

**Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

**2016**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A For the 2016 calendar year, or tax year beginning** \_\_\_\_\_, **and ending** \_\_\_\_\_

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

**C Name of organization** DALTON STATE COLLEGE FOUNDATION, INC  
 Doing business as \_\_\_\_\_  
 Number and street (or P O box if mail is not delivered to street address) Room/suite  
 650 COLLEGE DRIVE \_\_\_\_\_  
 City or town state or province country and ZIP or foreign postal code  
 DALTON GA 30720

**D Employer identification number** 58-6067358

**E Telephone number** 706-272-4473

**F Name and address of principal officer**  
 DAVID ELROD  
 650 COLLEGE DRIVE  
 DALTON GA 30722

**G Gross receipts \$** 12,478,491

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

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

**J Website** ▶ WWW.GIVING.DALTONSTATE.EDU **H(c) Group exemption number** ▶

**K Form of organization**  Corporation  Trust  Association  Other ▶ **L Year of formation** 1967 **M State of legal domicile** GA

**Part I Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities <b>TO PROVIDE INDIVIDUAL GRANTS, SCHOLARSHIPS AND EDUCATIONAL PROGRAMS FOR ELIGIBLE FACULTY AND RESIDENTS OF THE NORTH GEORGIA AREA</b>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI line 1a)	19	
	4	Number of independent voting members of the governing body (Part VI line 1b)	19	
	5	Total number of individuals employed in calendar year 2016 (Part V line 2a)	0	
	6	Total number of volunteers (estimate if necessary)	0	
	7a	Total unrelated business revenue from Part VIII column (C) line 12	0	
7b	Net unrelated business taxable income from Form 990 T line 34	0		
<b>Revenue</b>			Prior Year	Current Year
	8	Contributions and grants (Part VIII line 1h)	5,866,667	561,111
	9	Program service revenue (Part VIII line 2g)		0
	10	Investment income (Part VIII column (A) lines 3, 4, and 7d)	760,067	451,225
	11	Other revenue (Part VIII column (A) lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12	Total revenue - add lines 8 through 11 (must equal Part VIII column (A) line 12)	6,626,734	1,012,336
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX column (A) lines 1-3)		0
	14	Benefits paid to or for members (Part IX column (A) line 4)		0
	15	Salaries other compensation employee benefits (Part IX column (A) lines 5-10)		0
	16a	Professional fundraising fees (Part IX column (A) line 11e)		0
	b	Total fundraising expenses (Part IX column (D) line 25) ▶	96,223	
	17	Other expenses (Part IX column (A) lines 11a-11d, 11f-24e)	2,020,236	1,678,465
<b>Net Assets or Fund Balances</b>	18	Total expenses Add lines 13-17 (must equal Part IX column (A) line 25)	2,020,236	1,678,465
	19	Revenue less expenses Subtract line 18 from line 12	4,606,498	-666,129
			Beginning of Current Year	End of Year
	20	Total assets (Part X line 16)	35,849,137	35,712,302
21	Total liabilities (Part X line 26)	1,299,513	963,410	
22	Net assets or fund balances Subtract line 21 from line 20	34,549,624	34,748,892	

**Part II Signature Block**

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

**Sign Here**

Signature of officer: DAVID ELROD Date: \_\_\_\_\_  
 Type or print name and title: TREASURER

**Paid Preparer Use Only**

Print/Type preparer's name: DAVID SCOGGINS CPA Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Check  if self employed PTIN: P00445019

Firm's name: NICHOLS, CAULEY & ASSOCIATES, LLC Firm's EIN: 58-2475857  
 Firm's address: P O BOX 2644 DALTON, GA 30722 Phone no: 706-278-2834

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

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:**TO PROVIDE INDIVIDUAL GRANTS, SCHOLARSHIPS AND EDUCATIONAL PROGRAMS FOR ELIGIBLE FACULTY AND RESIDENTS OF THE NORTH GEORGIA AREA****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If Yes, describe these new services on Schedule O.

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

If Yes, describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code ) (Expenses \$ **365,249** including grants of \$ ) (Revenue \$ )  
**PROVIDED DIRECT FINANCIAL SUPPORT IN THE FORM OF SCHOLARSHIPS AND AWARDS TO STUDENTS ATTENDING DALTON STATE COLLEGE**

**4b** (Code ) (Expenses \$ **438,279** including grants of \$ ) (Revenue \$ )  
**PROVIDED FINANCIAL SUPPORT FOR THE CONSTRUCTION OF A NEW ACADEMIC BUILDING ON THE CAMPUS OF DALTON STATE COLLEGE**

**4c** (Code ) (Expenses \$ **301,196** including grants of \$ ) (Revenue \$ )  
**PROVIDED FINANCIAL SUPPORT TO FACULTY AND ACADEMIC PROGRAMS AT DALTON STATE COLLEGE**

**4d** Other program services (Describe in Schedule O):(Expenses \$ **241,393** including grants of \$ ) (Revenue \$ )**4e** Total program service expenses **1,346,117**

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If Yes complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If Yes complete Schedule C Part I</i>		X
4 <b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? <i>If Yes complete Schedule C Part II</i>		X
5 Is the organization a section 501(c)(4) 501(c)(5) or 501(c)(6) organization that receives membership dues assessments or similar amounts as defined in Revenue Procedure 98-19? <i>If Yes complete Schedule C Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If Yes complete Schedule D Part I</i>		X
7 Did the organization receive or hold a conservation easement including easements to preserve open space the environment historic land areas or historic structures? <i>If Yes complete Schedule D Part II</i>		X
8 Did the organization maintain collections of works of art historical treasures or other similar assets? <i>If Yes complete Schedule D Part III</i>		X
9 Did the organization report an amount in Part X line 21 for escrow or custodial account liability serve as a custodian for amounts not listed in Part X or provide credit counseling debt management credit repair or debt negotiation services? <i>If Yes complete Schedule D Part IV</i>		X
10 Did the organization directly or through a related organization hold assets in temporarily restricted endowments permanent endowments or quasi endowments? <i>If Yes complete Schedule D Part V</i>	X	
11 If the organization's answer to any of the following questions is Yes then complete Schedule D Parts VI VII VIII IX or X as applicable		
a Did the organization report an amount for land buildings and equipment in Part X line 10? <i>If Yes complete Schedule D Part VI</i>	X	
b Did the organization report an amount for investments—other securities in Part X line 12 that is 5% or more of its total assets reported in Part X line 16? <i>If Yes complete Schedule D Part VII</i>	X	
c Did the organization report an amount for investments—program related in Part X line 13 that is 5% or more of its total assets reported in Part X line 16? <i>If Yes complete Schedule D Part VIII</i>		X
d Did the organization report an amount for other assets in Part X line 15 that is 5% or more of its total assets reported in Part X line 16? <i>If Yes complete Schedule D Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X line 25? <i>If Yes complete Schedule D Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If Yes complete Schedule D Part X</i>		X
12a Did the organization obtain separate independent audited financial statements for the tax year? <i>If Yes complete Schedule D Parts XI and XII</i>	X	
b Was the organization included in consolidated independent audited financial statements for the tax year? <i>If Yes and if the organization answered No to line 12a then completing Schedule D Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If Yes complete Schedule E</i>		X
14a Did the organization maintain an office employees or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10 000 from grantmaking fundraising business investment and program service activities outside the United States or aggregate foreign investments valued at \$100 000 or more? <i>If Yes complete Schedule F Parts I and IV</i>		X
15 Did the organization report on Part IX column (A) line 3 more than \$5 000 of grants or other assistance to or for any foreign organization? <i>If Yes complete Schedule F Parts II and IV</i>		X
16 Did the organization report on Part IX column (A) line 3 more than \$5 000 of aggregate grants or other assistance to or for foreign individuals? <i>If Yes complete Schedule F Parts III and IV</i>		X
17 Did the organization report a total of more than \$15 000 of expenses for professional fundraising services on Part IX column (A) lines 6 and 11e? <i>If Yes complete Schedule G Part I</i> (see instructions)		X
18 Did the organization report more than \$15 000 total of fundraising event gross income and contributions on Part VIII lines 1c and 8a? <i>If Yes complete Schedule G Part II</i>		X
19 Did the organization report more than \$15 000 of gross income from gaming activities on Part VIII line 9a? <i>If Yes, complete Schedule G, Part III</i>		X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If Yes complete Schedule H</i>		X
b If Yes to line 20a did the organization attach a copy of its audited financial statements to this return?		
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? <i>If Yes complete Schedule I Parts I and II</i>		X
22 Did the organization report more than \$5 000 of grants or other assistance to or for domestic individuals on Part IX column (A) line 2? <i>If Yes complete Schedule I Parts I and III</i>		X
23 Did the organization answer Yes to Part VII Section A line 3 4 or 5 about compensation of the organization's current and former officers directors trustees key employees and highest compensated employees? <i>If Yes complete Schedule J</i>		X
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100 000 as of the last day of the year that was issued after December 31 2002? <i>If Yes answer lines 24b through 24d and complete Schedule K If No go to line 25a</i>		X
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?		
d Did the organization act as an issuer on behalf of issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) 501(c)(4) and 501(c)(29) organizations</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If Yes complete Schedule L Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If Yes complete Schedule L Part I</i>		X
26 Did the organization report any amount on Part X line 5 6 or 22 for receivables from or payables to any current or former officers directors trustees key employees highest compensated employees or disqualified persons? <i>If Yes complete Schedule L Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer director trustee key employee substantial contributor or employee thereof a grant selection committee member or to a 35% controlled entity or family member of any of these persons? <i>If Yes complete Schedule L Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L Part IV instructions for applicable filing thresholds conditions and exceptions)		
a A current or former officer director trustee or key employee? <i>If Yes complete Schedule L Part IV</i>		X
b A family member of a current or former officer director trustee or key employee? <i>If Yes complete Schedule L Part IV</i>		X
c An entity of which a current or former officer director trustee or key employee (or a family member thereof) was an officer director trustee or direct or indirect owner? <i>If Yes complete Schedule L Part IV</i>		X
29 Did the organization receive more than \$25 000 in non-cash contributions? <i>If Yes complete Schedule M</i>		X
30 Did the organization receive contributions of art historical treasures or other similar assets or qualified conservation contributions? <i>If Yes complete Schedule M</i>		X
31 Did the organization liquidate terminate or dissolve and cease operations? <i>If Yes complete Schedule N Part I</i>		X
32 Did the organization sell exchange dispose of or transfer more than 25% of its net assets? <i>If Yes complete Schedule N Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If Yes complete Schedule R Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If Yes complete Schedule R Parts II III or IV and Part V line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If Yes to line 35a did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If Yes complete Schedule R Part V line 2</i>		
36 <b>Section 501(c)(3) organizations</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If Yes complete Schedule R Part V line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If Yes complete Schedule R Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI lines 11b and 19? <b>Note</b> All Form 990 filers are required to complete Schedule O	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter 0 if not applicable		
1b	Enter the number of Forms W 2G included in line 1a Enter 0 if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	If at least one is reported on line 2a did the organization file all required federal employment tax returns? <b>Note</b> If the sum of lines 1a and 2a is greater than 250 you may be required to e file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1 000 or more during the year?		X
3b	If Yes has it filed a Form 990 T for this year? If No to line 3b provide an explanation in Schedule O		
4a	At any time during the calendar year did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account securities account or other financial account)?		X
b	If Yes enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114 Report of Foreign Bank and Financial Accounts (FBAR)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If Yes to line 5a or 5b did the organization file Form 8886 T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100 000 and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If Yes did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c)</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If Yes did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell exchange or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If Yes indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds directly or indirectly to pay premiums on a personal benefit contract?		
f	Did the organization during the year pay premiums directly or indirectly on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars boats airplanes or other vehicles did the organization file a Form 1098 C?		
8	<b>Sponsoring organizations maintaining donor advised funds</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	<b>Sponsoring organizations maintaining donor advised funds</b>		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor donor advisor or related person?		
10	<b>Section 501(c)(7) organizations</b> Enter		
a	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	<b>Section 501(c)(12) organizations</b> Enter		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )		
12a	<b>Section 4947(a)(1) non exempt charitable trusts</b> Is the organization filing Form 990 in lieu of Form 1041?		
b	If Yes enter the amount of tax exempt interest received or accrued during the year		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note</b> See the instructions for additional information the organization must report on Schedule O		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If Yes has it filed a Form 720 to report these payments? If No provide an explanation in Schedule O		

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

**Section A Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	19		
b	Enter the number of voting members included in line 1a above who are independent.		
	19		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, provide the names and addresses in Schedule O.		X

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

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

**Section C Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **GA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records **▶**

**DALTON STATE COLLEGE FOUNDATION 605 COLLEGE DRIVE  
DALTON**

**GA 30720**

**706-272-4473**

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

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

**Section A Officers Directors Trustees Key Employees and Highest Compensated Employees**

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W 2/1099 MISC)	(E) Reportable compensation from related organizations (W 2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) VANCE BELL CHAIRMAN	0 00 0 00	X		X			0	0	0	
(2) DAVID PENNINGTON III VICE CHAIRMAN	0 00 0.00	X		X			0	0	0	
(3) CHIP HOWALT IMMEDIATE PAST CHAIR	0.00 0 00	X		X			0	0	0	
(4) REBECCA DEMPSEY SECRETARY	0 00 0 00	X		X			0	0	0	
(5) JIM BETHEL PAST CHAIRMAN	0 00 0 00	X		X			0	0	0	
(6) BARRY BLEVINS TRUSTEE	0 00 0 00	X					0	0	0	
(7) MARY BROWN TRUSTEE	0 00 0 00	X					0	0	0	
(8) ROBERT BUCHANAN TRUSTEE	0 00 0 00	X					0	0	0	
(9) STAN GOODROE TRUSTEE	0 00 0 00	X					0	0	0	
(10) JIM JOLLY TRUSTEE	0 00 0 00	X					0	0	0	
(11) BOB KINARD TRUSTEE	0 00 0 00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W 2/1099 MISC)	(E) Reportable compensation from related organizations (W 2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) <b>LYNETTE LAUGHTER</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>					0	0	0	
(13) <b>NORRIS LITTLE</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>					0	0	0	
(14) <b>BRYAN MCALLISTER</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>					0	0	0	
(15) <b>RODNEY OWENBY</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>					0	0	0	
(16) <b>SARA PIERCE</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>		<b>X</b>			0	0	0	
(17) <b>DORA SALAZAR PRICE</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>					0	0	0	
(18) <b>JOHN SHAHEEN</b>	0 00									
<b>TRUSTEE</b>	0 00	<b>X</b>					0	0	0	
(19) <b>MARGARET VENABLE</b>	0 00									
<b>EX-OFFICIO TRUSTEE</b>	0 00	<b>X</b>		<b>X</b>			0	0	0	
<b>1b Sub total</b>										
<b>c Total from continuation sheets to Part VII Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100 000 of reportable compensation from the organization **0**

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

**Section B Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100 000 of compensation from the organization **0**



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants and similar amounts not included above	<b>1f</b>	561,111				
	<b>g</b> Noncash contributions included in lines 1a-1f	\$					
	<b>h</b> Total Add lines 1a-1f		561,111				
<b>Program Service Revenue</b>	<b>2a</b>	Busn Code					
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g</b> Total Add lines 2a-2f						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts)		548,187			548,187	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
	<b>b</b> Less rental exps						
	<b>c</b> Rental inc. or (loss)						
	<b>d</b> Net rental income or (loss)						
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				11,369,193			
	<b>b</b> Less cost or other basis & sales exps			11,466,155			
	<b>c</b> Gain or (loss)			-96,962			
	<b>d</b> Net gain or (loss)			-96,962	-96,962		
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV line 18	<b>a</b>						
<b>b</b> Less direct expenses	<b>b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9a</b> Gross income from gaming activities See Part IV line 19	<b>a</b>						
<b>b</b> Less direct expenses	<b>b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10a</b> Gross sales of inventory less returns and allowances	<b>a</b>						
<b>b</b> Less cost of goods sold	<b>b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Busn Code					
<b>11a</b>							
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue							
<b>e</b> Total Add lines 11a-11d							
<b>12</b> Total revenue See instructions			1,012,336	-96,962	0	548,187	



**Part IX Statement of Functional Expenses**

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

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

**Do not include amounts reported on lines 6b 7b 8b, 9b, and 10b of Part VIII**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments See Part IV line 21				
<b>2</b> Grants and other assistance to domestic individuals See Part IV line 22				
<b>3</b> Grants and other assistance to foreign organizations foreign governments and foreign individuals See Part IV lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers directors trustees and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages				
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes				
<b>11</b> Fees for services (non employees)				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	56,123		51,866	4,257
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services See Part IV line 17				
<b>f</b> Investment management fees	78,166		78,166	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25 column (A) amount list line 11g expenses on Schedule O)				
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	49,338	49,338		
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy				
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal state or local public officials				
<b>19</b> Conferences conventions and meetings	1,891		584	1,307
<b>20</b> Interest	21,303		21,303	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation depletion and amortization	2,974	1,221	1,753	
<b>23</b> Insurance	17,820		17,820	
<b>24</b> Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25 column (A) amount list line 24e expenses on Schedule O)				
<b>a CAPITAL PROJECTS</b>	438,279	438,279		
<b>b SCHOLARSHIPS AND AWARDS</b>	365,249	365,249		
<b>c ACADEMIC PROGRAM SUPPORT</b>	169,129	169,129		
<b>d SALARY SUPPLEMENTS</b>	164,313	80,382	49,191	34,740
<b>e All other expenses</b>	313,880	242,519	15,442	55,919
<b>25 Total functional expenses</b> Add lines 1 through 24e	1,678,465	1,346,117	236,125	96,223
<b>26 Joint costs</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98 2 (ASC 958 720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1	Cash—non interest bearing		1
	2	Savings and temporary cash investments	1,195,352	2 2,753,018
	3	Pledges and grants receivable net	4,983,500	3 2,464,355
	4	Accounts receivable net		4
	5	Loans and other receivables from current and former officers directors trustees key employees and highest compensated employees Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B) and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L		6
	7	Notes and loans receivable net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	22,302	9 13,485
	10a	Land buildings and equipment cost or other basis Complete Part VI of Schedule D	10a 2,975,029	
	b	Less accumulated depreciation	10b 2,489	10c 2,972,540
	11	Investments—publicly traded securities	17,241,538	11 20,689,490
	12	Investments—other securities See Part IV line 11	6,671,407	12 4,059,649
	13	Investments—program related See Part IV line 11		13
	14	Intangible assets	2,083	14 1,041
	15	Other assets See Part IV line 11	2,758,724	15 2,758,724
16	<b>Total assets</b> Add lines 1 through 15 (must equal line 34)	35,849,137	16 35,712,302	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	35,817	17 125,948
	18	Grants payable		18
	19	Deferred revenue		19
	20	Tax exempt bond liabilities		20
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers directors trustees key employees highest compensated employees and disqualified persons Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable to unrelated third parties	1,250,000	24 833,335
	25	Other liabilities (including federal income tax payables to related third parties and other liabilities not included on lines 17 24) Complete Part X of Schedule D	13,696	25 4,127
	26	<b>Total liabilities</b> Add lines 17 through 25	1,299,513	26 963,410
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958) check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29 and lines 33 and 34</b>			
	27	Unrestricted net assets	16,629,555	27 16,568,714
	28	Temporarily restricted net assets	7,763,698	28 7,492,400
	29	Permanently restricted net assets	10,156,371	29 10,687,778
	<b>Organizations that do not follow SFAS 117 (ASC 958) check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34</b>			
	30	Capital stock or trust principal or current funds		30
	31	Paid in or capital surplus or land building or equipment fund		31
	32	Retained earnings endowment accumulated income or other funds		32
33	<b>Total net assets or fund balances</b>	34,549,624	33 34,748,892	
34	<b>Total liabilities and net assets/fund balances</b>	35,849,137	34 35,712,302	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII column (A) line 12)	1	1,012,336
2	Total expenses (must equal Part IX column (A) line 25)	2	1,678,465
3	Revenue less expenses Subtract line 2 from line 1	3	-666,129
4	Net assets or fund balances at beginning of year (must equal Part X line 33 column (A))	4	34,549,624
5	Net unrealized gains (losses) on investments	5	815,358
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	50,039
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X line 33 column (B))	10	34,748,892

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked Other explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If Yes check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis consolidated basis or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If Yes check a box below to indicate whether the financial statements for the year were audited on a separate basis consolidated basis or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If Yes to line 2a or 2b does the organization have a committee that assumes responsibility for oversight of the audit review or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year explain in Schedule O		
3a	As a result of a federal award was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A 133?		
3b	If Yes did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W 2/1099 MISC)	(E) Reportable compensation from related organizations (W 2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) <b>KENNETH WHITE</b>	0 00									
<b>TRUSTEE</b>	0 00	X					0	0	0	
(21) <b>LYNN WHITWORTH</b>	0 00									
<b>TRUSTEE</b>	0 00	X					0	0	0	
(22) <b>DAVID ELROD</b>	0 00									
<b>TREASURER</b>	0 00			X			0	0	0	
<b>1b Sub total</b>										
<b>c Total from continuation sheets to Part VII Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

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

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

**Section B Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

**SCHEDULE A**  
**(Form 990 or 990 EZ)**

**Public Charity Status and Public Support**

OMB No 1545-0047

**2016**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990 EZ

▶ Information about Schedule A (Form 990 or 990 EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

Name of the organization

**DALTON STATE COLLEGE  
FOUNDATION, INC**

Employer identification number

**58-6067358**

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

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

- 1  A church convention of churches or association of churches described in **section 170(b)(1)(A)(i)**
- 2  A school described in **section 170(b)(1)(A)(ii)** (Attach Schedule E (Form 990 or 990 EZ) )
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name city and state
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)** (Complete Part II )
- 6  A federal state or local government or governmental unit described in **section 170(b)(1)(A)(v)**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land grant college or university or a non land grant college of agriculture (see instructions) Enter the name city and state of the college or university
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions membership fees and gross receipts from activities related to its exempt functions—subject to certain exceptions and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30 1975 See **section 509(a)(2)** (Complete Part III )
- 11  An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**
- 12  An organization organized and operated exclusively for the benefit of to perform the functions of or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)** See **section 509(a)(3)** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e 12f and 12g
  - a  **Type I** A supporting organization operated supervised or controlled by its supported organization(s) typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV Sections A and B**
  - b  **Type II** A supporting organization supervised or controlled in connection with its supported organization(s) by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV Sections A and C**
  - c  **Type III functionally integrated** A supporting organization operated in connection with and functionally integrated with its supported organization(s) (see instructions) **You must complete Part IV Sections A D and E**
  - d  **Type III non functionally integrated** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV Sections A and D and Part V**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I Type II Type III functionally integrated or Type III non functionally integrated supporting organization
  - f Enter the number of supported organizations
  - g Provide the following information about the supported organization(s)

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

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A Public Support**

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants.)	926,435	992,596	1,046,809	5,866,667	561,111	9,393,618
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	926,435	992,596	1,046,809	5,866,667	561,111	9,393,618
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)						
6 <b>Public support.</b> Subtract line 5 from line 4						9,393,618

**Section B Total Support**

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	926,435	992,596	1,046,809	5,866,667	561,111	9,393,618
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	513,627	536,232	804,987	824,378	548,187	3,227,411
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.)						
11 <b>Total support.</b> Add lines 7 through 10						12,621,029
12 Gross receipts from related activities, etc. (see instructions)					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C Computation of Public Support Percentage**

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	74.43%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	73.92%
16a <b>33 1/3% support test—2016.</b> If the organization did not check the box on line 13 and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input checked="" type="checkbox"/>		
b <b>33 1/3% support test—2015.</b> If the organization did not check a box on line 13 or 16a and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
17a <b>10% facts and circumstances test—2016.</b> If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
b <b>10% facts and circumstances test—2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. <input type="checkbox"/>		



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

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

**Section A Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any unusual grants.)						
<b>2</b> 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.						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513.						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge.						
<b>6 Total</b> Add lines 1 through 5.						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons.						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
<b>c</b> Add lines 7a and 7b.						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6.						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
<b>c</b> Add lines 10a and 10b.						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15	<b>16</b>	%

**Section D Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶

**b 33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶

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

**Part IV Supporting Organizations**

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

**Section A All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B Type I Supporting Organizations**

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

**Section C Type II Supporting Organizations**

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

**Section D All Type III Supporting Organizations**

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

**Section E Type III Functionally-Integrated Supporting Organizations**

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)
- a  The organization satisfied the Activities Test. Complete line 2 below.
  - b  The organization is the parent of each of its supported organizations. Complete line 3 below.
  - c  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test Answer (a) and (b) below

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

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

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

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

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

Section C Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A line 8 Column A)	1	
2	Enter 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	<b>Distributable Amount</b> Subtract line 5 from line 4 unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non functionally integrated Type III supporting organization (see instructions)		

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

Section D Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt use assets	
5 Qualified set aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 <b>Total annual distributions</b> Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C line 6	
10 Line 8 amount divided by Line 9 amount	

Section E Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre 2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C line 6			
2 Underdistributions if any for years prior to 2016 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover if any to 2016			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016 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 2016 Subtract lines 3h and 4b from line 1 For result greater than zero explain in Part VI See instructions			
7 <b>Excess distributions carryover to 2017</b> Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

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

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**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ Attach to Form 990

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

OMB No 1545 0047

**2016**

Open to Public  
Inspection

Name of the organization

**DALTON STATE COLLEGE  
FOUNDATION, INC**

Employer identification number

**58-6067358**

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements**

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
<input type="checkbox"/> Preservation of land for public use (e.g. recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified transferred released extinguished or terminated by the organization during the tax year ▶	
4 Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring inspection handling of violations and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring inspecting handling of violations and enforcing conservation easements during the year ▶	
7 Amount of expenses incurred in monitoring inspecting handling of violations and enforcing conservation easements during the year ▶ \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII describe how the organization reports conservation easements in its revenue and expense statement and balance sheet and include if applicable the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

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

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

1a If the organization elected as permitted under SFAS 116 (ASC 958) not to report in its revenue statement and balance sheet works of art historical treasures or other similar assets held for public exhibition education or research in furtherance of public service provide in Part XIII the text of the footnote to its financial statements that describes these items	
b If the organization elected as permitted under SFAS 116 (ASC 958) to report in its revenue statement and balance sheet works of art historical treasures or other similar assets held for public exhibition education or research in furtherance of public service provide the following amounts relating to these items	
(i) Revenue included on Form 990 Part VIII line 1	▶ \$
(ii) Assets included in Form 990 Part X	▶ \$
2 If the organization received or held works of art historical treasures or other similar assets for financial gain provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenue included on Form 990 Part VIII line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

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

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If Yes, explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	18,006,069	16,367,478	16,142,257	14,943,871	13,995,735
b Contributions	525,755	5,841,874	944,770	913,187	873,073
c Net investment earnings, gains, and losses	659,085	-752,919	404,772	965,688	904,922
d Grants or scholarships	365,249	239,004	316,546	361,722	330,140
e Other expenditures for facilities and programs	559,482	3,211,360	807,775	318,767	499,719
f Administrative expenses					
g End of year balance	18,266,178	18,006,069	16,367,478	16,142,257	14,943,871

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi endowment ▶ 0.47%
  - b Permanent endowment ▶ 58.51%
  - c Temporarily restricted endowment ▶ 41.02%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No |
|---|-----|----|
| (i) unrelated organizations   |     | X  |
| (ii) related organizations  |     | X  |
| b If Yes on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> |     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,957,085		2,957,085
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
<b>Total</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				<b>2,957,085</b>



**Part VII Investments—Other Securities**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end of year market value
(1) Financial derivatives		
(2) Closely held equity interests	<b>4,059,649</b>	<b>MARKET</b>
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total (Column (b) must equal Form 990 Part X col (B) line 12) ▶</b>	<b>4,059,649</b>	

**Part VIII Investments—Program Related**

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

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

**Part IX Other Assets**

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

(a) Description	(b) Book value
(1) <b>INVESTMENT IN SUBSIDIARY</b>	<b>2,758,724</b>
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total (Column (b) must equal Form 990 Part X col (B) line 15) ▶</b>	<b>2,758,724</b>

**Part X Other Liabilities**

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>CRAT PAYABLE</b>	<b>4,127</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total (Column (b) must equal Form 990 Part X col (B) line 25) ▶</b>	<b>4,127</b>

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990 Part IV line 12a

<b>1</b>	Total revenue gains and other support per audited financial statements		<b>1</b>	<b>1,877,733</b>
<b>2</b>	Amounts included on line 1 but not on Form 990 Part VIII line 12			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	<b>815,358</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII )	<b>2d</b>	<b>50,039</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	<b>865,397</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	<b>1,012,336</b>
<b>4</b>	Amounts included on Form 990 Part VIII line 12 but not on line 1			
<b>a</b>	Investment expenses not included on Form 990 Part VIII line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII )	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> (This must equal Form 990 Part I line 12)		<b>5</b>	<b>1,012,336</b>

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

Complete if the organization answered "Yes" on Form 990 Part IV line 12a

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	<b>1,678,465</b>
<b>2</b>	Amounts included on line 1 but not on Form 990 Part IX line 25			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII )	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	<b>1,678,465</b>
<b>4</b>	Amounts included on Form 990 Part IX line 25 but not on line 1			
<b>a</b>	Investment expenses not included on Form 990 Part VIII line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII )	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> (This must equal Form 990 Part I line 18)		<b>5</b>	<b>1,678,465</b>

**Part XIII Supplemental Information**

Provide the descriptions required for Part II lines 3, 5, and 9; Part III lines 1a and 4; Part IV lines 1b and 2b; Part V line 4; Part X line

2; Part XI lines 2d and 4b; and Part XII lines 2d and 4b. Also complete this part to provide any additional information.

**PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER****CHANGE IN PRESENT VALUE OF NON-CURRENT PLEDGES RECEIVABLES \$ 50,039**

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**Part XIII** Supplemental Information *(continued)*

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**SCHEDULE O**  
(Form 990 or 990-EZ)

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information

**2016**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ

**Open to Public  
Inspection**

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

Name of the organization **DALTON STATE COLLEGE  
FOUNDATION, INC**

Employer identification number  
**58-6067358**

FORM 990, PART I, LINE 6

THE BOARD OF TRUSTEES AND OTHER COMMITTEES ARE COMPRISED COMPLETELY OF  
VOLUNTEERS THESE INDIVIDUALS MEET REGULARLY TO REVIEW THE OPERATIONS OF  
THE ORGAINZATION, TO SET THE ORGANIZATION'S POLICIES, AND TO PROVIDE  
OVERSIGHT

ALL INDIVIDUALS USED BY THE ORGANIZATION AS VOLUNTEERS ARE UNCOMPENSATED  
FOR THEIR SERVICES

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

PROVIDED DIRECT FINANCIAL SUPPORT AND OTHER PROGRAMS TO BOLSTER THE  
ACADEMIC AND LEARNING ENVIRONMENT AT DALTON STATE COLLEGE

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COPY OF THE 990 WAS PROVIDED TO THE FINANCE COMMITTEE MEMBERS  
FOR REVIEW PRIOR TO FILING THESE COMMITTEES ARE CHARGED BY THE BOARD OF  
DIRECTORS WITH DETERMINING AND MONITORING COMPLIANCE WITH ALL TAX AND  
FINANCIAL REPORTING REQUIREMENTS

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

BY SERVING, THE FOUNDATION'S TRUSTEES ARE REPRESENTING THAT THEY HAVE NO  
CONFLICTS OF INTEREST

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF THE DALTON STATE COLLEGE  
FOUNDATION, INC , ARE AVAILABLE TO THE PUBLIC FOR DOWNLOAD ON THE

Name of the organization

Employer identification number

DALTON STATE COLLEGE

58-6067358

## ORGANIZATION'S WEBSITE

OTHER GOVERNING DOCUMENTS OF THE ORGANIZATION ARE AVAILABLE TO THE PUBLIC FOR INSPECTION BY CONTACTING DAVID ELROD AND MAKING SUITABLE ARRANGEMENTS

## FORM 990, PART IX, LINE 24E - OTHER EXPENSES

## DESCRIPTION

	PROGRAM SERVICE	MGT & GENERAL	FUNDRAISING
FACULTY SUPPORT	\$ 132,067	\$ 0	\$ 0
DATABASE ENHANCEMENT	\$ 44,420	\$ 0	\$ 1,080
CAMPUS EVENTS	\$ 40,567	\$ 0	\$ 0
DONOR RECOGNITION	\$ 0	\$ 0	\$ 39,672
CRAT EXPENSE	\$ 0	\$ 0	\$ 15,167
ALUMNI RELATIONS	\$ 14,518	\$ 0	\$ 0
DUES AND MEMBERSHIPS	\$ 7,820	\$ 2,922	\$ 0
OTHER EXPENSES	\$ 0	\$ 7,068	\$ 0
BANK & CREDIT CARD FEES	\$ 0	\$ 5,452	\$ 0
STUDENT LIFE PROGRAMS	\$ 3,127	\$ 0	\$ 0

Name of the organization

Employer identification number

**DALTON STATE COLLEGE****58-6067358****TOTAL**

\$ 242,519

\$ 15,442

\$ 55,919

**FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION****CHANGE IN PRESENT VALUE OF NON-CURRENT PLEDGES RECEIVABLES \$ 50,039**

**Depreciation and Amortization**  
(Including Information on Listed Property)

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return  
▶ Information about Form 4562 and its separate instructions is at [www.irs.gov/form4562](http://www.irs.gov/form4562)

Name(s) shown on return **DALTON STATE COLLEGE FOUNDATION, INC** Identifying number **58-6067358**

Business or activity to which this form relates

**INDIRECT DEPRECIATION**

**Part I Election To Expense Certain Property Under Section 179**

**Note** If you have any listed property, complete Part V before you complete Part I

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,010,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less enter 0	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less enter 0 If married filing separately see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c) lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10 but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2017 Add lines 9 and 10 less line 12	13	

**Note** Don't use Part II or Part III below for listed property Instead use Part V

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,221

**Part III MACRS Depreciation (Don't include listed property) (See instructions)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	712
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts check here		

**Section B—Assets Placed in Service During 2016 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3 year property						
b 5 year property						
c 7 year property						
d 10 year property						
e 15 year property						
f 20 year property						
g 25 year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12 year			12 yrs		S/L	
c 40 year			40 yrs	MM	S/L	

**Part IV Summary (See instructions)**

21	Listed property Enter amount from line 28	21	
22	<b>Total</b> Add amounts from line 12 lines 14 through 17 lines 19 and 20 in column (g) and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	1,933
23	For assets shown above and placed in service during the current year enter the portion of the basis attributable to section 263A costs	23	

**Part V Listed Property** (Include automobiles, certain other vehicles certain aircraft certain computers, and property used for entertainment recreation, or amusement)

**Note** For any vehicle for which you are using the standard mileage rate or deducting lease expense complete only 24a 24b columns (a) through (c) of Section A all of Section B and Section C if applicable

**Section A—Depreciation and Other Information (Caution** See the instructions for limits for passenger automobiles )

24a		Yes		No		24b		Yes		No	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)			
Type of property (list vehicles first)	Date placed in service	Business/ investment use percentage	Cost or other basis	Basis for depreciation (business/investment use only)	Recovery period	Method/ Convention	Depreciation deduction	Elected section 179 cost			
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25				
26 Property used more than 50% in a qualified business use											
		%									
		%									
27 Property used 50% or less in a qualified business use											
		%				S/L					
		%				S/L					
28 Add amounts in column (h) lines 25 through 27 Enter here and on line 21 page 1							28				
29 Add amounts in column (i) line 26 Enter here and on line 7 page 1										29	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor partner or other more than 5% owner or related person If you provided vehicles to your employees first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a)		(b)		(c)		(d)		(e)		(f)	
	Vehicle 1		Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		Vehicle 6	
30 Total business/investment miles driven during the year (don t include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren t more than 5% owners or related persons (see instructions)

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles including commuting by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles except commuting by your employees? See the instructions for vehicles used by corporate officers directors or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees obtain information from your employees about the use of the vehicles and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

**Note** If your answer to 37 38 39 40 or 41 is Yes don t complete Section B for the covered vehicles

**Part VI Amortization**

(a)	(b)	(c)	(d)	(e)	(f)
Description of costs	Date amortization begins	Amortizable amount	Code section	Amortization period or percentage	Amortization for this year
42 Amortization of costs that begins during your 2016 tax year (see instructions)					
43 Amortization of costs that began before your 2016 tax year				43	1,041
44 Total Add amounts in column (f) See the instructions for where to report				44	1,041



Year Ended December 31, 2016

58-6067358

Dalton State College  
Foundation, Inc  
650 College Drive  
Dalton, GA 30720

**Electing out of Bonus Depreciation Allowance for  
All Eligible Depreciable Property**

The above named taxpayer elects out of the first-year bonus depreciation allowance under IRC Section 168(k)(7) for all eligible depreciable property placed in service during the tax year