	"Yes," complete Schedule L, Part IV		28a	x	<b></b>
	A family member of any individual described in line 28a? If Yes," complete Schedule L, Part IV		28b	<u> </u>	x
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If				
	"Yes," complete Schedule L, Part IV		28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	• • • • • • • •	29		<u>x</u>
30	Did the organization receive contributions of art historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M		30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II		32		<u>x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		22		
	sections 301.7701-2 and 301.7701-3? If Yes, " complete Schedule R, Part I		33	<u>x</u>	+
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		34		
_	or IV, and Part V, line 1 0		35a	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		- 336		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		. 35t		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2				x
36	Section 501 (c) (3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?/// "Yes" complete Schedule R. Part V. line 2		. 36		x
			, 30		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		. 37		x
	and that is treated as a parmership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		. – .		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		38	x	
<b>1</b>	19? Note: All Form 990 filers are required to complete Schedule O.		1.00		
Fai	<b>Statements Regarding Other IRS Filings and Tax Compliance</b> Check if Schedule O contains a response or note to any line in this Part V				. П
				Yes	No
-	Enter the number reported in Box 3 of Form 1096 Enter $-0$ - if not applicable	0		e Hand	
1a	Enter mendimber reported in Box of or infinited in Enter of white applicable		- 周辺		
b	Enter the number of a drift w-2d included in the ra. Enter-of it not applicable	(			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and		. 1c	iopressii	a anaidhe V
	reportable gaming (gambling) winnings to prize winners?			m gan	(2020)
EEA			, 01		

Form	990 (2020) DAVIDSON-DAVIE COMMUNITY COLLEGE	23-707934	7	Pag	e 5,
Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
			Y.	es N Bail Bail	<b>lo</b> 19274
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0	2b		(6911) V
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		Di Divisti e e stale		X
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		20		hind
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•••••+	3a		<u>x</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	••••••••	3b		,
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		4.		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	••••	4a	0/01 <b>9</b> 84	X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				410/M
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	•••••	5a		<u>x</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	•••••	5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	•••••	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1			
	organization solicit any contributions that were not tax deductible as charitable contributions?	•••••	6a		<u>x</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		~		
	gifts were not tax deductible?		6b	linin ind	061-084
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			NGR IA	
	and services provided to the payor?	••••••		<u>x  </u>	
b			7b	<u>x  </u>	<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?		7c	5 235 m 743	X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Dig the organization receive any funds, unecuy or indirectly, to pay promiting to on a sector as a sector as a		7e		<u>x</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	1?	7g		<u>x</u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			inic i	
	sponsoring organization have excess business holdings at any time during the year?		8	estra si	(developm)
9	Sponsoring organizations maintaining donor advised funds.		에서 1977년 1월 1989년 1월 198	關情	
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	• • • • • • •	9b		Sensiona
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter	1			
а	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources	1			
	against amounts due or received from them.).				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	· · · · · · · · ·	12a	usion are	(JALLES
b	12h	· ]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		300-000 S		ikinin)
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		1814-941-77-8
	Note: See the instructions for additional information the organization must report on Schedule O.				
b				5	
	the organization is licensed to issue qualified health plans	<b>&gt;</b>			
с		;			
148	"Will will be to the to the top the top top the top		14a		x
b	and the second		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		x
	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?		16		x
10	If "Yes," complete Form 4720, Schedule O.				
EE/			Form	990 (2	2020)
	•				

Form	990 (2020) DAVIDSON-DAVIE COMMUNITY COLLEGE	23-70793	17	Pa	ige 6
Par					<u> </u>
ALCONTACTORY OF	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruc				
	Check if Schedule O contains a response or note to any line in this Part VI				X
Sect	ion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	35			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain on Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	35			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relat onship with				
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		<u>x</u>
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		<u>x</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	• • • • • •	5		<u>x</u>
6	Did the organization have members or stockholders?		6		<u>x</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint				
	one or more members of the governing body?		7a	$\rightarrow$	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
-	stockholders, or persons other than the governing body?		7b	Stribari	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	the year by the following:		8a		7006495
a L	The governing body?		8b	<u>x</u>	
и 9	Each committee with authority to act on behalf of the governing body?			_ <u>x</u>	
э	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		9		x
Sec	tion B. Policies (This Section B requests information about policies hot required by the Internal Revenue Code.)		L L		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	1? • • • • •	11a	x	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			Set.	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to confl Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	icts? • • •	12b	x	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				
	describe in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	_ <u>X</u>	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approval by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			动翻捉	309809) ••
a	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization		15b	Bulantin:	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		16a	READER.	•
۱.				1000	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		的開始		
	organization's exempt status with respect to such arrangements?		16b	<u>Febrier</u>	Beston
Ser	organization's exempt status with respect to such an angements?		1	J	
17	List the states with which a copy of this Form 990 is required to be filed  North Carolina				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 50	)1(c)			
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	• •			
	Own website Another's website X Upon request Other (explain on Schedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest polic	су,			
	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	►			
	JEREMY HIATT (336)821-1436, 4035 PREMIER DRIVE, HIGH POINT, NC 27265				

Form 990 (202		23-7079347	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	ensated Employee	s, and
	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		🔲

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(0	C)		Ŵ	b.		
(A)	(B)			Posi	ition	<i>a</i> .		(D) Paportable compensation from the	(E)	(F)
Name and fitte	Average	(do r	ot che	eck ma	ore the	an ofie both an	linn)	Beportable	Reportable	Estimated amount
	hours	offic	er and	a dire	ector/	rustee)		compensation	compensation	of other
	per week					n antific			from related	compensation
	(list any	승 프	5	đ	×	욕 표		organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	hours for related	divid	stitur	Officer	ey employ	nplo	Former	(112) 1000 111007	(, , , , , , , , , , , , , , , , , , ,	related organizations
	organizations	ctor tor	, ioi		agu Ngu	Yee S	۳. ۲			
	below	Individual trustee or director	trus	Ĩ	yee	mpe				
	dotted line)	ing Ing	l trustee		Å	Highest compensated		-		
	All and a second	Ш¥				g.				
			<b>N</b>							
(1) DAVID BONE	1.00									
Director	- Carlos	X _	(P)					0	<u> </u>	0
(2) Kevin White	1.00		r I		ļ					
Director	,	x						<u> </u>	0	0
(3) Matt_Welborn	_1.00							1	}	
Director	Med 1	x						0	0	0
(4) Jerry Smith										
Director		x						0	0	0
(5) Clark Bunting	1.00									
Director		x						0	0	0
(6) Elizabeth_Gee	1.00	1								1
Director		X						0	0	0
Director		ļ								_
		X						0	0	0
(8) Ryan_Short	1.00									
Director		<u>x</u>	-				-	0	0	0
(9) Danny_Squires	<u> </u>	1								_
Director		x						0	0	0
(10)Kevin_Firquin	1.00	1								
Director		X				 	_	0	0	0
(11) WAYNE UNDERWOOD		1								
DIRECTOR		<u>x</u>		<u> </u>			_	0	0	0
(12)Chuck_McConkey	1.00	1								
Director		X						0	0	0
(13)BRADY_KOONTZ	1.00	)								
Director		x					+	0	0	0
(14)Chad_Fuller	1.00									
Director		X	.1			.[	1	0	0	0
EEA										Form 990 (2020)

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Form 990 (202	0) DAVIDSON-DAVIE COMMUNITY COLLEGE	23-7079347	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated Employed	es, and
	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII	* * * * * * * * * * * * * *	🗌

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(0	C)		s,			
(A)	(B)			Pos	ition	da.		(D) Reportable compensation from the	(E)	(F)
Name and title	Average	(do n	iot che	eck mo	ore th	ar (fi <del>t</del> ) both ar	n.	Beportable	Reportable	Estimated amount
	hours	offic	er and	t a dire	ector/	trüštee)		compensation	compensation	of other
	per week				<u>A</u>	1	46A		from related organizations	compensation from the
	(list any	이 했	in,	đ	k	en Hi	Fomer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	hours for related	direa	stitut	Officer	w en	ploy		(		related organizations
	organizations	ual tr	Institutional	M	) B	vçe t cor				
	below	Individual trustee or director	l trustee		<i>i</i> e	nper				
	dotted line)	D D	S. 8.	~		Highest compensated				
		μþ		和四	哪門	ä				
						i				_
(1) John Ferguson	100									
Director		X	Ø					0	0	0
(2) Jonathan Starnes	<u>1.00</u>	開開始	Í							
Director		x						0	0	0
(3) Michael Holmes										
Director	1.00	x						0	0	0
(4) Tammy Joyce	1.00	1								
Director		x						0	0	0
(5) Teresa Kines	1.00	)								
Director		x						0	0	0
(6) <u>Cammie Webb</u>	1.00									
	ļ	x						0	0	0
(7) Beth Bunce	1.00									
Director		X					-	0	0	0
(8) THOMPSON MILLER	2.00							-		
DIRECTOR		<u>x</u>					_	0	0	00
(9) Karl_Mildiren	<u> </u>	ł								
Director		X						0	0	0
(10)Carolyn MCMANAMY	1.00									
DIRECTOR		x					<u> </u>	0	0	0
(11)Darrin Hartness	<u> </u>									
DIRECTOR		X						0	0	0
(12)MARK_Breeden	<u> </u>							-	_	
Director		X		<u> </u>	<b> </b>		1	0	0	0
(13)REBECCA SULLIVAN	<u> </u>					, I				_
Director		x	+		<u> </u>		_	0	0	0
(14)Beth_Parrott	. <u> </u>	1		ĺ						_
Director	<u> </u>	X						0	0	0
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	00 (2020) DAVIDSON-DAVIE CO	MMUNITY	COLL	EGE						23	3-7079	347	Pa	age 8
Part	VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd H	ligh	est (	Comp	ensa	ated Employees (c	ontinued)	·			
	(A) Name and title	(B) Average hours per week (list any	box	, unles	Po eck m is per d a di	rson is rector	nan one s both a /trustee)		(D) Reportable compensation from the organization	(E) Reporta compensa from rela organiza	ible ation ated	cor	(F) ated amo of other opensatio om the	
		hours for related organizations betow dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated emptoyee	Former	(W-2/1099-MISC)	(W-2/1099-1	MISC)		nization a I organiz	
Direc		1.00	x						0		0			0
	n Stanbery	<u>1.00</u>												
Direc			x					<u> </u>	0		0			0
	vilis Penry	1.00												
	PRESIDENT		x	<u> </u>	X				0		0_			0
	ne Whitehurst	<u> </u>						4						_
	IATE PAST PRESIDENT	0.00	<u>x</u>		X				0		0			0
Secre		2 .00	x		x		4		0		0			0
	remy Hiatt	20_0											÷	
Treas	the second se		x		X		48[		0		0			0
	rry <u>Renegar</u>	<u> </u>			4		b.,							
<u>Presi</u> (22)	dent		x	A		97 AG	<u>Ulter</u> Alle	<u>1997</u>	0		0			0
<u></u>														
(23)			P	<u> </u>			Bartena							····
(24)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~													
(25)			land	J.										*****
1b	Subtotal			• •	• •	• •	• • •	• >						
c	Total from continuation sheets to Part VII, Sect	William .	• • •	••	• •	••	• • •	• >						····
d	Total (add lines 1b and 1c)		• • •	••		• •		• •	0		0			0
2	Total number of individuals (including but not limite	d to those list	ed ab	ove)	who	rec	eived i	more	e than \$100,000 of					
	reportable compensation from the organization												<b>V</b>	0
3	Did the organization list any former officer, director, employee on line 1a? If "Yes," complete Schedule J				or h	ighe	st com	ipens	sated				Yes	No
4	For any individual listed on line a, is the sum of re	portable com	pensa	tion a	and	othe	er com	pens	sation from the		• • • •	3		X
	organization and related organizations gleater than individual	\$150,000? If			·							4		X
5	Did any person listed on line 1a receive or accrue of	compensation	n from	any	unre	elate	d crga	iniza	tion or individual					
Secti	for services rendered to the organization? If "Yes," on B. Independent Contractors	complete Sch	eaule	J tor	suci	n pei	rson					5		x
1	Complete this table for your five highest compensa	ted independ	lent cr	ntra	tors	tha	t recei	ved	more than \$100.00	0 of				
	compensation from the organization. Report comp										vear.			
	(A)						_		(B)		ľ	(C)		
	Name and business addres	s							Description of service	es		Compens	ation	
	annon an ann an a							<b> </b>						
·····	1980													
								-	*					
2	Total number of independent contractors (including	but not limite	ed to t	nose	liste	ed at	ove) i	who					Giodesi	
	received more than \$100,000 of compensation from			)				_				Shikaliy		

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art \	0 (202	0) DAVIDSON-DAVIE COMMUN Statement of Revenue	NITY COLLEGE			23-70793	47 Pag
anna				P5 . 1 /111			
		Check if Schedule O contains a response or note	<u>a to any line in this</u>	Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated campaigns 1a	570,825				
2 0	b	Membership dues 1b				ada da sa sa sa sa sa	
and Other Similar Amounts	С	Fundraising events 1c	601				
en o	d	Related organizations 1d					
ar A	е	Government grants (contributions) 1e					
imi	f	All other contributions, gifts, grants,		er olerte finders			
sr S		and similar amounts not included above 1f					
Oth	g	Noncash contributions included in					
pu			\$ 10,105				
9.6	h	Total. Add lines 1a-1f		571,426			
1	2a		Business Code				And
Revenue	b						
nu	С			A			
eve	d			(1)			
,œ	е			and the second se	à		
	f	All other program service revenue		4			
	g	Total. Add lines 2a-2f		AMIBBIN			liningi selariyasi naj Suna na nashrida
		Investment income (including dividends, interest, an	d				
		other similar amounts)	•••••	4 542,583	<sup>400</sup> 542,583_		
		Income from investment of tax-exempt bond procee					
	5	Royalties				And the first of the state of the	
	<b>C a</b>	(i) Real	(ii) Personal				
		Less: rental expenses 6b 22,126	y 1945				
		Rental income or (loss) 6c 30,00					
		Net rental income or (loss)	( <u>)</u>	30,009	30,009		
			(i) Other				
		sales of assets					
		other than inventory 7a					
<u>o</u>		and sales expenses 7b	Av.,				
eur		Gain or (loss) 7c	<u>a</u> p				
2					andana (Challannalaistea).		<u>enterra de artig</u>
		Gross income from fundraising	•••••				
utner Hevenue		events (not including \$ 601					
,		of contributions reported on line					
		1c). See Part IV line 18					
		Less: direct expenses					
		Mathematica States and a state of the states				<u>Artifiction ni Patrice</u>	SURESCONSIDUALD
		Gross income from gaming					
		activities, See Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities	>			······································	
		Gross sales of inventory, less					
		returns and allowances 10a					
	b	Less: cost of goods sold 10b					a spotteren fan de
	C	Net income or (loss) from sales of inventory					
			Business Code				
D.			900099	5,991	5,991		
1	b	UNREALIZED GAIN/LOSS	900099	3,752,263	3,752,263		
нечелие	c						
Ľ		All other revenue					
		Total. Add lines 11a-11d	••••	3,758,254			
	12	Total revenue. See instructions		4,902,272	4,330,846	0	

	1990 (2020) DAVIDSON-DAVIE COMMUN	ITY COLLEGE	•	23-7079	347 Page 10
-	on 501(c)(3) and 501(c)(4) organizations must complete all colur	nne All othor arganiz-ti	ann muct complete anti-	mp (4)	
Secu	Check if Schedule O contains a response or note to a			mn (A).	
Do n	of include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses All of the second states of the second sta
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	677,867	677 067		
3	Grants and other assistance to foreign	0/1,00/	677,867		
-	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)		Net Net		
9	Other employee benefits				
10	Payroll taxes		and the second s	*	
11	Fees for services (nonemployees):				
а	Management	176,786			
b		1/0,/80		176,786	
c	Accounting	38,840	Constitution	20.040	
d	Lobbying	38,840		38,840	
ē	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	(iii)			
9	(A) amount, list line 11g expenses on Schedule O.)	41,394	41 204		
12	Advertising and promotion	<u> </u>	41,394		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	( <u>87</u> )			·····
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				·
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	35,790	35,790		
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If			er die gewannen die erstellt ver	
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b			· ····		
c	Ny Marina Sana Sana Sana Sana Sana Sana Sana S				· · · · · ·
d			* *		
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	070 077		015 000	
26	Joint costs. Complete this line only if the	970,677	755,051	215,626	0
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here F if following SOP 98-2 (ASC 958-720)				

m 990 (20 <b>art X</b>	220) DAVIDSON-DAVIE COMMUNITY COLLEGE Balance Sheet	2	3-70'	79347 Page 1
	Check if Schedule O contains a response or note to any line in this Part X			1
		(A)	· · ·	(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	208,982	1	911,623
2	Savings and temporary cash investments	2,943,969	2	2,192,86
3	Pledges and grants receivable, net	<u> </u>	3	
4	Accounts receivable, net	89,172	4	60,38
5	Loans and other receivables from any current or former officer, director,		SEQUENTS!	
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	aran sa manananan manan sa	- 880-9854 5	AGUNGALIYA KANDALIYA MANA
6	Loans and other receivables from other disqualified persons (as defined		Magna	
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6 B	REPRESENTATION CONTRACTOR OF THE REPRESENTATION OF THE REPORT OF THE REPORT OF THE REPORT OF THE REPORT OF THE
7	Notes and loans receivable, net		7	
8 9	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 3,992,116			
d	Less: accumulated depreciation 10b 351,202	<u>3,676,704</u>	10c	
11	Investments - publicly traded securities	14,310,464	11	<u>3,640,9</u> 18,547,70
12	Investments, other sequrities, See Part IV line 11			1,136,6
13	Investments - program-related. See Part IV, line 11	1,332,720	13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	22,562,019	16	26 400 20
17	Accounts payable and accrued expenses	3,393	17	26,490,22
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D	· · · ·	21	
	Loans and other payables to any current or former officer, director			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		22	
22	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal incometax) payables to related third		24	
	parties, and other liabilities not included on lines 17,24). Complete Part X			
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	3,393	25	
_	Organizations that follow FASB ASC 958, check here	3,333		
	and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	10,187,636	27	13,308,5
28	Net assets with donor restrictions	12,370,990	28	13, 308, 3
	Organizations that do not follow FASB ASC 958, check here		i tiquiniti	
	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds	TALEN ALAR MUREN ALAR MULEN ALAR	29	na suonna siranuui di
30	Paidein or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	
27 28 29 30 31 32	Total net assets or fund balances	22,558,626	·	26 400 2
33		22,562,019	33	26,490,22
	Total liabilities and net assets/fund balances	22,302,019	1_00	26,490,2 Form <b>990</b> (20

Form	990 (2020) DAVIDSON-DAVIE COMMUNITY COLLEGE	23-7079	9347	Pa	.ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	4,	902,	272
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		970,	677
3	Revenue less expenses. Subtract line 2 from line 1	. 3	З,	931,	595
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	22,	558,	626
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10	26,	490,	221
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. []
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕱 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.			05.051	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	reviewed on a separate basis, consolidated basis, or both:				
b	Were the organization's financial statements audited by an independent accountant?		•• 2b	X	101910101010
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		\$1094.93°	(16) FI	
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		Provident of	09010033	121712930-018
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		a stratteri	- 1823-1143-M	10.0495621119
	Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA				990 (2	2020)
				\-	7

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		DULE A	P	ublic Charity	y Status and Pu	thlic S	unnort		OMB No. 1545-0047	
(For	m 99	0 or 990-EZ)			(c)(3) organization or a sec		••	2020		
Depa	rtment	of the Treasury		Attac	h to Form 990 or Form	990-EZ.			Open to Public	
		enue Service	► Go t	o www.irs.gov/For	m990 for instructions a	nd the late	st informat		Inspection	
DAV		ON-DAVIE C	COMMUNITY COLLEG		rapizationa must a	omploto	this part	Employer Identifica	47	
the state of the s					rganizations must c I through 12, check only	· · ·	uns part.	) See Instruction	NS	
1					es described in section 1	•	) <i>(</i> i).			
2					redule E (Form 990 or 99		y			
3		A hospital or a	cooperative hospital ser	vice organization de	scribed in section 170(b)	)(1)(A)(iii).				
4		A medical rese	arch organization opera	ted in conjunction w	ith a hospital described in	section 1	70(b)(1)(A)(	iii). Enter the		
-	<b>C</b> D		e, city, and state:						****	
5	X				iversity owned or operate	d by a gov	ernmental u	nit described in		
6			)(1)(A)(iv). (Complete P	-	described in section 170(					
7	Н				of its support from a gover			o gonoral public		
	1		ection 170(b)(1)(A)(vi).					le general public		
8			rust described in section		Complete Part II.)					
9					170(b)(1)(A)(ix) operated	d in conjund	ction with a l	and-grant college		
					e instructions). Enter the					
		university:				W	<u></u>			
10					/3% of its support from c	10033998988	3.39m,2655年			
					bject to certain exception ness taxable income (les					
					ion 509(a)(2). (Complete			DUSINESSES		
11					for public safety. See sec		)(4).			
12					e benefit of, to perform th			rry out the purposes		
					in section 509(a)(1) or se					
					type of supporting organ				g.	
	а				d, or controlled by its supp					
				经外级	ppoint or elect a majority	of the dire	ctors or trus	tees of the		
	b		organization. You mus		Sections A and B.	ausnariad	orconinatio			
	Ď				vested in the same pers					
			on(s). You must compl					hage the supported		
	с				zation operated in connec	tion with, a	nd functiona	lly integrated with,		
		its support	ed organization(s) (see	instructions). You m	ust complete Part IV, So	ections A,	D, and E.			
	d				ganization operated in co					
		that is not	functionally integrated	The organization ge	nerally must satisfy a dis	tribution re	quirement a	nd an attentiveness		
	е				ert IV, Sections A and D etermination from the IRS			. 11 111		
	5				egrated supporting organi		атурет, тур	е II, туре III		
	f	Enter the num	her of europarted or anni						[]	
	g	Provide the fol	lowing information abol	ACCP	anization(s).				L	
	(	I) Name of supported	1 organization	(ii) EIN	(III) Type of organization	(iv) is the o	rganization	(v) Amount of monetary	(vi) Amount of	
		A BUILL			(described on lines 1-10 above (see instructions))	listed in you docurt		support (see instructions)	other support (see instructions)	
		ANY ANY			. "			······································		
						Yes	No			
(A)										
/B)			and FULLED THE R.							
(B)										
(C)										
(D)										
(E)										

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

Scher	tule A (Form 990 or 990-EZ) 2020 DAVIDSON-I	DAVIE COMMUN	NITY COLLEG	3E		23-707934	17 Page 2
Pa	rt II Support Schedule for Organiza						
	(Complete only if you checked th						lify under
. <u> </u>	Part III. If the organization fails to	o qualify under	r the tests lis	ted below, ple	ease complet	e Part III.)	
_	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and	ļ					
	membership fees received. (Do not						
	include any "unusual grants.")	1,397,852	835,146	367,222	231,646	571,426	3,403,292
2							* <b>*</b>
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	1,397,852	835,146	367,222	231,646	571,426	3,403,292
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						69 500
6	Public support. Subtract line 5 from line 4						68,502
Se	ction B. Total Support						3,334,790
	endar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
	Amounts from line 4	1,397,852	975 146	267 222	231,646		······
8	Gross income from interest, dividends,		<u> </u>	367,222	231,040	,426	3,403,292
-	payments received on securities loans,						
	rents, royalties, and income from	arrititite	- 19 <u>8</u> , 1	Ŷ			
	similar sources	539,690	1,003,424				
9	Net income from unrelated business	539,690	1,003,424	706,261	632,184	542,583	3,424,142
3	activities, whether or not the business						
	is regularly carried on	W.	AW .				
10	Other income. Do not include gain or						
10	loss from the sale of capital assets	\$	\$154×*				
		R					
44	(Explain in Part VI.)	1,162,314	610,828	484,513	264,751	3,788,263	6,310,669
10	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (s						13,138,103
12	Gloss receipts from related activities, etc. (s	ee instructions)	• • • • • • •	· · · · · · · · · ·		12	
13	First five years. If the Form 990 is for the org						
80	organization, check this box and stop here	t t t t t t t t t t t t t t t t t t t	· · · · · · · · ·				<u></u> ▶∐
	ction C. Computation of Public Suppo						
14	Public support percentage for 2020 (line 6, c	olumn (f), divid	ed by line 11, o	column (f))		14	25.38 %
	Public support percentage from 2019 Sched					15	52.48 %
168	33 1/3% support test - 2020, If the organizat						
	box and stop here. The organization qualifie	s as a publicly s	supported orga	anization			🕨 🗌
	33 1/3% support test - 2019. If the organiza						
	this box and stop here. The organization qua	alifies as a publi	icly supported	organization			· · · · . 🕨 🗴
17a	10%-facts-and-circumstances test - 2020.	If the organizati	ion did not che	ck a box on line	e 13, 16a, or 16	6b, and line 14 i	s
	10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in						
	Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported						
	organization						· · · · · ► 📋
I	0 10%-facts-and-circumstances test - 2019.	If the organizati	ion did not che	eck a box on lin	e 13, 16a, 16b,	or 17a, and lin	e
	15 is 10% or more, and if the organization me						
	in Part VI how the organization meets the fa						
	organization						
18	Private foundation. If the organization did n						· L
	instructions				•		🕨 🗂
EEA							rm 990 or 990-EZ) 2020
						Soliedate A (FO	330 UI <del>3</del> 30-CL) 2020

	duie A (Form 990 or 990-EZ) 2020 DAVIDSON-	DAVIE COMMU	NITY COLLE	GE		23-707934	7 Page 3
Pa	rt III Support Schedule for Organiz	ations Desc	ribed in Sec	tion 509(a)(2	2)		
	(Complete only if you checked t	he box on lin	e 10 of Part I	or if the orga	nization faile	d to qualify und	der Part II.
	If the organization fails to qualif	y under the te	ests listed bel	ow, please co	omplete Part	II.)	
	ction A. Public Support						
	endar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose	<u>``</u>					
3	Gross receipts from activities that are not an						
-	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
-	or expended on its behalf						·
5	The value of services or facilities						
	furnished by a governmental unit to the						
~	organization without charge						
	Total. Add lines 1 through 5			Y			
7a	Amounts included on lines 1, 2, and 3						
K.	received from disqualified persons			Allerand			
D	Amounts included on lines 2 and 3		Á	IIIIIII.			
	received from other than disqualified	,			)))		
	persons that exceed the greater of \$5,000		- AND		14be		
~	or 1% of the amount on line 13 for the year		iliter	Dimmer (			
-	Add lines 7a and 7b			"HUBD			
8	Public support. (Subtract line 7c from						
Ser	line 6.)	ALL P					
	endar year (or fiscal year beginning in) >	(a) 2016		(-) 0010	(1) 0040	() 0000	
	Amounts from line 6	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gross income from interest, dividends,	<u>VES</u>	<u>69</u>				
	payments received on securities loans, rents,		THERE				
	royalties, and income from similar sources	A	are.				
b	Unrelated business taxable income (less	<u>*</u>	····	··· ···		· · · · · · · · · · · · · · · · · · ·	
	section 511 taxes) from businesses	A A A A A A A A A A A A A A A A A A A					
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 106, whether	, et					
	or not the business is regularly carried on	3					
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the organ	ization's first. s	econd. third. fo	ourth, or fifth ta	x vear as a sec	tion 501(c)(3)	
	organization, check this box and stop here		•••••	• • • • • • • • •			
	ction C. Computation of Public Suppor	rt Percentage	e				
15	Public support percentage for 2020 (line 8, c	olumn (f), divid	led by line 13,	column (f))		15	%
16	Public support percentage from 2019 Sched	ule A, Part III, li	ine 15			16	%
Sec	tion D. Computation of Investment In	come Percer	ntage				
17	Investment income percentage for 2020 (line			e 13, column (f	f))	17	%
18	Investment income percentage from 2019 Sc			• • • • • • • • •		18	%
19a	33 1/3% support tests - 2020. If the organiza	tion did not che	eck the box on	line 14, and lin	e 15 is more th	an 33 1/3%, and	line
	17 is not more than 33 1/3%, check this box a	and stop here.	The organizati	on qualifies as	a publicly supp	oorted organizati	on 🕨 🗌
b	33 1/3% support tests - 2019. If the organiza	ation did not che	eck a box on lir	ne 14 or line 19	a, and line 16 i	is more than 33 $^\circ$	1/3%, and
00	line 18 is not more than 33 1/3%, check this b	iox and stop h	ere. The organ	ization qualifies	s as a publicly :	supported organ	ization 🕨 🗌
20	Private foundation. If the organization did no	ot check a box	on line 14, 19a	, or 19b, check	this box and s	ee instructions	🕨 🗌
EEA						Schodulo & (Form	990 or 990-E7) 2020

	A (Form 990 or 990-EZ) 2020 DAVIDSON-DAVIE COMMUNITY COLLEGE 23-70793	347	F	Page
CII L	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete	to C	tiers	^
	and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part		uons	A
	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and C. If you checked box 12d, Part Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete	LI, CON	ipiete	9
ecti	ion A. All Supporting Organizations	Part	(.)	
			Yes	
1	Are all of the organization's supported organizations listed by name in the organization's governing		103	
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	US UU	80
2	Did the organization have any supported organization that does not have an IRS determination of status	903163		Эų
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		10
а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer		Histophon	96
	lines 3b and 3c below.	3a		81
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			10
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the			
	organization made the determination.	3b	9001124	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	CILLIN		
	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	<b>3</b> C	ordiali	
а	Was any supported organization not organized in the United States ("foreign supported organization")? If	12 EBBA		
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a	-8948005	湖
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	-16	的秘密	
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination	100RANA	- SHIPHI	
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part Vi what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c	NEN EN	
	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	<b>EVENDA</b>		10
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a	9804996	.4 <u>8</u> )
	Type I or Type II only. Was any added or substituted supported organization part of a class already		Signale	
	designated in the organization's organizing document?	5b	01111110011	38
C	Substitutions only. Was the substitution metresult of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	5c		1
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	165M	報数報酬	
	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			10000
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	200002335	
	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			2511152
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	Jorepotenteri	x5- >
	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).	8	10.000000000000000000000000000000000000	.0.35
a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	14-137215231	:203
b	Did one of more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			11330
	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			A CONTRACTOR
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		ſ
а	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			Contraction of the second
	supporting organizations)? If "Yes," answer 10b below.	10a		(****
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings.)	10b	1415250152511	151
		(Form 990		

:

	Ule A (Form 990 or 990-EZ) 2020 DAVIDSON-DAVIE COMMUNITY COLLEGE	23-7079347	P	age 5
на	rt IV Supporting Organizations (continued)		r	
11	Has the organization accorded a gift or contribution from one of the full with a second of	82 - Yer	Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	Para data ana d		
u	A person who directly or indirectly controls, either alone or together with persons described in 11c below, the governing body of a supported organization?	2011 C		
h	A family member of a person described in line 11a above?	11		
о С	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or	11 	ib	aonuoui
v	detail in Part VI.	PH (25)		
Sec	tion B. Type I Supporting Organizations	11		
			Vaa	Ne
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membershi		Yes	No
-	more supported organizations have the power to regularly appoint or elect at least a majority of the organization	porone or		
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization	on's officers,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated an	supported		
	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 supp	orted INT	alva misterika	indiai.
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," ex			
	VI how providing such benefit carried out the purposes of the supported organization(s) that ope	(piain in <b>Pari</b>		
	supervised, or controlled the supporting organization.	189.7		BRAC
Sec	tion C. Type II Supporting Organizations	2		
••••			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of	of the directore	168	
	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 of	or managod		
	the supported organization(s).	1 1 I		autous?
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the ast day of the fifth	month of the	illin sinsings :	CALC IN COLUMN
	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	(ii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previ	icusly provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appcinted or elected by	the supported		60.07 M
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain	in in Part VI how		
	the organization maintained a close and continuous working relationship with the supported orga	anization(s).	6040 (46) (694) I	in an
3	By reason of the relationship described in Jine 2, above, did the organization's supported organization	nizations have	<u>}</u>	
	a significant voice in the organization's investment policies and in directing the use of the organization	inization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organ	ization's		
	supported organizations played in this regard.	3		NARA
Sec	tion E. Type III Functionally Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test dur	ing the year (see instruct	tions).	
a	The organization satisfied the Activities Test. Complete <b>line 2</b> below.		,	
b	The organization is the parent of each of its supported organizations. Complete line 3 below	V		
С	The organization supported a governmental entity. Describe in Part VI how you supported a	a government entity (see ir	nstruction	ns).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exem	pt purposes of	ace annen	0.4
	the supported organization(s) to which the organization was responsive? If 'Yes," then in Part V	/i identify		
	those supported organizations and explain how these activities directly furthered their exem	ct purposes,		
	how the organization was responsive to those supported organizations, and how the organizatio	r: determined		
	that these activities constituted substantially all of its activities.	2	a	*******
b	Did the activities described in line 2a, above, constitute activities that, but for the organization'	s involvement,		hash
	one or more of the organization's supported organization(s) would have been engaged in? If "Y			
	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.	2	b	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, dire	ctors, or		
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3		een vaar 19613
b	Did the organization exercise a substantial degree of direction over the policies, programs, and	d activities of each		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in	n this regard. 3	b	
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526.62	<u> </u>	ani		<b>-</b>
•	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizat	ist c ion:	on Nov. 20, 1970 ( <i>explain in</i> s must complete Sections A	Part VI). See
Se	ction A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	·····	(opiioliai)
_2	Recoveries of prior-year distributions	2	· · · · · · · · · · · · · · · · · · ·	
3	Other gross income (see instructions)	3	****	· · · · · · · · · · · · · · · · · · ·
4	Add lines 1 through 3.	4		· · · · · · · · · · · · · · · · · · ·
_5_	Depreciation and depletion	5		······
6	Portion of operating expenses paid or incurred for production or collection			······································
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		· · · · · · · · · · · · · · · · · · ·
Se	ction B - Minimum Asset Amount	I	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	ĭa		
b	Average monthly cash balances	đF	a	
	Fair market value of other non-exempt-use assets	10	3	
	Total (add lines 1a, 1b, and 1c)	281 M.		
е	Discount claimed for blockage or other factors	905. 305.		
	(explain in detail in Part VI):			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7	·····	
	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	etion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
_4	Enter greater of line 2 or line 3.	4		· · · · · · · · · · · · · · · · · · ·
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally in	tea	rated Type III supporting or	Danization
		0	a stranger and a stranger and a st	y
EEA			Schedule /	A (Form 990 or 990-EZ) 2020

	He A (Form 990 or 990-EZ) 2020 DAVIDSON-DAVIE COMMUNITY COLLEGE	23–707 continued)	9347	Page 7
	tion D - Distributions		Currer	nt Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3		
4	Amounts paid to acquire exempt-use assets	4		
5	Qualified set-aside amounts (prior IRS approval required) - provide details in Part VI)	5		
6	Other distributions (describe in Part VI). See instructions.	6		
7	Total annual distributions. Add lines 1 through 6.	7		
8	Distributions to attentive supported organizations to which the organization is responsive			
	(provide details in Part VI). See instructions.	8		
9	Distributable amount for 2020 from Section C, line 6	9		
10	Line 8 amount divided by line 9 amount	10		

Continue E Distribution Allocations (and instructions)	(i)	(ii) Underdistributions	(iii) Distributable	
Section E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2020	Amount for 2020	
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2020				
(reasonable cause required - explain in Part VI). See				
instructions.				
3 Excess distributions carryover, if any, to 2020				
a From 2015				
<b>b</b> From 2016				
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through 3e				
g Applied to underdistributions of prior years				
h Applied to 2020 distributable amount				
i Carryover from 2015 not applied (see instructions)				
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f	A P			
4 Distributions for 2020 from				
Section D, line 7: \$				
a Applied to underdistributions of prior years				
b Applied to 2020 distributable amount			and the second	
c Remainder. Subtract lines 4a and 4b from line 4.	and the second			
5 Remaining underdistributions for years prior to 2020, if				
any. Subtract lines 3g and 4a from line 2. For result				
greater than zero, explain in Part VI See instructions.				
6 Remaining underdistributions for 2020 Subtract lines 3h				
and 4b from line 1. For result greater than zero, explain in				
Part VI. See instructions				
7 Excess distributions carryover to 2021. Add lines 3j and 4c.				
and 4c.	New Strategie Stratic Local Distances			
8 Breakdown of line 7:				
a Excess from 2016 .				
b Excess from 2017				
c Excess from 2018				
d Excess from 2019				
e Excess from 2020			edule & (Form 990 or 990-EZ) 2020	

Page 8 (Form 990 or 990-EZ) 2020 Part VI Supplemental Information. Provide the explanations required by Part II, line `0; 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.) 4000000 4 

Schedule A (Form 990 or 990-EZ) 2020

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### Schedule B

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

## **Schedule of Contributors**

OMB No. 1545-0047

or 990-PF)	Attach to Form 000 Form 000 F7 or Form 000 PF	<ul> <li>Attach to Form 990, Form 990-EZ, or Form 990-PF.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>		
Department of the Treasury Internal Revenue Service				
Name of the organization		Employer iden	tification number	
DAVIDSON-DAVIE CO		23-7079347		
Organization type (check	one):			
Filers of:	Section:			

Form 99	0 or 990-EZ	∑ 501(c)( 3 ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		ed by the General Rule or a Special Rule.
Note: Or instruction	nly a section 501(c)(7), (8) ins.	, or (10) organization can check boxes for both the General Rule and a Special Rule. See
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 pro	perty) from any one contributor. Complete Parts I and II. See instructions for determining a
Cm a alal I	contributor's total contribu	Jaions.
Special	Rules	The second se
x	For an organization desc	ribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the
	regulations under section	ns 509(a)(1) and 170(b)(1)(A)(vi)) that checked Schedule A (Form 990 or 990-EZ), Part II, line
		received from any one contributor, during the year, total cortributions of the greater of (1) amount on (i) Form 990, Part-VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
		mount of Winder 350, Pate vin, intern, of (i) Forn 350-Ez, inter. Complete Pars Fand II.
	For an organization desc	ribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one
	contributor, during the year	ar, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scien fic,
	"N/A" in column (b) incto	rposes for for the prevention of cruelty to children or animals. Complete Parts I (entering
		ad of the contributor name and address), II, and III.
	For an organization desc	tbed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one
	contributor, during the yea	ar, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such
		e than \$1,000. If this box is checked, enter here the total contributions that were received
		<i>lusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the his organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions
	totaling \$5,000 or more d	iuring the year ••••••••••••••••••••••••••••••••••••
		t covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, Inswer "No" on Part IV, line 2, of its Form 900; or check the box on line Li of its Form 900. F7 and a the
		nswer "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).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Employer identification

Name of org			Employer identification number
Part	-DAVIE COMMUNITY COLLEGE		23-7079347
	Contributors (see instructions). Use duplicate copies of F	art I it additional spac	e is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
<u>    1     </u>	SUMMER AND MARK DAVIS		Person 🕅 Payroll 🗌
	308 RIDGECREST DRIVE LEXINGTON NC 27292	\$40,	.000 Noncash (Complete Part II for noncash contributions.)
(c)			· · · · · · · · · · · · · · · · · · ·
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
_2_	WAKE FOREST BAPTIST MEDICAL CENTER		Person 🛛 Payroll
	ONE MEDICAL CENTER BOULEVARD	\$ 20	Noncash
	WINSTON SALEM NC 27157-1023		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
3	GENE HAAS FOUNDATION		Person x Payroll
	2800 STURGIS ROAD       OXNARD CA 93030	₽ ₽27,	.500 Noncash ( (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
4	NOVANT HEALTH THOMASVILLE MED CTR PO BOX 789	\$20	Person x Payroll ,000 Noncash
_	THOMASVILLE NC 27361		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
5	DUKE ENERGY FOUNDATION 220 N TRYON ST CHARLOTTE NC 28202 (b)	\$125	PersonxPayrollINoncashI(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
6	ESTATE OF CAROLYN POWERS COX          22 WINSTON ST         THOMASYLLLE NC 27260	\$120	,000 Person x Payroll Noncash (Complete Part II for
•	THOMASVILLE NC 27360	1	noncash contributions.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Employer identification number

art	I-DAVIE COMMUNITY COLLEGE Contributors (see instructions). Use duplicate copies of F	Part Lif additional enace	23-7079347
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
	ESTATE OF MARY DAVIS 212 CHESTNUT ST	\$15,-	Person 🖳 Payroll 🗌 789 Noncash 🗍
	LEXINGTON NC 27292		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Is Type of contributio
		\$	Person       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contributio
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contributio
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	Name address, and ZIP + 4	(c) Total contribution	(d) s Type of contributio
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person [] Payroll [] Noncash []

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

SCHEDULE D	
(Form 990)	

	HEDULE D	Supplemen	tal Financial Statements		OMB No. 1545-0047
(Fo	(Form 990) ► 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.				2020
	b. Attack to Form 000				
	Department of the Treasury F Attach to Form 990. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.				Open to Public Inspection
	of the organization		s for mon doctors and the latest mormalion	Employer identification	
DAV	IDSON-DAVIE C	OMMUNITY COLLEGE	3	23-707934	
Pa			nds or Other Similar Funds or Accour	nts.	
	Complete	if the organization answered "Yes" on	Form 990, Part IV, line 6.		
			(a) Donor advised funds	(b) Funds a	nd other accounts
1		d of year ••••••			
2		contributions to (during year)			
3 4		grants from (during year)			
4 5	Aggregate value at				
5		n inform all donors and donor advisors in wri			
6		nization's property, subject to the organization n inform all grantees, donors, and donor adv			- 🗌 Yes 📋 No
-		purposes and not for the benefit of the donor			
		· · · ·			. ∏Yes ∏No
Pa		vation Easements.			
	Complete	e if the organization answered "Yes" or	n Form 990, Part IV, line 🛝		
1	Purpose(s) of cons	ervation easements held by the organization	(check all that apply).		
		f land for public use (e.g., recreation or educ	ation)	a historically importa	nt land area
	Protection of na			a certified historic str	
~	Preservation of				
2			conservation contribution in the form of a conservation	ervation	····
а		st day of the tax year.			he End of the Tax Year
b		icted by conservation easements	· · · · Marine · · · · · · · · · · · · · · · · · · ·	• <u>2a</u>	
č		ation easements on a certified historic struct		• 2b	·····
d		ation easements included in (c) acquired after		. <u>2c</u>	
		ted in the National Register		. 2d	
3			sed, extinguished, or terminated by the organiz		
	tax year  🕨			0	
4		here property subject to conservation easen			
5		ion have a written policy regarding the period			_
~		prcement of the conservation easements it he		• • • • • • • • • •	· 🗍 Yes 🗌 No
6			ndling of violations, and enforcing conservation		
7	Amount of expense		g of violations, and enforcing conservation ease		
•	Amount of expense • \$	s incurred in monitoring, inspecting, nandling	g of violations, and enforcing conservation easi	ements during the ye	ear
8	Does each conserv	ation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)(3	<b>N/I</b> N	
	and section 170(h)(	(4)(B)(ii)?			Yes No
9	In Part XIII, describ	e how the organization reports conservation	easements in its revenue and expense statem	ent and	
	balance sheet, and	include, it applicable, the text of the footnote	to the organization's financial statements that	describes the	
	organization's acco	unting for conservation easements.			
Pa			of Art, Historical Treasures, or Ot	ther Similar As	sets.
		te if the organization answered "Yes" o			
1a	If the organization e	elected, as permitted under FASB ASC 958,	not to report in its revenue statement and balar	nce sheet works	
	of art, historical trea	asures, or other similar assets held for public	exhibition, education, or research in furtherand	ce of public	
b		Part XIII the text of the footnote to its financial		-ht • -	
U			to report in its revenue statement and balance : khibition, education, or research in furtherance		
		g amounts relating to these items:	Nationality, education, or research in furtherance	or public service,	
				<b>b</b> ¢	
		d in Form 990, Part X		····	
2		eceived or held works of art, historical treasu	ures, or other similar assets for financial gain, p	provide the	
		required to be reported under FASB ASC 958			

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

b Assets included in Form 990, Part X ▶ \$ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

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	le D (Form 990) 2020 DAVIDSON-DAVIE COM					23-70793		Page 2
Par	t III Organizations Maintaining Colle	ections of A	Art, Historica	I Treasures,	or Oth	er Similar Ass	ets (con	tinued)
3	Using the organization's acquisition, accession, and o	other records, c	heck any of the f	ollowing that mak	e significa	ant use of its		
	collection items (check all that apply):							
а	Public exhibition		d 🗌 La	an or exchange p	rograms			
b	Scholarly research		_	her	0			
с	Preservation for future generations							
4	Provide a description of the organization's collections	and explain ho	w they further the	organization's e	vernnt nu	rnose in Part		
	XIII.		and and a second s	o ganzaion o a	Nompt pu			
	During the year, did the organization solicit or receive	donations of a	rt bistorical troas	urce or other ein	ilor			
	assets to be sold to raise funds rather than to be mai						T Yes	
Par			or the organizate	IT'S CORECTOR:				
PIENICOR	Complete if the organization answ		on Form 990	Part IV line 3	a or rei	norted an amou	int on Ec	ากมา
	990, Part X, line 21.			r arriv, mo .	, 01 10	portou un unot		2010
1a	Is the organization an agent, trustee, custodian or oth	or intermedian	for contributions	or other accets	unt.			<u> </u>
							[] Vaa	
ħ	If "Yes," explain the arrangement in Part XIII and corr						• 📋 Yes	
5	in res, explain the analigement in Part XIII and com	spiete the follow	ing table:	•	1			
~	Paginning balance				-	Amo	unt	
C J	5 5			• • • • • • • • •				
d	Additions during the year			A				
e	Distributions during the year			補助	• <u>1e</u>			
Ţ	Ending balance			WB3	• 1f		<b>(</b>	
2a	Did the organization include an amount on Form 990			100 100 100 100 100 100 100 100 100 100	-		Yes [	
	If "Yes," explain the arrangement in Part XIII. Check I	here if the expla	nation has been	provided on Part,	<u>XIII -</u>			
Par				D. AV III				
	Complete if the organization answ	/ered "Yes" (	Processor.	2032			т <u> </u>	
		Current year		(c) Two years		(d) Three years back	(e) Four y	ears back
1a		,095,669	10,009>34	48576244	,335	9,778,666	9,66	64,151
b	Contributions	271,141	85,34	6 🖤 111	,686	115,476	1(	05,708
С	Net investment earnings, gains, and							
	losses	<u>\$7,603</u>	314,03	34 332	,460	249,115	29	99,400
d	Grants or scholarships	309,703	313,05	<u>58 337</u>	,134	240,922	29	90,595
е	Other expenditures for facilities and		AW .					
	programs		L.					
f	Administrative expenses	""UUUUUU	1558 ·					
g	End of year balance	,094,710	10,095,60	59 10,009	,347	9,902,335	9,7	78,664
2	Provide the estimated percentage of the current year	end balance (li	ine 1g, column (a	)) held as:				
а	Board designated or quasi-endowment	Sharp %	1					
b	Permanent endowment 🕨 100.00 %							
С	Term endowment							
	The percentages on lines 2a, 2b, and 2c should equa	al 100%.						
3a	Are there endowment funds not in the possession of	the organization	n that are held ar	nd administered fo	or the			
	organization by:	-					·	Yes No
	(i) Unrelated organizations						3a(i)	x
	(ii) Related organizations						3a(ii)	x
b	If "Yes" on line 3a(ii), are the related organizations lis	sted as required	on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the organiz							
Pa	tVI Land, Buildings, and Equipmen							
	Complete if the organization answ		on Form 990	, Part IV, line	11a. Se	e Form 990, P	art X, lin	e 10.
	Description of property	(a) Cost or othe		Cost or other basis		Accumulated	(d) Book	
		(investme		(other)		epreciation	(4) 2008	1000
1a	Land	1		2,928,349	is]kitthkni		ייי יי	28,349
b	Buildings				ottenny (97.1	227 000		
~ c	Leasehold improvements			912,965		227,888	6	85,077
d	Equipment			64 000		64 000		
۰ ۵				64,000		64,000		07 400
Totol	Other	I COO Part V	column (D) line i	86,802	)	<u>59,314</u>		27,488
TOUR	. Too mes ra mough re. (Column (a) must equal Fol	нн ээо, <b>г</b> ап Х,	сошта (а), ште т	Ulij • • • • •		🏲	3,6	40,914

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 DAVIDSON-DAVIE COMMUNITY COM Part VII Investments - Other Securities.	LLEGE	23-	-7079347 Pag	ge 3
Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11b. See Form	990 Part X line 1	2
(a) Description of security or category (including name of security)	(b) Book value	(1	Method of valuation:	<u> </u>
(1) Financial derivatives	• ••••••••••			
(2) Closely-held equity interests				
(3) Other				
(AFRONT STREET 1	709,170	FMV		
(BFRONT STREET 2	427,500	COST		
(C)				
(D)				
<u>(E)</u>				
<u>(F)</u>				
(G) (H)				
	1 100 000			Saculari
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)         Part VIII       Investments - Program Related.	1,136,670			100102
Complete if the organization answered "Yes" on For	m 990. Part IV lin	e 11c. See Form	990 Part X line 1	3
				<u>.</u>
(a) Description of investment	(b) Book value		b) Method of valuation: r end-of-year market value	
(1)		·····		
(2)				
(3)	ATTEN AND A			
(4)	1 AP 1			
(5)				
<u>(6)</u>	- Come			
(7)				
(8)				
			ander an var. In state to other the state of the second second	
Part IX Other Assets.	1 203 s			
Complete if the organization answered "Yes" on For	m 990. Part IV lin	e 11d. See Form	990 Part X line 1/	5
(a) Description		<u>o 114. 000 i olili</u>	(b) Book value	<u>J.</u>
(1)			(b) BOOK VAIUB	
(2)		·····		
(3)	· · · · · · · · · · · · · · · · · · ·			
(4)				
(3)				
(7) (8)				
(8) (9)				
Total. (Column (b) must equal Form 990; Part X, col. (B) line 15.)				
Part X Other Liabilities.				
Complete if the organization answered "Yes" on For	m 990. Part IV. line	e 11e or 11f. See	Form 990 Part X	
line 25.			1 onn 000, 1 arra,	J
1. (a) Description of liability (b) Book v	/alue			
(1) Federal income taxes				
(2)				
(3)				
(4)				5
(5)				
(6)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)				
2 Liability for upcertain tax positions. In Part XIII, provide the text of the feature to the				品的法

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

Sche	UNE D (Form 990) 2020 DAVIDSON-DAVIE COMMUNITY COLLEGE		
Pa	Reconciliation of Revenue per Audited Financial Statements With Povonue ne	<u>3-7079</u> <b>r Retur</b>	<u>347 Page 4</u> n.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
2	Total revenue, gains, and other support per audited financial statements	1	4,902,272
<u>م</u>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
b	Net unrealized gains (losses) on investments       2a         Donated services and use of facilities       2b		
c			
d			
e	Other (Describe in Part XIII.) 2d 2d		
3	Subtract line 2e from line 1	2e	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	4,902,272
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
с	Add lines 4a and 4b		
5	Total revenue Add lines 2 and 4. (This must be (T	4c	······
Pa	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses	5	4,902,272
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	per Het	urn.
1	Total expenses and losses per audited financial statements	r	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	<b>1</b>	970,677
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	070 077
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		970,677
a ⊾	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
5	Add lines 4a and 4b	4c	
Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	970,677
: Par	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	
,	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
			<u></u>
	WEIGHT WEIGHT		
		·····	
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Schedule D (Form 990) 2020

SCHEDULE G (Form 990 or 990-EZ)	Supplemental Inf	ormatic	on Regar	ding Fun	draising or Gar	ning Act	tivities	OMB No. 1545-0047
Department of the Treasury	Complete if the or organi				990, Part IV, line 17, 18 Form 990-EZ, line 6a	B, or 19, or i	f the	2020
nternal Revenue Service		Au	аси ю ноги	1 990 or Eorm	990-EZ. Id the latest informati			Open to Public Inspection
lame of the organization							Employer Ide	entification number
Pavidson-davie com	UNITY COLLEGE	aloto if th	o organi		1.052 8	··· <u>·</u>	23-70	79347
Form 990-EZ	Activities. Comp filers are not require	ad to com	ie organi inloto thic	zauon ans	wered "Yes" on	Form 99	90, Part IV,	line 17.
1 Indicate whether the org	anization raised funds	through an	v of the foll	part. Wind activitie	es Check all that an			
			e 🗌	Solicitation o	f non-government gr	uiy. ants		
<b>b</b> Internet and email so	dicitations		f 🗌	Solicitation o	f government grants			
c Definition Phone solicitations d Definition solicitation	•		g 📙	Special fund	raising events			
2a Did the organization hav		emont with	onvindhidd	hant din ala alba				
or key employees listed	in Form 990, Part VII) (	or entity in	connection	with professio	onal fundraicing con-	inco?	<b></b> ,	<b>—</b>
D II "Yes," list the 10 highe	st paid individuals or er	ntities (func	Iraisers) pu	rsuant to agre	eements under which	ices <i>:</i> 1 the fundra	iser is to be	es 📋 No
compensated at least \$	5,000 by the organizatio	on.		Ū				
			·······	·	·········			
<ul> <li>(i) Name and address of i or entity (fundraiser</li> </ul>	ndividual	ctivity	(iii) Did fur	draiser have r control of	(iv) Gross receipts		ount paid to ained by)	(vi) Amount paid
	, , , , , , , , , , , , , , , , , , , ,	iotivity		outions?	from activity	fundrais	er listed in	(or retained by) organization
		_	Yes	No		C	ol. (i)	
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2	<u></u>							
3				Allin A				
				COMPANY				
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3 List all states in which the	organization is register	ed or licens	sed to solici	t contribution:	s or has been notified	d it is exem	í pt from	
registration or licensing								
AT		· · · · · · · · · · · · · · · · · · ·	w			nwn		
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				<u></u>		<u></u>		
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							- <b>70.</b> - 710.	- <b>F</b>

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

	art	Fundraising Events, Com	VIDSON-DAVIE COM	n answered "Vee" on Form	000 Dest N/ Res di	23-7079347 Pag
		than \$15,000 of fundraising gross receipts greater than	event contributions a	and gross income on Form	990-EZ, lines 1 and	<ol> <li>or reported more</li> <li>6b. List events with</li> </ol>
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
e			(event type)	(event type)	(total number)	(add coi. (a) through col. (c))
Hevenue	1	Gross receipts	······			
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
0001	6	Rent/facility costs				
מיוברו ריאבופבא	7	Food and beverages	· · · · · · · · · · · · · · · · · · ·			
	8	Entertainment				
	9	Other direct expenses				
	10 11	Direct expense summary. Add lines 4 Net income summary. Subtract line 1	through 9 in column (d)		· · · · · · · · · · · · · · • •	•
á	rt II	Gaming. Complete if the or \$15,000 on Form 990-EZ, I	ganization answered		, line 19, or reported	⊦   I more than
			ine ba.			
		-	(a) Bíngo	Voingo/progres∈ ve bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
$\frac{1}{1}$	1	Gross revenue				
	2	Cash prizes				
	3	Noncash prizes		~		
ļ	4	Rent/facility costs				
	5	Other direct expenses .	A Nor			
			Yes %	Yes %   [	Yes 9	6
		Volunteer labor	No	No [	No	
	7	Direct expense summary. Add lines 21	through 5 in column (d)	••••••••••••••		
	7	Direct expense summary. Add lines 21	through 5 in column (d)	••••••••••••••	<u>No</u>	
	7 8 Ente	Direct expense summary. Add lines 2 f	No through 5 in column (d) the 7 from line 1, column	nn (d)	<u>No</u>	
	7 8 Ente Is th	Direct expense summary. Add lines 21	No through 5 in column (d) the 7 from line 1, column	nn (d)	<u>No</u>	Yes No
	7 8 Ente Is th If "N	Direct expense summary. Add lines 2 f Net gaming income summary. Subtract er the state(s) in which the organization he organization licensed to conduct gam lo," explain:	No through 5 in column (d) through 7 from line 1, colum conducts gaming activiti ning activities in each of t	nn (d)	No · · · · · · · · · · ·	· · · · · ] Yes ] Ni
	7 8 Is th If "N	Direct expense summary. Add lines 2 f Net gaming income summary. Subtract er the state(s) in which the organization he organization licensed to conduct gam	No through 5 in column (d) through 7 from line 1, colum conducts gaming activiti ning activities in each of t	nn (d)	No · · · · · · · · · · ·	· · · · · ] Yes ] No

SCHEDU (Form 99) Department of the Internal Revenue Name of the orga	0) ne Treasury e Service	Gove	ants and Other rnments, and I b if the organization an b Go to www.irs.go	ndividuals in swered "Yes" on For Attach to Form 990.	the United Sta m 990, Part IV, line 21	atoe		OMB No. 1545-0047 2020 Open to Public Inspection
-							Employer identification	
Part	-DAVIE COMMUNITY COLLE General Information on	Grants and Assis	tance				23-7079347	
the sel	the organization maintain records to ection criteria used to award the gra- be in Part IV the organization's proc	ants or assistance?	e use of grant funds in t	ne United States.	• • • • • • • • • • • • •	• • • • • • • • • • • • • • • •		. 🛛 Yes 🖾 No
Ealth	Grants and Other Assistan Part IV, line 21, for any recip	ce to Domestic Orga ient that received mo	anizations and Dom	estic Government	s. Complete if the or	ganization answered "Y	es" on Form 990,	
<b>1 (a)</b> Nar	me and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- ceash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)				4		other)		
(2)								
(3)								
(4)		<u>A</u>						<u> </u>
(5)								
(6)	\$							
(7)								
(8)								
(9)								
(10)								
3 Enter tota	al number of section 501(c)(3) and al number of other organizations lis k Reduction Act Notice, see the li	ted in the line 1 table				 		

Schedule-I (Form 990) (2020)

Schedule I (Form 990) (2020)	DAVIDSON-DAVIE COMMUNITY	0011202
( 0000) (0000)	DAVIDSON-DAVIE COMMONITY	COLLEGE

Part III Can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS		677,867		FMV	
					<u> </u>
	_				· · · · · · · · · · · · · · · · · · ·
		<b>A</b>			
ut IV Supplemental Information. Provide					
rt IV Supplemental Information. Provide				(b), and any other addition	
				·······	
	A CONTRACTOR OF A CONTRACTOR O				
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			· · · · · · · · · · · · · · · · · · ·		
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Page 2

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SCHEDULE L		-	Transactio	ne	With Ir	Itoraet	od Do	***			1 -			
(Form 990 or 990-EZ)	⊳c	omplete if the c	organization and	swere	ed "Yes" o	n Form 99	ICUITE IN Part IV	, line 25a, 25b, 2	C 07 0	<b>n</b> _		MB No.	1545-00	147
			280, or 280, (	or For	'm 990-EZ	, Part V, Iır	1e 38a or	40b.	0, 27, 21	sa,		20	)20	
Department of the Treasury Internal Revenue Service		► Coto	► Atta	ach to	Form 990	) or Form :	990-EZ.				C	Dpen	o Pub	licess
Name of the organization	I	- 4010	www.irs.gov/Fo	məə	o for Instri	ictions an	d the late		loyer ide	-	h	nspec		
DAVIDSON-DAVIE	COMMUN	ITY COLLEG	F.											
Part Excess	Benefit	Transactions	s (section 501(	c)(3).	section !	501(c)(4)	and ser	tion 501(0)/20)	-7079	mation				
Complet	te if the c	organization a	nswered "Yes	" on F	orm 990	Part IV	line 25a	or 25b, or Forn	n qqn_l	12a1101 17 D	ns only art V i	y). line 1	0 h	
1 (a) Name of disgu			(b) Relationship be	etween o	disqualified pe	rson and		0. 200, 0. 01	1000-1	<u> </u>	aitv,		T"	
				organiza	ation			(c) Descriptio	on of trans	action			Yes	No
(1)													1.00	
			······································	·	<u></u>									
(2)														
<del>```</del>			····											
_(3)														
2 Enter the amount of	of tax incu	rred by the orga	nization manage	ers or (	disqualified	persons d	luring the	Voer						
under section 4958	3						•••••				¢			
3 Enter the amount of	of tax, if ar	ny, on line 2, abo	ve, reimbursed l	by the	organizati	. הכ	• • • •				φ \$			
Part II Loans to								L.			Ψ			
	o and/or	From Interes	sted Persons.				Y							
organizat	tion repo	orted an amou	nt on Form 99	on F	orm 990- vrt X line	EZ, Part	VI line 3	8a)or Form 990	), Part I	IV, lin	e 26; d	or if th	ie	
(a) Name of interested per				T		Allight A	DRIPA.		<u> </u>	······································				
(d) reame of interested per	son	(b) Relationship with organization	(c) Purpose of		) Loan to or from the	41. 101 12	riginal	(1) Balance due	(g) In (	default?	(h) Ap	proved	(i) W	ritten
		3	loan		ganization?	<pre>principal</pre>	I amount				by bo		agree	ment?
<u> </u>				То	From		URR W			T	comm			
				<u> </u>		- Alith	All Providence		Yes	No	Yes	No	Yes	No
(1)					r   W.	J								
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Total			ann an	* * *		* * * * * *	• ► \$			Marilar	line i su	Sides.	ORTHONY	abierad
Part III Grants of	or Assis	tance Benefi	ting Intereste	d Pe	rsons.			·····	42.5210113		0006048			
Complet	e if the c	prganization a	swered "Yes"	on F	orm 990,	Part IV, I	line 27.							
(a) Name of interested pe	irson	(b) Relationshi	p between interested	1	(c) Amount of	assistance	(d	Type of assistance		(e)	> Purpose	a of seel	etanco	
#*************************************	-	person an	f the organization				ļ				,		0104100	
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AY -	Â		<u></u>				<u> </u>	·· ·· ··		<u>.</u>				-n
(3)														
AVV.	Ŵ							**						
(4)	International Contraction													
(5)														
		<u> </u>					1							

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

	ion answered "Yes" on Form 99	90, Part IV, line 28a,	28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of ransaction	(d) Description of transaction		aring of zation's wes?
			• · · · · · · · · · · · · · · · · · · ·	Yes	No
SMITH LEONARD CPAS	DIRECTOR				
· · · · · · · · · · · · · · · · · · ·		33,840	ACCOUNTING SERVICES		x
	······································		<u> </u>		
				_	
t V Supplemental Information	n.				
Provide additional informat	ion for responses to questions	on Schedule L (see	instructions).		
		N.	······································		
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SCHEDULE O	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	2020
Department of the Treasury Internal Revenue Service	<ul> <li>Attach to Form 990 or 990-EZ.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>	Open to Public Inspection
Name of the organization		Employer Identification number
DAVIDSON-DAVIE C	OMMUNITY COLLEGE	23-7079347
<u>01. Form 990 gov</u>	erning body review (Part VI, line 11)	
FORM 990 IS PRESI	INTED BY THE TREASURER TO THE EXECUTIVE COMMITTEE AND THE FU	LL BOARD FOR
REVIEW.		
02. Conflict of	interest policy compliance (Part VI, line 12c)	
	R OBTAINS COMPLETED ACKNOWLEDGEMENT AND DISCLOSURE FORMS FRO	DM ALL
DIRECTORS EACH YE	AR. BOARD OF DIRECTORS REVIEWS ALL FORMS EACH DEAR.	
<u>03. Form 990 ava</u> :	Llability to public (Part VI, line 18)	
NO DOCUMENTS AVAI	LABLE TO PUBLIC.	
······································		
04. Governing doc	numents, etc, available to public (Part VI, line 19)	
AVAILABLE UPON RE		······································
05. Explanation of	of other changes in net assets or fund balances (Part XI, 1	inc 0)
TO BALANCE.		
06. List of other	fees for services expenses (Part IX, line 11g)	
HEALTH SCIENCES		

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

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Schedule O (Form 990 or 990-EZ) (2020)

SCHEDULE R (Form 990)	Relat ► Complete if the	ed Organiz organization an	swered "Yes	and Unrelated " on Form 990, Part I h to Form 990,	<b>Partnerships</b> V, line 33, 34, 35b, 36,	or 37.		OMB No. 154 <b>202</b> Open to P	0
Internal Revenue Service	► Go t	o www.irs.gov/F		structions and the la	test information.			Inspect	Statute and the state of the second state of t
	COMMUNITY COLLEGE						Employer identificatio 23-7079347		
Faitr Identific	ation of Disregarded Entities. Cor	nplete if the o	rganizatior		on Form 990, Pa	t IV, line 33.	······································		
	(a) Name, address, and EIN (if applicable) of disregarded entity DCCC HOLDINGS, LLC, 26-2432433			(b) rimary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f Direct cor	
P.O. BOX 1287									lity
LEXINGTON NC 2	7293		REAL EST	ATE	NC	52,135		N/A	
(2)									
(3)									
(4)									<u>.</u>
(5)	tion of Related Tax-Exempt Organ	nizations Co	mplete if th		nswered "Yes" on	Form 990, Part	IV. line 34 beca	ause it had	
	(a) (ddress, and EIN of related organization		IX YEAR. (b) ry activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501 (c) (3))	(f) Direct controlling entity	( Sec. 51 controlle	g) 2(b)(13) ed entity?
(1) Davidson County 297 DCCC Road Thomasville NC	27360	College		NC	N/A			Yes	No
(2)					M/A		N/A		X
(3)									
(4)									
(5)									·

Schedule R (Form 990) 2020

DAVIDSON-DAVIE COMMUNITY COLLEGE

23-7079347

~ 2 \_

	because it had on (a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end- year assets	of- Disproj	1) portionate ations?	(i) Code V-UB amount in bo of Schedule I (Form 1068	x 20 man K-1 par	eral or aging tner?	(k) Percentage ownership
1)					sections 512-514)			Yes	No		Yes	No	
2)			** <u> </u>							<u></u>			
)		• • • • • • • • • • • • • • • • • • •											
,													
,		·····											
						÷							
	IV Identification of R line 34, because it I (a) Name, address, and EIN of related orga	nau one or more	tions Taxable related organi (b) Primary activity	as a Cornorati	on or Trust. Composition or (d)	clete if the of trust durin (e) Type of c (C corp, S co	entity	On answ rear. (f) mare of total income	s	Yes" on F (g) Share of -year assets	Form 990 (h) Percentage ownership	Section	(i)
art	(a) Name, address, and EIN of related orga		related organi	as a Corporation zations treated a (c) Legal domic	on or Trust. Composition or (d)	trust durin (e) Type of e	entity	(f) nare of total	s	(g) Share of	(h) Percentage	Section	(i) 512(b)(13 htrolled
art	(a) Name, address, and EIN of related orga		(b)	as a Corporation zations treated a (c) Legal domic	on or Trust. Composition or (d)	trust durin (e) Type of e	entity	(f) nare of total	s	(g) Share of	(h) Percentage	Section cor er	(i) 512(b)(13 ntrolled ntity?
art	(a) Name, address, and EIN of related orga		(b)	as a Corporation zations treated a (c) Legal domic	on or Trust. Composition or (d)	trust durin (e) Type of e	entity	(f) nare of total	s	(g) Share of	(h) Percentage	Section cor er	(i) 512(b)(13 ntrolled ntity?
art	(a) Name, address, and EIN of related orga		(b)	as a Corporation zations treated a (c) Legal domic	on or Trust. Composition or (d)	trust durin (e) Type of e	entity	(f) nare of total	s	(g) Share of	(h) Percentage	Section cor er	(i) 512(b)(1: ntrolled ntity?

Schedule R (Form 990) 2020 DAVIDSON-DAVIE COMMUNITY COLLEGE	
	23-7079347
Part V Transactions with Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Part IV, line 34, 35b, or 36.
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	
<ol> <li>During the tax year, did the organization engage in any of the following transactions with one or more related organizations li</li> <li>a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity</li> </ol>	1a
<ul> <li>c Gift, grant, or capital contribution from related organization(s)</li> <li>c Gift, grant, or capital contribution from related organization(s)</li> <li>d Leaps or leap guarantees to or for related econication(s)</li> </ul>	1b 1c

e	Loans or loan guarantees by related organization(s)	1d		
	Coans or loan guarantees by related organization(s)	1e		
f	Dividends from related organization(s)			
c		lf		1
-		1g		
1	a conditioned of assets from related organization(s)	1h	<u>├</u> ──	<u> </u>
i				<u> </u>
j	Lease of facilities, equipment, or other assets to related organization(s)	11	<u> </u>	L
	Lease of facilities, equipment, or other assets to related organization(s)	1j	'	
Ŀ				
	Lease of facilities, equipment, or other assets from related organization(s)	1k	din (122111)	u estatute
			┢────┦	
n	Performance of services or membership or fundraising solicitations by related organization (s)	11	⊢	<u> </u>
n	Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s)	1m		
-	Sharing of paid employee with related events in the assets with related of gainzation(s)	1n		
Ŭ	Sharing of paid employees with related organization(s)	10		
				mittani
р	Reimbursement paid to related organization(s) for expenses		Concentrations	
q	Reimbursement paid by related organization(s) for expenses	1p		
	Reimbursement paid by related organization(s) for expenses	1q		
-				
1	Other transfer of cash or property to related organization(s)	1r	an a	
	Other transler of cash of property from related organization(s)	<u>⊢ · · </u>		
_2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	1s	[	

(a)     (b)     (c)     (d)       Name of related organization     Transaction     Amount involved     Method of determining amount	involved
(1)	, ,
(2)	<u></u>
(3)	
(4)	·
(5)	4
(6) FFA	

Page 3

Yes No

Schedule R (Form 990) 2020

### DAVIDSON-DAVIE COMMUNITY COLLEGE

#### 23-7079347

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets

# or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	(a)	(b)	(c)	(d)	((		(f)	(g)		h)	(i)	1.1		
	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign - country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all	partners tion (c)(3) izations		Share of end-of-year assets	Disproj	portionate ations?		mar	eral or naging rtner?	(k) Percentag ownership
(1)	······································				Yes	No		[	Yes	No		Yes	No	
(2)	·····	<u> </u>	<u></u>					· · · · ·	ļ					
											4 2			
(3)														
(4)				1 and the second	A									
(5)														
	、	A						-				ŀ		
(6)														
(7)														
(7)														
(8)														
										ţ				
(9)		100 mereo												<u> </u>
10)				······			·····							- <u></u>
• <u> </u>				F			**							
1)									-+	-+	ł	-+		
2)														
<i>~)</i>		F							$\neg \uparrow$					
A														

Fo	m <b>4562</b>		Depr	eciation a	and Amort	ization			io. 1545-0172
			(Incluc	ling Informat	ion on Listed I	Property)			
Dep	partment of the Treasury			Attach to	your tax return.			Attachr	020
	rnal Revenue Service (99) ne(s) shown on return		Go to www.irs.g	ov/Form4562 for	instructions and t	ne latest inforn	nation.	Sequer	nce No, <b>179</b>
	.,				Business or activity to wi	lch this form relates		Identifying nu	
ĨÊ	VIDSON-DAVIE CO		COLLEGE		FORM 990 - FORM 990 -	1		23-7079	9347
19999.0	Note: If y			roperty unde	er Section 179				
1	Maximum amount (s	ou nave any	y listed property	, complete Par	t V before you co	mplete Part I.	<u> </u>		
2				• • • • • • • • • •				1	
3	Total cost of section Threshold cost of se	ortion 170 pro	placed in service	(see instructions)	• • • • • • • • •	• • • • • • •	• • • • • • •	2	
4	Threshold cost of se Beduction in limitation	on Subtract B	perty before reduc	tion in limitation (				3	
5	Reduction in limitation	av voor Eustr	ie 3 from line 2, if	zero or less, ente	er-0- •••••			4	
-	Dollar limitation for ta	an year. Oution	act line 4 from line	e 1. If zero or less	, enter -0 If married	d filing			
6	separately, see instru		• • • • • • • •	• • • • • • • • •				5	
		a) Description of	property		(b) Cost (business use of	nly)	c) Elected cost		
			<del></del>						
7	Listed property. Ente	r the emount.							
8	Total elected cost of	section 170 n	from line 29		• • • • • • • •	7			
9	Total elected cost of Tentative deduction.	Entor the amo	ropeny. Add amou	ints in column (c)	, lines 6 and 7	• • • • • • • •		8	www.consecution.com
10	Carryover of disallow		mer of line 5 or line	8	• • • • • • • • •			9	
11	Carryover of disallow	itotion Entern	from line 13 of yo	ur 2019 Form 456	62 • • • • • • • •			10	
12	Business income lim	ndauotian A	ne smaller of bus	iness income (not	t less than zero) or li	ne 5. See instru	ictions	11	
13	Business income lim Section 179 expense Carryover of disallow	e deduction, A	do lines 9 and 10,	but don't enter m	ore than line 11		<u></u>	12	
	e' Don't use Part II or E		to 2021, Add lines	s 9 and 10, less lir	ne 12	13			
P	e: Don't use Part II or F	an in below to	or listed property. I	nstead, use Part \	V.				
14	Special depresistion		JITAIIUWance	and Other L	Depreciation (	Don't include	listed proper	ty. See instru	ictions.)
••			uuameu property	Inther than lieted	property light and inte	service			
15	during the tax year. S	ee instruction	S	•••••				14	
16	Property subject to se			* • • • • • •		齡		15	
	Other depreciation (ir	Deprociat	5) · · · · · · · ·					16	35,790
<u>press</u>		Depreciat		sude listed prop	perty. See instruct	lons.)			
17	MACRS deductions fr	Or assots plan	od in namina in te	Sec.	tion A				·······
18	MACRS deductions for	TOUD DDV 000	eu ill service in ta	x years beginning	before 2020			17	
	If you are electing to e asset accounts, chec	group any ass k horo	ets placed in serv	ice during the tax	iyear into one or mo	re general			
·			Jaced in Sond		· · · · · · · · · · · ·		<u></u>		
-			(b) Month and year	(c) Basis for doors	0 Tax Year Usin	g the Genera	I Depreciati	on System	
	<ul><li>(a) Classification of prop</li></ul>	berty	placed in	(business/investme	eciation ent use (d) Recovery	(e) Convention	, (f) Method	(m) Democratic	
19a	3-year property		service	Chirdoniy-see instruct	ions) period			(g) Depreciati	on deduction
b	5-year property								
c	7-year property			· ·		<u> </u>			
d	10-year property	A BERT						· · · · · · · · · · · · · · · · · · ·	
e	15-year property					<u> </u>			
f	20 years and a 1						<u> </u>		
g	25-year property				<u> </u>	·	·		***
	Residential rental	All All			25 yrs.		S/L		
_	property	s s	·	·	27.5 yrs.	MM	S/L		
i	Nonresidential real				27.5 yrs.	MM	S/L		
	property	1) ×		······································	39 yrs.	MM	S/L		
<del></del>		Assets Plac	ced in Service	During 2000 T	ax Year Using th	MM	S/L		
20a	Class life	1		During 2020 1	ax rear Using th	ie Alternative	Depreciati	on System	
b	12-year	y					S/L		
c	30-year				12 yrs.		S/L		
	· · · · · · · · · · · · · · · · · · ·				30 yrs.	MM	S/L		
Par		/ (See instru	Lictions )		4C yrs.	MM	S/L		
21		<u>,</u>							
41	Listed property. Enter	amount from	line 28	· · · · · · · · · · · · · · · · · · ·					
22	Listed property. Enter	amount from	line 28 • • • •					21	
	Listed property. Enter Total. Add amounts fro	om line 12, line	s 14 through 17. li	nes 19 and 20 in o	column (g), and line :	21. Enter	• • • • • • •	21	·····
	Listed property. Enter Total. Add amounts fro here and on the approp	om line 12, line priate lines of	s 14 through 17, li your return. Partn	erships and S cor	norations - see instr	21. Enter		21 22	35,790
22	Listed property. Enter Total. Add amounts fro	om line 12, line priate lines of ve and placed	es 14 through 17, li your return. Partn in service during	erships and S cor the current year, c	norations - see instr	21. Enter auctions	•••••		

Form 4562 (2020)

Name(s) as shown on return DAVIDSON-DAVI	FOR YOUR RECORDS ONLY Federal Supporting Statements IE COMMUNITY COLLEGE FORM 990 - SCHEDULE D - PART VI - I INVESTMENTS - OTHER	
OF INVESTMENT LEASEHOLD TOTAL	COST/BASIS         COST/BASIS           (INVESTMENT)         (OTHER)           0         86,802           0         86,802	) <u>DEPR</u> <u>VALUE</u> 59,314 <u>27,488</u>
TMENTLD		

STATMENT.LD

Name(s) as shown on return		(Keep for	your records)			2020	
	Tax ID Number						
DAVIDSON-DAVIE COMMUNITY COLLEGE						23-707934	7
2% of the amount on Schedule A, Part II, line 11, column	(f)	••••••	•••••	••••••••••••		•••••	262,76
	(a)	(b)	(c)	(d)	(e)	(f)	(g)
Name	2016	2017	2018	2019	2020	Total	Excess contributions
						i	(col. (f) minus
SUMMER AND MARK DAVIS							the 2% limitation)
OSEPH R. & CATHY HEDGPETH	10 047	40,000	60,000	20,000 10,373 6,453 5,000	40,000	160,000	
NTOINETTE R. WIKE	10,047	10,534	9,800	10,373	10,142	50,896	
ALMADGE & IAN SILVERSIDES	5,344	5,469	6 <del>,</del> 977	6,453	8,140	32,383	
AKE FOREST BAPTIST MEDICAL CENTER		5,000	5,000		5,000	20,000	
UNNICUTT FAMILY FUND		20,150	20,000	20,000	20,000	80,150	
ARGARET C WOODSON FOUNDATION, INC.	6,000	A. Carlos		7,500	7,500	15,000	
ENE HAAS FOUNDATION	6,000		16,000	5,000	8,000	35,000	
HOM & HARRIET HEGE	Â	9,000 e	16,000	20,000	27,500	72,500	
TEVE & MARY HOFFMAN			J V	5,000	5,000	10,000	
OVANT HEALTH THOMASVILLE MED CTR		6 1		5,000	5,000	10,000	
UKE ENERGY FOUNDATION	5,000	201,264	20,000	20,000	20,000	60,000	
STATE OF CAROLYN POWERS COX	,000 v	201,264			125,000	331,264	68,502
STATE OF MARY DAVIS		and the second second			120,000	120,000	
AULETTE AND JOHNNY MORGAN					15,789	15,789	
OIS BRINKLEY TRUST	7,858	7,740	0 050	0 400	11,000	11,000	
IM HAYNES	7,858	///40	8,053	8,493	10,585	42,729	
HERRY AND STEVE JACKSON	e de la constante de la consta				5,000	5,000	
LAINE AND DAVE MYERS					5,000	5,000	
ELANIE AND CHARLES MAUZE	<u> 9</u> 2-		5,000		5,000	5,000	
					5,000	10,000	
DTAL							
							68,502

or Se	n is included in UBIA ection 199A calculations.						Ciation Deta Program Servi		I						2020 PAGE 1	
	'UBIA" in lower right corner.		·				For your records	only							_	
	s) as shown on return												Social sec	urity number/Ell	J	
	AVIDSON-DAVIE COMMUNI	TY COLLEC	JE	r	r	T							23	-7079347		
o.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Metho	xi	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
J		07012007	-		100.00			138,474	39	SL	MM	2.564	46,226	3,471	49,697	3,5
		07012007		117,959				0	0			0		i		
1 I	- 1	04012008	· · ·		100.00			412,072	39	SL	MM	2.564	128,913	10,566	139,479	10,5
		04012008	122,046	122,046				0	0		ĺ	0				
	415 Old Greensboro Ro		118,603		100.00			118,603	27	SL	MM	3.704	30,509	4,393	34,902	4,3
		08242009	1,240,000	I				<b>6</b> 0	0			0				
	772 Old Greensboro Ro			158,889		-		0	0			0			ĺ	
		01312012	3,810		100.00			\$3,810	7			0	3,810		3,810	
	Land 1/2 acre Hwy 29/:		13,760	13,760					0			0				
	115 Old Greensboro Rd	1	13,178	13,178	ł		<b>A</b>	0	0.			0				
		07012013	64,000		100.00			64,000				0	64,000		64,000	
1		01302018	86,801		100.00			86,801	5	SL	ну	20	41,954	17,360	59,314	17,30
	Development costs - I(		1,035,688	1				<u>ه</u> ا	0			0				
	and - 164 acres - Ol( evelopment Costs - I	,	437,015 29,821	437,015 29,821	100.00			o چې	0			0				
						>										
	otals		3,992,116					823,760					315,412	35,790	351,202	35,87

antely as above on return AVIDSON-DAVIE COMMUNITY COLLEGE AVIDSON-DAVIE COMMUNITY COLLEGE AVIDSON AVIDSON-DAVIE COMMUNITY COLLEGE AVIDSON AVIDSON-DAVIE COMMUNITY COLLEGE AVIDSON AVIDSO	NDA 2 SL NDA 3 SL NDA NDA	Life 39 0 39 0 27	Number 7079347 Deduction 3,551 10,566
Multi-Form     Description     Date     Basis       RG     1     GRUBB BUILDING     07-01-2007     138,47.       RG     1     Grubb Land     07-01-2008     412,07.       RG     1     Kinderton Building     04-01-2008     412,07.       RG     1     Kinderton Land     04-01-2008     412,07.       RG     1     Land Link Campus     08-24-2009     18,60.       RG     1     J772 Old Greensboro Road     11-22-2011     3,81.       RG     1     Land Link Campus     08-24-2009     3,81.       RG     1     T772 Old Greensboro Road     11-22-2011     3,81.       RG     1     Land 1/2 acre Hwy 29/70     12-31-2013     64,00.       RG     1     Land 1/2 acre Hwy 29/70     12-31-2013     64,00.       RG     1     BUS IMPROVEMENTS     01-30-2018     64,80.       RG     1     Development costs - Link     01-01-2019     64,80.       RG     1     Land - 164 acres - Old G     01-01-2019     64,80.       RG     1     Development Costs - Link     10-10-2019     10-10-2019       RG     1     Development Costs - Link     10-10-2019     10-10-2019	A SL NDA 2 SL NDA 3 SL NDA NDA 0 DD	Life 39 0 39 0 27	Deduction 3,551
RG       1       GRUBB BUILDING       07-01-2007       138,47.         RG       1       Grubb Land       07-01-2007       138,47.         RG       1       Kinderton Building       04-01-2008       412,07.         RG       1       Kinderton Land       04-01-2008       412,07.         RG       1       Kinderton Land       04-01-2008       412,07.         RG       1       Land Link Campus       08-24-2009       118,60.         RG       1       Kinderton Signs       01-31-2012       3,81.         RG       1       Kinderton Signs       01-31-2013       3,81.         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       3,81.         RG       1       Trailer       07-01-2018       64,000         RG       1       Development costs - Link       01-01-2018       86,800         RG       1       Development Costs - Link       10-10-2018       86,800         RG       1       Development Costs - Link       10-10-2019       10         RG       1       Development Costs - Link       10-10-2019       10         RG       1       Development Costs - Link       10-10-2019       10 <tr< th=""><th>A SL NDA 2 SL NDA 3 SL NDA NDA 0 DD</th><th>39 0 39 0 27</th><th>3,551</th></tr<>	A SL NDA 2 SL NDA 3 SL NDA NDA 0 DD	39 0 39 0 27	3,551
RG       1       Grubb Land       07-01-2007       135,47         RG       1       Kinderton Building       04-01-2008       412,077         RG       1       Kinderton Land       04-01-2008       412,077         RG       1       Land Link Campus       08-24-2009       118,607         RG       1       Land Link Campus       08-24-2009       118,607         RG       1       Land Link Campus       08-24-2009       118,607         RG       1       Kinderton Signs       01-31-2012       3,810         RG       1       Kinderton Signs       01-31-2012       3,810         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       64,000         RG       1       Trailer       07-01-2013       64,000         RG       1       Development costs - Link       01-01-2018       86,800         RG       1       Development Costs - Link       01-01-2018       86,800         RG       1       Development Costs - Link       10-10-2019       10-10-2019         TOTAL       TOTAL       TOTAL       TOTAL       TOTAL	NDA 2 SL NDA 3 SL NDA NDA 0 DD	0 39 0 27	
RG       1       Kinderton Building       04-01-2008       412,07         RG       1       Kinderton Land       04-01-2008       412,07         RG       1       415 Old Greensboro Road       04-029-2010       118,60         RG       1       Land Link Campus       08-24-2009       118,60         RG       1       772 Old Greensboro Road       11-22-2011       3,814         RG       1       Kinderton Signs       01-31-2012       3,814         RG       1       Kinderton Signs       01-31-2013       344,000         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       64,000         RG       1       Trailer       07-01-2018       86,800         RG       1       Development costs - Link       01-01-2018       86,800         RG       1       Land - 164 acres - Old G       01-01-2019       10         RG       1       Development Costs - Link       10-10-2019       10         RG       1       Development Costs - Link       10-10-2019       10         RG       1       Development Costs - Link       10-10-2019       10         RG       1       Development Costs - Link       10       10	2 SL NDA 3 SL NDA NDA 0 DD	39 0 27	
RG       1       Kinderton Land       04-01-2008       412,07.         RG       1       415 Old Greensboro Road       04-01-2008       118,60         RG       1       Land Link Campus       08-24-2009       118,60         RG       1       Kinderton Signs       01-31-2012       3,810         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       3,810         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       64,000         RG       1       Trailer       07-01-2013       64,000         RG       1       Development costs - Link       01-01-2018       86,800         RG       1       Land - 164 acres - Old G       01-01-2018       86,800         RG       1       Development Costs - Link       10-10-2018       10-10-2018	NDA SL NDA NDA O DD	0 27	10,566
RG       1       415 Old Greensboro Road       04-29-2010       118,60         RG       1       Land Link Campus       08-24-2009       118,60         RG       1       T72 Old Greensboro Road       11-22-2011       3,810         RG       1       Land Link Campus       01-31-2012       3,810         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       64,000         RG       1       Trailer       07-01-2013       64,000         RG       1       BUS IMPROVEMENTS       01-30-2018       86,800         RG       1       Land - 164 acres - Old G       01-01-2019       86,800         RG       1       Development Costs - Link       10-10-2019       10-10-2019         RG       1       Development Costs - Link       10-10-2019       10-10-2019         RG       1       Development Costs - Link       10-10-2019       10-10-2019         TOTAL       TOTAL       Image: Cost of the cost o	B SL NDA NDA DD	27	1
RG       1       Land Link Campus       08 -24 -2009       116,60.         RG       1       772 Old Greensboro Road       11 -22 -2011       3,810         RG       1       Kinderton Signs       01 -31 - 2012       3,810         RG       1       Land 1/2 acre Hwy 29/70       12 -31 - 2013       3,810         RG       1       Land 1/2 acre Hwy 29/70       12 -31 - 2013       64,000         RG       1       Trailer       07 -01 - 2013       64,000         RG       1       Development costs - Link       01 -01 - 2019       86,801         RG       1       Land - 164 acres - 01d G       01 -01 - 2019       86,801         RG       1       Development Costs - Link       10 - 10 - 2019       10 - 10 - 2019         RG       1       Development Costs - Link       10 - 10 - 2019       10 - 10 - 2019         TOTAL       TOTAL       Image: Cost of Cos	NDA NDA DD		1
RG       1       772 Old Greensboro Road       11-22-2001         RG       1       Kinderton Signs       01-31-2012       3,814         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       3,814         RG       1       Hand 1/2 acre Hwy 29/70       12-31-2013       3,814         RG       1       Trailer       07-01-2013       64,000         RG       1       BUS IMPROVEMENTS       01-30-2018       86,801         RG       1       Development costs - Link       01-01-2019       86,801         RG       1       Land - 164 acres - Old G       01-01-2019       86,801         RG       1       Development Costs - Link       10-10-2019       10-10-2019         RG       1       Development Costs - Link       10-10-2019       10-10-2019         RG       1       Development Costs - Link       10-10-2019       10-10-2019         TOTAL       Image: Cost of the cost of	NDA DD	1 - 1	4,393
RG       1       Kinderton Signs       01-31-2012       3,814         RG       1       Land 1/2 acre Hwy 29/70       12-31-2013       3,814         RG       1       415 Old Greensboro Rd La       04-29-2010       64,000         RG       1       Trailer       07-01-2013       64,000         RG       1       Development costs - Link       01-30-2018       86,800         RG       1       Land - 164 acres - Old G       01-01-2019       64,000         RG       1       Land - 164 acres - Old G       01-01-2018       86,800         RG       1       Development Costs - Link       10-10-2019       70         RG       1       Development Costs - Link       10-10-2019       70         RG       1       Development Costs - Link       10-10-2019       70         TOTAL       70TAL       70       70       70	DD	0	1
RG       1       Land 1/2 acre Hwy 29/70       12-31-2012       3,81         RG       1       415 Old Greensboro Rd La       04-29-2010       64,000         RG       1       BUS IMPROVEMENTS       01-30-2018       86,800         RG       1       Development costs - Link       01-01-2019       64,000         RG       1       Land - 164 acres - Old G       01-01-2019       66,800         RG       1       Land - 164 acres - Old G       01-01-2019       66,800         RG       1       Development Costs - Link       10-10-2019       66,800         RG       1       Development Costs - Link       10-10-2019       66,800         TOTAL       TOTAL       TOTAL       40       40		0	t
RG 1 415 Old Greensboro Rd La 04-29-2010 GA 1 Trailer 07-01-2013 64,000 RG 1 BUS IMPROVEMENTS 01-30-2018 86,800 Development costs - Link 01-01-2019 RG 1 Land - 164 acres - Old G 01-01-2019 TOTAL TOTAL	NDA	7	1
RG 1 Trailer RG 1 BUS IMPROVEMENTS RG 1 Development costs - Link RG 1 Land - 164 acres - Old G Development Costs - Link RG 1 TOTAL TOTAL TOTAL		0	1
RG 1 BUS IMPROVEMENTS RG 1 Development costs - Link RG 1 Land - 164 acres - Old G Development Costs - Link TOTAL TOTAL TOTAL TOTAL	NDA	0	1
RG 1 Development costs - Link RG 1 Land - 164 acres - Old G Development Costs - Link TOTAL TOTAL		5	1
RG 1 Land - 164 acres - Old G Development Costs - Link TOTAL TOTAL	. SL	5	17,360
RG 1 Development Costs - Link TOTAL	NDA	0	1
	NDA	0	1
	NDA	0	1
			35,870