

# Finance, Administration, and Economic Development Committee

## **Beaufort County, SC**

This meeting will be held both in person at the County Council Chambers, 100 Ribaut Road, Beaufort, and virtually through Zoom.

Monday, April 15, 2024 3:00 PM

### **AGENDA**

#### **COMMITTEE MEMBERS:**

MARK LAWSON, CHAIRMAN DAVID P. BARTHOLOMEW YORK GLOVER ANNA MARIA TABERNIK, VICE-CHAIR GERALD DAWSON JOSEPH F. PASSIMENT, EX-OFFICIO

- 1. CALL TO ORDER
- PLEDGE OF ALLEGIANCE
- 3. PUBLIC NOTIFICATION OF THIS MEETING HAS BEEN PUBLISHED, POSTED, AND DISTRIBUTED IN COMPLIANCE WITH THE SOUTH CAROLINA FREEDOM OF INFORMATION ACT
- 4. APPROVAL OF AGENDA
- 5. APPROVAL OF MINUTES- Special Called Meeting March 11, 2024 and March 18, 2024
- 6. CITIZEN COMMENT PERIOD- 15 MINUTES TOTAL

Anyone who wishes to speak during the Citizen Comment portion of the meeting will limit their comments and speak no longer than three (3) minutes. Speakers will address Council in a respectful manner appropriate to the decorum of the meeting, refraining from the use of profane, abusive, or obscene language. In accordance with Beaufort County's Rules and Procedures, giving of a speaker's time to another is not allowed.

7. ASSISTANT COUNTY ADMINISTRATOR REPORT - Dale Butts, ACA; and Denise Christmas, CFO

#### **AGENDA ITEMS**

- 8. FISCAL YEAR 2025 BUDGET PRESENTATIONS FROM ELECTED OFFICIALS AND OUTSIDE AGENCIES. (FISCAL IMPACT: N/A until Budget Ordinance is approved) Valerie Althoff, Budget Manager
- 9. RECOMMEND APPROVAL TO COUNCIL OF AN ORDINANCE TO ACCEPT AND TO APPROPRIATE FUNDS FROM THE SOUTH CAROLINA OPIOID SETTLEMENT FUNDS. (FISCAL IMPACT: The South Carolina Opioid

- **Relief Fund (SCORF) award is \$582,606 for one year. No matching funds.) -** Audra Antonacci Ogden, ACA
- 10. RECOMMEND APPROVAL TO COUNCIL TO DISBURSE ALLOCATED ARPA-GOOD NEIGHBOR FUNDS TO THE TOWN OF BLUFFTON (FISCAL IMPACT: This request is for \$500,000 and constitutes their full allocation. Funds remaining in the Good Neighbor Fund after this dispbursement are: \$566,000.

  Remaining funds are allocated to Hardeeville and Yemassee) Jared Fralix Assistant County Administrator
- 11. RECOMMEND APPROVAL TO COUNCIL OF A REQUEST TO PURCHASE (1) NEW 36 PASSENGER BUS MODEL: STARCRAFT ALLSTAR XL (FISCAL IMPACT: \$188,760. The funding source is Parks and Recreation Capital Fund 2662 in line item: 2662-60-0000-54200 with a balance of \$442,000) Eric Brown, Parks and Recreation Director

#### **EXECUTIVE SESSION**

- 12. PURSUANT TO S.C. CODE SECTION 30-04-70(A)(2) DISCUSSIONS OF NEGOTIATIONS INCIDENT TO PROPOSED CONTRACTUAL ARRANGEMENTS AND POTENTIAL PURCHASE OF PROPERTY (PROJECT BRAVO)
- 13. MATTERS ARISING OUT OF EXECUTIVE SESSION
- 14. ADJOURNMENT

TO WATCH COMMITTEE OR COUNTY COUNCIL MEETINGS OR FOR A COMPLETE LIST OF AGENDAS AND BACKUP PACKAGES, PLEASE VISIT:

https://beaufortcountysc.gov/council/council-committee-meetings/index.html



# Special Called Finance, Administration, and Economic Development Committee Beaufort County, SC

This meeting will be held both in person at the County Council Chambers, 100 Ribaut Road, Beaufort, and virtually through Zoom.

Monday, March 11, 2024 1:00 PM

### **MINUTES**

Watch the video stream available on the County's website to hear the Council's discussion of a specific topic or the complete meeting. <a href="https://beaufortcountysc.new.swagit.com/videos/299630">https://beaufortcountysc.new.swagit.com/videos/299630</a>

### 1. CALL TO ORDER

Committee Chairman Lawson called the meeting to order at 1:00 pm.

#### **PRESENT**

Committee Chairman Mark Lawson

Committee Vice-Chairman Anna Maria Tabernik

Council Member David Bartholomew

Council Member York Glover

Council Member Paula Brown

Council Member Alice Howard

Council Member Lawrence McElynn

#### **ABSENT**

Ex-Officio Joseph Passiment

Council Member Logan Cunningham

Council Member Gerald Dawson

**Council Member Thomas Reitz** 

### 2. PLEDGE OF ALLEGIANCE

The Committee Chairman led the Pledge of Allegiance.

#### 3. FOIA

Committee Chairman noted that public notification of this meeting has been published, posted, and distributed in compliance with the South Carolina Freedom of Information Act.

#### 4. APPROVAL OF AGENDA

**Motion**: <u>It was moved by Committee Vice-Chairman Tabernik, Seconded by Council Member Howard to approve the agenda.</u>

**The Vote**: Motion was approved without objection.

5. CITIZEN COMMENTS - (ANYONE who wishes to speak during the Citizen Comment portion of the meeting will limit their comments to no longer than three (3) minutes ( a total of 15 minutes ) and will address Council in a respectful manner appropriate to the decorum of the meeting, refraining from the use of profane, abusive, or obscene language)

Please watch the video stream available on the County's website to view the comment.

https://beaufortcountysc.new.swagit.com/videos/299630?ts=75

1. Peach Morrison

### **AGENDA ITEMS**

6. RECOMMEND APPROVAL OF AN ORDINANCE APPROPRIATING FUNDS FROM THE STATE A-TAX FUNDS AS RECOMMENDED BY THE STATE A-TAX COMMITTEE IN COMPLIANCE WITH THE REQUIREMENT OF SC CODE OF LAWS

Please watch the video stream available on the County's website to view the full discussion. https://beaufortcountysc.new.swagit.com/videos/299630?ts=206

Motion: It was moved by Vice-Chairman Tabernik, Seconded by Council Member Brown.

**The Vote**: The motion was approved without objection.

#### 7. ADJOURNMENT

The Committee Chairman adjourned the meeting at 1:22pm.

Ratified:



# Finance, Administration, and Economic Development Committee

## **Beaufort County, SC**

This meeting will be held both in person at the County Council Chambers, 100 Ribaut Road, Beaufort, and virtually through Zoom.

Monday, March 18, 2024 2:00 PM

### **MINUTES**

Watch the video stream available on the County's website to hear the Council's discussion of a specific topic or the complete meeting. <a href="https://beaufortcountysc.new.swagit.com/videos/299985">https://beaufortcountysc.new.swagit.com/videos/299985</a>

### 1. CALL TO ORDER

Committee Chairman Lawson called the meeting to order at 2:03pm.

#### **PRESENT**

Committee Chairman Mark Lawson

Committee Vice-Chairman Anna Maria Tabernik

Council Member David Bartholomew (arrived late)

Council Member Gerald Dawson

Council Member York Glover

Ex-Officio Joseph Passiment

Council Member Paula Brown

Council Member Alice Howard

Council Member Lawrence McElynn

Council Member Thomas Reitz (arrived late)

#### **ABSENT**

Council Member Logan Cunningham

#### 2. **PLEDGE OF ALLEGIANCE**

Committee Chairman led the Pledge of Allegiance.

#### 3. **FOIA**

Committee Chairman noted the publication of this meeting has been published, posted, and distributed in compliance with the South Carolina Freedom of Information Act.

#### 4. APPROVAL OF AGENDA

**Motion to Amend**: It was moved by Council Member Glover, Seconded by Council Member Howard to replace the Sheriff's Office with Beaufort Jasper Hampton Comprehensive Health Services and to remove the Public Defender's Office from presentations.

**The Vote**- Motion was approved without objection.

**Main Motion**: <u>It was moved by Ex-Officio Passiment, Seconded by Committee Vice-Chair Tabernik to approve the agenda as amended.</u>

**The Vote**- Motion was approved without objection.

#### 5. CITIZEN COMMENT PERIOD- 15 MINUTES TOTAL

Anyone who wishes to speak during the Citizen Comment portion of the meeting will limit their comments and speak no longer than three (3) minutes. Speakers will address Council in a respectful manner appropriate to the decorum of the meeting, refraining from the use of profane, abusive, or obscene language. In accordance with Beaufort County's Rules and Procedures, giving of a speaker's time to another is not allowed.

There were no citizen comments.

### **AGENDA ITEMS**

6. RECOMMEND APPROVAL OF A RESOLUTION AUTHORIZING THE COUNTY ADMINISTRATOR TO ENTER INTO AN INTERGOVERNMENTAL AGREEMENT (IGA) WITH BEAUFORT JASPER WATER SEWER AUTHORITY, FOR THE CONSTRUCTION/INSTALLATION OF THE LOBECO/MORGAN ROAD WATERLINE PROJECTIGA WITH BJWSA FOR DESIGN AND CONSTRUCTION OF A WATER LINE TO SERVE THE LOBECO COMMUNITY. WATER LINE TO BE INSTALLED ON MORGAN ROAD BETWEEN TRASK PARKWAY AND JOHN MEEK WAY

**Motion**: it was moved by Council Member Dawson, Seconded by Council Member Howard.

**The Vote**: Motion was approved without objection.

### 7. RECOMMEND APPROVAL OF A RESOLUTION TO ACCEPT GRANT FUNDS IN SUPPORT OF PROJECT WARD

Motion: It was moved by Council Member Glover, Seconded by Council Member Howard.

**The Vote:** Motion was approved without objection.

8. RECOMMEND APPROVAL OF A RESOLUTION AUTHORIZING THE INTERIM COUNTY ADMINISTRATOR TO APPROVE AN AFFORDABLE HOUSING FEE SUBSIDY IN THE AMOUNT OF \$11,765 REQUESTED BY LOWCOUNTRY HABITAT FOR HUMANITY FOR THE CONSTRUCTION OF THREE AFFORDABLE RESIDENTIAL UNITS IN NORTHERN BEAUFORT COUNTY.

Motion: It was moved by Council Member Glover, Seconded by Council Member Howard.

**The Vote**: Motion was approved without objection.

#### 9. FISCAL YEAR 2025 BUDGET PRESENTATIONS

Please watch the video stream available on the County's website to view the full discussion. <a href="https://beaufortcountysc.new.swagit.com/videos/299985?ts=1005">https://beaufortcountysc.new.swagit.com/videos/299985?ts=1005</a>

Budget Presentation were given by the following:

- 1. Treasurer's Office
- 2. Island Recreation Center
- 3. LRTA/Palmetto Breeze
- 4. Beaufort Regional Chamber of Commerce, Representing the Military Enhancement Committee
- Small Business Development Center
- 6. Keep Beaufort County Beautiful Board
- 7. Small Business Development Center
- 8. Beaufort-Jasper-Hampton Comprehensive Health Services Inc.
- 10. RECOMMEND APPROVAL TO THE GOVERNOR'S OFFICE FOR APPOINTMENT TO THE BEAUFORT-JASPER WATER AND SEWER AUTHORITY FOR A SIX-YEAR TERM WITH THE EXPIRATION DATE OF MARCH 2023. TERM TO BE SERVED: 1ST VOTE NEEDED: 10/11 (only one seat is Vacant)
  - 1. CARL KILPATRICK
  - 2. ROGER BRIGHT
  - 3. THOMAS MIKE SR
  - 4. ROLAND GARDNER

Please watch the video stream available on the County's website to view the full discussion. <a href="https://beaufortcountysc.new.swagit.com/videos/299985?ts=7362">https://beaufortcountysc.new.swagit.com/videos/299985?ts=7362</a>

**Motion**: It was moved by Council Member Glover, Seconded by Council Member Howard to recommend approval of Roland Gardner to the Beaufort-Jasper Water and Sewer Authority.

**The Vote**: The motion failed with 6 votes in favor and 4 against.

**Motion**: It was moved by Committee Vice-Chair Tabernik, Seconded by Council Member Brown to recommend approval of Roland Gardner to the Beaufort-Jasper Water and Sewer Authority.

**The Vote**: The motion passed with 8 votes in favor and 2 against.

### 11. AGENCIES, BOARDS, AND COMMISSIONS APPOINTMENTS AND REAPPOINTMENTS

**Motion**: It was moved by Ex-Officio Passiment, Seconded by Council Member Glover to approve the Agencies, Boards, and Commissions appointments and reappointments.

Construction Adjustments and Appeals Board: Michael Murphy and Stacey Canaday

Accommodations Tax (2% State) Board: Marie Gibbs

Zoning Board of Appeals: Dennis Nielsen

Beaufort-Jasper Water and Sewer Authority: Robert McFee

**The Vote**: Motion was approved without objection.

**Motion**: It was moved by Committee Vice-Chair, Seconded by Council Member Brown to enter executive session at 4:15pm.

**The Vote**: Motion was approved without objection.

#### **EXECUTIVE SESSION**

12. PURSUANT TO S.C. CODE SECTION 30-4-70(A)(2): DISCUSSION OF NEGOTIATIONS INCIDENT TO PROPOSED CONTRACTUAL ARRANGEMENTS AND PROPOSED SALE OR PURCHASE OF DEVELOPMENT RIGHTS ON REAL PROPERTY (Project Lone Palmetto)

## 13. MATTERS ARISING OUT OF EXECUTIVE SESSION

There were no matters arising out of executive session.

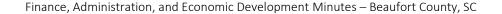
### 14. ADJOURNMENT

Committee Chairman adjourned meeting.

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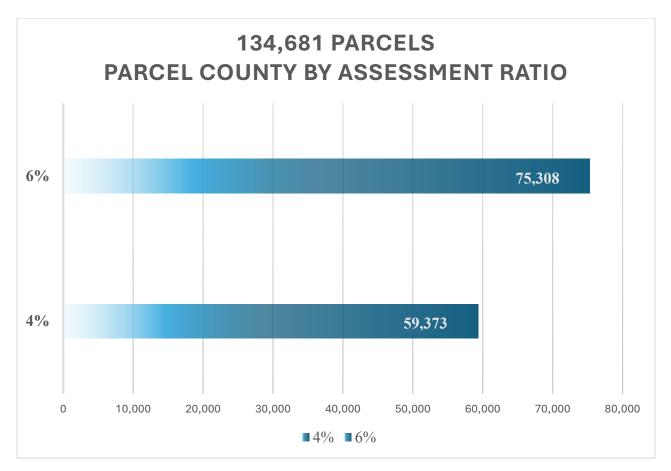
https://beaufortcountysc.gov/council/council-committee-meetings/index.html

Ratified:





## LEGAL RESIDENTIAL SPECIAL ASSESSMENT EXEMPTION ALLOCATIONS BY RATIO (6



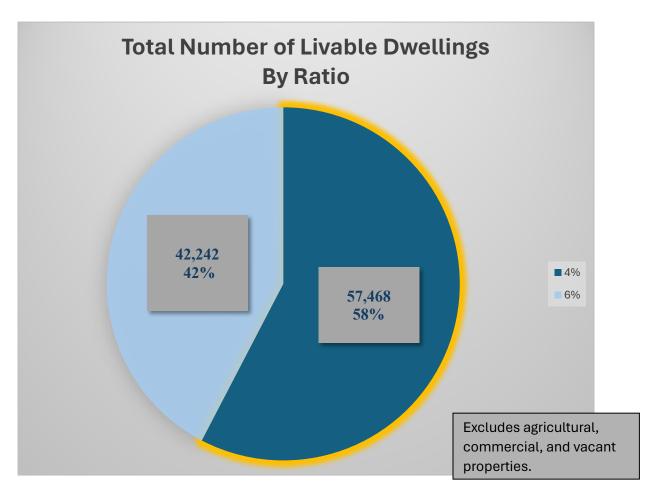
### Chart 1

Chart 1 is based on the number of (134,681) parcels in Beaufort County (BC). All property types are included in the total number of parcels: commercial, commercial vacant, stick-built residential properties, mobile/manufactured homes, condominiums, and exempted (i.e., churches and government-owned schools).

56% of properties in BC are taxed at a 4% ratio, and

44% of properties in BC are taxed at a 6% ratio.

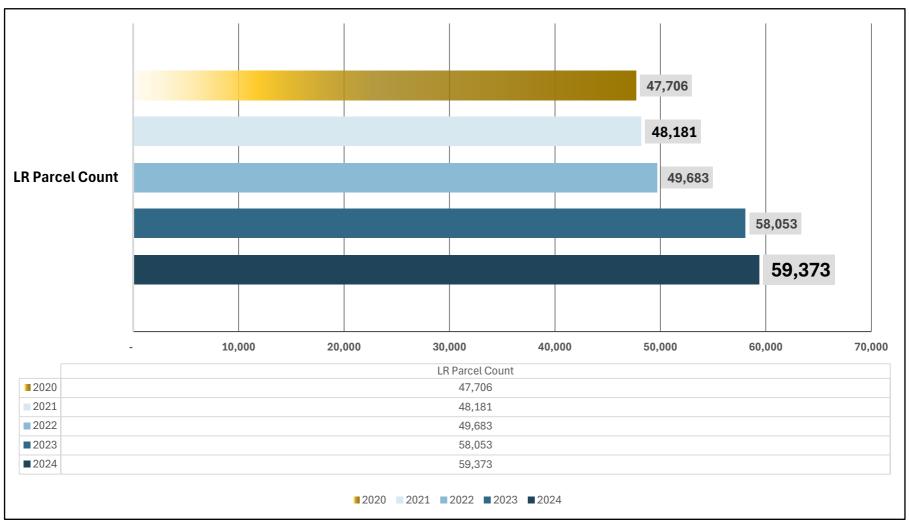
Based on a review of historical data, there is a strong indication that the number of properties taxed at the LR rate of 4% will be equivalent to or exceed the number of parcels taxed at the non-legal residential rate of 6% (resulting in a change or erosion in the number of parcels taxed



## Cart 2

Chart 2 considers all residential improved properties. There are 99,710 (of the 134,681 parcels) improved single-family residential parcels, of which 57,468 parcels (or 58%) receive the legal residential special assessment exemption (4%).

Tax Year	Total Parcels in BC	LR Parcel Count
2024	134,680	59,373
2023	133,877	58,053
2022	133,398	49,683
2021	132,337	48,181
2020	131,141	47,706



2024- As of 03.26.24

Prior Yrs Data obtained from the Assessor's office countywide data file as reported by September of the referenced tax year.

ITEM TITLE:
FISCAL YEAR 2025 BUDGET PRESENTATIONS FROM ELECTED OFFICIALS AND OUTSIDE AGENCIES
MEETING NAME AND DATE:
FINANCE, ADMINISTRATION AND ECONOMIC DEVELOPMENT COMMITTEE ON APRIL 15, 2024
PRESENTER INFORMATION:
Valerie Althoff, Budget Manager
One Hour and 30 minutes (1.5 hours)
ITEM BACKGROUND:
N/A
PROJECT / ITEM NARRATIVE:
FY 25 Budget Presentations
FISCAL IMPACT:
N/A until Budget Ordinance is approved
STAFF RECOMMENDATIONS TO COUNCIL:
Ask questions such as "How much did we fund you last year?
If there is an increase, "why?"
Let them know that full funding is not promised, but they will be notified vis email of their funding amount in last June.
OPTIONS FOR COUNCIL MOTION:
N/A

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TYPE	PRESENTER NAME	OFFICE	OTHER ATTENDEES	Item 8.	
Elected Official	Stephane Smart-Giddings	Public Defender			
Outside Agency	Russell Baxley, President and CEO	Beaufort Memorial Hospital			
Outside Agency	Robb Wells, President and CEO	Greater Beaufort-Port Royal Convention and Visitors Bureau			
Outside Agency	Ariana Pernice, VP Visitor & Convention Bureau	Hilton Head Island-Bluffton Chamber of Commerce,	Ray Deal, Controller		
		Hilton Head Island-Bluffton Chamber of Commerce,	Katie Cacciola, Director of Marketing		
			Mary Lee Carns, Vice President for Advancement	nt & Workf	force
Higher Ed	Dr. Richard Gough, President	Technical College of the Lowcountry,	Development		
		Technical College of the Lowcountry,	Nancy Weber, Vice President for Administration		
		Technical College of the Lowcountry,	Laura Dukes, Vice President for Academic Affair	'S	
Outside Agency	Angie Salley, Executive Director	South Carolina Department of Mental Health - Beaufort Office,	Jennifer Cobb-Hayes, Director of Administration		
Outside Agency	Bob Elliott, Co Founder	South Carolina Nurse Retention Initiative			

Account	Account Description	2025 PROPOSED Budget	2024 Revised Budget	2024 Actuals	\$ DIFF FY 24 VS FY 25	% DIFF FY 2 Item 8.
2110-10-1142-43220	PUBLIC DEFENDER STIPEND	(\$1,883,714.00)	(\$1,854,530.00)	(\$1,527,668.04)	\$29,184.00	-1.57%
2110-10-1142-43225	PUBLIC DEFENDER STATE REIMB	\$0.00	\$0.00	(\$47,312.09)	\$0.00	0.00%
2110-10-1142-43780	FEDERAL GRANT FUNDS	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-46010	INTEREST ON INVESTMENTS	\$0.00	(\$4,200.00)	\$0.00	(\$4,200.00)	100.00%
2110-10-1142-47030	CONTRIBUTION	(\$848,773.48)	(\$798,772.00)	(\$457,255.48)	\$50,001.48	-6.26%
2110-10-1142-48910	CONT FROM PR YR FUND BAL	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-49100	TRANSFER IN	(\$1,995,036.16)	(\$1,570,132.00)	(\$1,177,598.25)	\$424,904.16	-27.06%
2110-10-1142-50020	SALARIES AND WAGES	\$2,816,424.64	\$2,559,385.00	\$1,837,417.31	\$257,039.64	10.04%
2110-10-1142-50060	OVERTIME	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-50100	EMPLOYER FICA	\$177,471.00	\$157,471.00	\$110,834.77	\$20,000.00	12.70%
2110-10-1142-50110	EMPLOYER MEDICARE	\$46,828.00	\$36,828.00	\$25,921.13	\$10,000.00	27.15%
2110-10-1142-50120	EMPLOYER SC RETIREMENT	\$412,120.00	\$392,120.00	\$327,660.75	\$20,000.00	5.10%
2110-10-1142-50130	EMPLOYER PO RETIREMENT	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-50140	EMPLOYER GROUP INSURANCE	\$420,000.00	\$420,000.00	\$202,715.49	\$0.00	0.00%
2110-10-1142-50150	EMPLOYER WORKERS COMP	\$4,680.00	\$4,680.00	\$0.00	\$0.00	0.00%
2110-10-1142-50160	TORT LIABILITY INSURANCE	\$5,300.00	\$4,300.00	\$488.38	\$1,000.00	23.26%
2110-10-1142-50170	EMPLOYER UNEMPLOYMENT INS	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-51000	ADVERTISING	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-51010	PRINTING	\$1,800.00	\$1,500.00	\$937.42	\$300.00	20.00%
2110-10-1142-51030	POSTAGE	\$3,500.00	\$3,000.00	\$2,351.65	\$500.00	16.67%
2110-10-1142-51050	TELEPHONE/COMMUNICATION	\$32,800.00	\$32,000.00	\$22,546.85	\$800.00	2.50%
2110-10-1142-51110	MAINTENANCE CONTRACTS	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-51150	RENTALS	\$12,500.00	\$12,500.00	\$7,101.43	\$0.00	0.00%
2110-10-1142-51160	PROFESSIONAL SERVICES	\$690,000.00	\$525,000.00	\$328,349.11	\$165,000.00	31.43%
2110-10-1142-51300	VEHICLE MAINT SERVICES	\$3,500.00	\$1,250.00	\$3,067.77	\$2,250.00	180.00%
2110-10-1142-51310	DUES & SUBSCRIPTIONS	\$27,000.00	\$13,000.00	\$15,718.59	\$14,000.00	107.69%
2110-10-1142-51320	TRAINING & CONFERENCES	\$35,000.00	\$30,000.00	\$23,413.41	\$5,000.00	16.67%
2110-10-1142-51500	VEHICLE INSURANCE	\$9,600.00	\$9,600.00	\$0.00	\$0.00	0.00%
2110-10-1142-51580	GROUP BENEFITS - WORKERS COMP	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-51990	MISC. EXPENDITURES	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-52010	SUPPLIES & MATERIALS	\$14,500.00	\$12,500.00	\$11,823.07	\$2,000.00	16.00%
2110-10-1142-52500	FUELS/LUBRICANTS	\$10,000.00	\$9,000.00	\$8,422.69	\$1,000.00	11.11%
2110-10-1142-52600	NON-CAP EQUIPMENT	\$3,000.00	\$2,000.00	\$453.54	\$1,000.00	50.00%
2110-10-1142-54000	VEHICLE PURCHASES	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
2110-10-1142-54200	CAPITAL EQUIPMENT	\$1,500.00	\$1,500.00	\$0.00	\$0.00	0.00%







Beaufort Memorial County Budget Presentation 2024

- 201 Beds
- Not-For-Profit
- More than 300 physicians on Medical Staff
- 1800+ Employees
- 14 Bed Inpatient Rehab Unit
- County's only 18 Bed Adult Mental Health Unit
- 10 Operating Rooms and 5 procedure rooms
- Keyserling & New River Cancer Centers
   Newest Radiation Oncology Technology
   State of the Art Chemo Infusion Center
- State of the art Interventional Cath Lab and Angiography suites
- Labor and Delivery Unit, Minimally Invasive Robotic Surgery, Joint Replacement Center, 2 Breast Health Centers, 4 Outpatient Imaging Centers, 3 Express Care and Occupational Medicine clinics, Wound Care Services, 4 Publix Telemedicine Clinics, and physician network group of over 100 employed providers
- Home Healthcare Company Beaufort Memorial Home Health and Amedisys Partner





## **Quality Care You Can Trust**

Item 8.

## **Awards and Certifications**



## Did you know?

**Beaufort Memorial's** Joint Replacement Center is one of only four in South Carolina to achieve Advanced Certification in Total Hip & Knee Replacement Surgery from The Joint

## The Joint Commission

- Advanced Total Hip & Total Knee Replacement
- Primary Stroke Center
- Chest Pain

## **U.S. News High Performing** Hospital

- Stroke
- Knee Replacement

## American Heart Association

- Get With The Guidelines: Gold Plus Achievement Stroke
- Target: Stroke<sup>™</sup> Honor Roll Elite
- Mission Lifeline: NSTEMI Gold
- Target: Type 2 Diabetes™ Honor Roll

## American College of Cardiology/ NCDR

 Platinum Performance Achievement – Chest Pain - MI



## **Healthgrades**

 Patient Safety Excellence Award (2023, 2022, 2021)



- Drive to Zero Suicide Award
- Drive to Zero Workplace Violence Award
- Drive to Zero Disparities Award











## Caring for Thousands of Lives Each Year





## Last year BMH had:

8,787 Admissions

221,058 Outpatient Registrations

44,653 Emergency Department Visits

11,592 Surgeries 1,024 Deliveries

276,042 Physician Office Visits

600,000+ total patient encounters in 2023

## **BMH Financials Last Year:**

\$164.5 Million Labor Costs (incl. Contract Labor) \$138.9 Million Supplies, Purchased Services, etc.

\$303.5 Million Total Expenses

\$33.8 Million Charity Care and Bad Debt

\$288.5 Million Operating Revenue

\$303.7 Million Total Revenue

\$251,000 Total Operating Profit

# **2023 Accomplishments**

## **Expanding Access to Care**



Tara Grahovac, M.D., FACS Breast Surgery



Bruce Vincent, M.D. Primary Care



John Krcmarik, M.D. Pulmonology



Michael Sciarra, D.O.
Gastroenterology



Darren Mullins, M.D. Medical Oncology



Nikki Keisler, M.D. Primary Care



Item 8.

J. Russell Williams, M.D. Primary Care



Taylor Robinson, NP Cardiology



Katie Durden, NP Psychiatry



Aubrey Place, M.D. General Surgery



Robert Smith, M.D., FAAFP Primary Care



James Benn, NP Psychiatry



Shawna Nievierowski, NP Pulmonology



Andrew Castro, M.D., MSC Spine Surgery

## **Beaufort Memorial Island Imaging Center**

Item 8.

Acquired Imaging Center on Hilton Head performing 18,000 studies per year

- CT
- Ultrasound
- Elastography
- X-Ray
- 3D Mammography
- MRI *Coming Soon*











- Davinci Xi minimally invasive Surgery
  - Gynecology
  - General Surgery
  - Urology
  - Colorectal
- 1 New MRI
- New Cath Lab
  - Al technology, first of its kind on the east coast
- Hospital Tower Renovations and New Nurse Call System
- Total Project Value at \$7.3 Million

## Healthcare's Biggest Priority: Workforce Development

- Launched Various Programs in Support of Employee
   Well Being, Assistance, and Career Development
  - Burnout Mitigation and Wellness/Mindfulness Platforms
  - House Buying Assistance—Helped 12 Employees Buy Homes



- Communication Platform
- Family Meal Deal











## Created An Internal PATH for Career Advancement

- Patient Care Techs, EKG Techs, Medical Assistants, Coders
- 15 Graduates in the First Class PCT, Medical Assistants, EKG Techs
- 2<sup>nd</sup> Class 2 CMA, 3 PCT, 3 RN's
- 3<sup>rd</sup> Class 4 PCT, 1 CMA, 2 RN's
- 4<sup>th</sup> Class 6 Coders, 5 PCT, 3 CMA, 2 RN's
- Total Graduates of PATH program 39
- Scholarship Dollars Granted \$96,000

## Created Summer Intern Program for High School Students

- 75 Youth Volunteers participated over two summers
- Learned about 77 departments





- 1,772 patients, representing **26** zip codes, provided with transportation to/from Beaufort Memorial facilities
- **22,046** miles driven in 2023





- 250 meals per week for those in need
- \$195,000 donated in food since October 2020

## Free Care For The Underserved

Item 8.

## **Good Neighbor Medical Clinic:**

- 2,398 lab tests, valued at \$346,392
- 295 imaging procedures, valued at \$391,224
- Other specialty, surgical and hospital services \$50,320
- In-kind rental of 3,025 square-feet of clinic space, valued at \$88,935



## **Access Health of the LowCountry:**

- Beaufort Memorial provides over \$1,032,000
- 882 patients enrolled
- 580 primary and 1,289 specialty care visits
- 1,102 lab tests and 185 surgical procedures
- 20% reduction in avoidable ED visits and
   36% reduction in avoidable inpatient admissions in the 12 months following enrollment

## **Sickle Cell Clinic:**

- 58 patients currently being served
- 552 sickle cell patient encounters in 2023
- Crisis-driven ER visits cut by 45% and resulting inpatient hospital stays decreased by 60% since program inception
- Enabled several young adults to hold employment for the first time



# **BMH Projects In Progress 2024**

## 2024 Budget



## Volumes:

8,973 (2%) Admissions

246,413 (11.4%) Outpatient Registrations

45,584 (2%) Emergency Department Visits

11,565 (-2%) Surgeries 4,707 (32%) Endoscopy 1024 (0%) Deliveries

308,991(11%) Physician Office Visits

650,000+ Total Patient Encounters

## Financials:

\$172 Million Labor Costs (incl. Contract Labor) \$152 Million Supplies, Contract Services, etc.

\$324 Million Total Expenses

\$38.1 Million Charity Care and Bad Debt

\$313.6 Million Operating Revenue

\$329.2 Million Total Revenue

\$5.178 Million Total Operating Profit

	ncome Staten											
Consolidation	n: Beaufort Mem	orial					-	YEAR TO DATE				
	=	Mar-24	Mar-24		Mar-23		•	Mar-24	Mar-24		Mar-23	
		Actual	Budget	Variance	Actual	Variance		Actual	Budget	Variance	Actual	Variance
Patient Reven	iue											
Total Patient	t Revenue	93,965,800	86,910,422	7,055,378	92,484,438	1,481,362		552,508,157	534,636,450	17,871,707	521,396,166	31,111,991
Deductions Fr	om Revenue											
Contractual A		63,884,500	59,068,931	(4,815,569)	64,677,689	64,677,689		371,697,186	363,367,285	(8,329,901)	358,603,028	(13,094,158)
Charity Service	ces	729,672	579,766	(149,906)	546,184	546,184		5,106,268	3,566,475	(1,539,793)	3,290,719	(1,815,549)
Bad Debt		261,947	2,438,486	2,176,539	1,288,005	1,288,005		13,362,191	15,000,543	1,638,352	17,752,147	4,389,956
Total Deduct	tions	64,876,119	62,087,183	(2,788,936)	66,511,878	(1,635,759)		390,165,645	381,934,303	(8,231,342)	379,645,894	(10,519,751)
Total Operatir	ng Revenue	29,089,681	24,823,239	4,266,442	25,972,560	3,117,121		162,342,512	152,702,147	9,640,365	141,750,272	20,592,240
		.,,	,,	,,	.,. ,	-, ,		, , ,	- , - ,	.,,	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Non-Operatin	g											
Other NonOp	erating Revenue	1,288,147	1,229,213	58,934	644,416			6,884,512	7,561,607	(677,095)	6,391,977	
Total Non-O	perating	1,288,147	1,229,213	58,934	644,416	643,731		6,884,512	7,561,607	(677,095)	6,391,977	492,535
Total Revenue	<u> </u>	30,377,828	26,052,452	4,325,376	26,616,976	3,760,852		169,227,024	160,263,754	8,963,270	148,142,249	21,084,775
Operating Exp	enses											
Salaries, Wag	ges & Benefits	14,754,903	13,612,513	(1,142,390)	13,178,245	(1,576,658)		88,539,047	83,738,466	(4,800,581)	79,174,058	(9,364,989)
Professional I	Fees	800,885	752,292	(48,593)	873,712	72,827		4,937,120	4,627,787	(309,333)	4,825,294	(111,826)
Supplies		5,807,812	5,231,146	(576,666)	5,231,885	(575,927)		33,854,066	32,179,818	(1,674,248)	29,673,391	(4,180,675)
Purchased Se	rvices	3,422,108	2,254,723	(1,167,385)	2,126,374	(1,295,734)		16,070,068	13,870,111	(2,199,957)	12,428,663	(3,641,405)
Depreciation,	, Amortization &	1,068,064	1,524,275	456,211	1,507,175	439,111		7,909,561	9,376,706	1,467,145	9,057,276	1,147,715
Other Expens	ies	3,634,043	2,267,652	(1,366,391)	1,887,786	1,746,257		16,663,524	13,949,644	(2,713,880)	12,514,330	(4,149,194)
Total Operat	ing Expenses	29,487,815	25,642,601	(3,845,214)	24,805,177	(4,682,638)		167,973,386	157,742,532	(10,230,854)	147,673,012	(20,300,374)
Excess of Reve	enue Over Expe	890,013	409,851	480,162	1,811,799	(921,786)		1,253,638	2,521,222	(1,267,584)	469,237	784,401
EBITDA		1,958,077	1,934,126	23,951	3,318,974	(1,360,897)		9,163,199	11,897,928	(2,734,729)	9,526,513	(363,314)
LUITUA		1,330,011	1,334,120	23,331	3,310,374	(1,300,037)		3,103,133	11,037,320	(2,734,723)	3,320,313	(303,314)

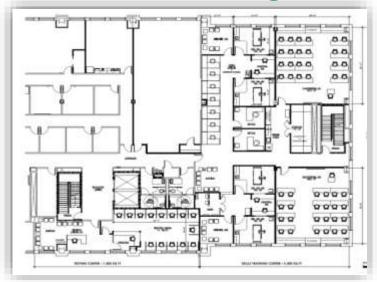
## Physician Recruitment – Providers Starting in 2024

Item 8.

- Primary Care
  - •Dr. Bruce Vincent started January 8, 2024
- Pulmonary/Critical Care
  - •Dr. John Krcmarik started January 2, 2024
  - •Dr. Andrew Stevens to start August 1, 2024
- General Surgery
  - •Dr. Aubrey Place started March 4, 2024
  - •Dr. Taylor Turnbull to start August 1, 2024
- Urology
  - •Dr. Louis Remynse to start May 1, 2024
- Medical Oncology
  - •Dr. Eric Turner to Start June 3, 2024
- Reconstructive Plastic Surgery
  - •Dr. Heidi Harrington to start August 1, 2024

## **Nursing School in Development**

Item 8.



Project with Beaufort County, City of Beaufort, USC-B and BMH – \$2.25 million dollar project intended to increase the nursing school capacity of USC-B – complete fall 2024



## **Childcare Development**

- Utilizing a modular design company BMH will be moving facilities to campus in 2024.
- Facility qualifies for ABC voucher program which can provide additional financial assistance for those who qualify – currently costs 50% of the Beaufort County Market rate
- Facility will be 6,000 square feet and capable for serving 96 children.



## **Hospital Renovations 2024**

Item 8.

## Crisis Stabilization Unit in ER - Fall 2024

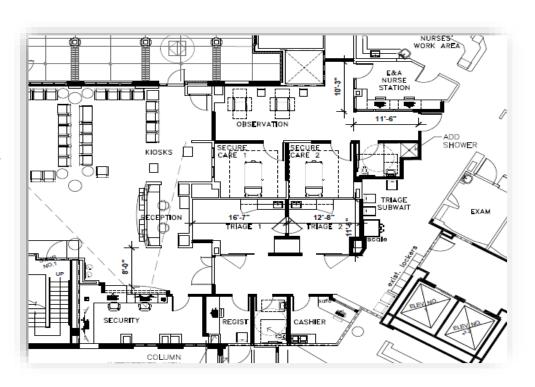
 Psych Safe Unit contained in Emergency Room to be completed Fall 24

## New Angiography Suite – Dec. 2024

 New State of the Art Interventional Radiology and Vascular Interventional Lab

New MRI on Hilton Head Island at Island Imaging – Fall 2024

3 Project Total Value – \$4 Million





## **OR Renovation**

- \$24 Million Dollar Project
- 2 Additional Operating Suites
- Adding all new Flat Screens, Anesthesia Towers, Lighting, and integration Systems
- Adding new State of the Art Endoscopy Suite recently purchased brand new Scopes and Endoscopy Towers
- Schedule to be complete 2026





Item 8.

## **Beaufort Memorial May River Crossing Primary Care Site**

- •1.376 Acres purchased and under Control of BMH
- Planned 5000 sq ft MOB
- •Primary Care and diagnostic lab and imaging planned 4 primary care provider addition
- •Total Cost \$2.5 million in construction and equipment
- •20 jobs created SWB = \$1.5 million dollars

## **Beaufort Memorial Lady's Island Internal Medicine** Renovation and Low Country Medical Group Expansion

- •Add 4 more Primary Care Providers to Lady's Island and Port Royal
- •Renovation of Lady's Island Internal Medicine
- •Relocation of specialists to suites within LCMG to expand Primary Care Practice

Total Cost - \$250.000K





# **County Budget Requests**

# **Beaufort County Physician Needs Analysis**

Item 8.

- Beaufort, St Helena, Port Royal Population est 73,731
  - Specialty Physician Need 12.8 Pulmonary (2.9), Oncology (1.5), Cardiology (2.3)
  - Surgical Need 11.8 general surgery (2.8), Urology (2.0), Plastic Surgery (1.0)
  - Primary Care Need 14.9 Primary Care Providers
- Bluffton, Okatie Population est 75,891
  - Specialty Need 18.2 Gastroenterology (4.0), Cardiology (2.8), Psychiatry (1.7), Pulmonary (1.0)
  - Surgical Need 13.5 General Sugery (5.5), Urology (3.4), Otolaryngology (2.8)
  - Primary Care Need 15.9 Primary Care providers
- Hilton Head Population est 41,778
  - Specialty Need 12.0 Gastroenterology (2.0), Pulmonary (1.3), Psychiatry (1.3), Cardiology (1.9),
     Neurology (1.0)
  - Surgical Need 11.3 General Surgery (1.6), Urology (3.7), Ophthalmology (1.7), Otolaryngology (1.0)
  - Primary Care Need 9.0 Primary Care Providers



#### **Projected Volumes**

- 2,600 Admits
- 21,000 ER visits
- 110,000 outpatient visits
- 7,000 surgeries and procedures

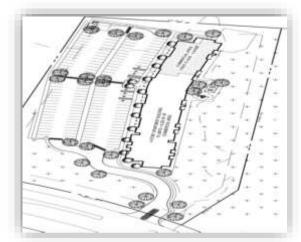
#### <u>Bluffton Hospital –</u>

# Bluffton Regional Medical Center, A Beaufort Memorial Campus

- At the corner of Bluffton and Buckwalter parkway
- 28 Acute Care Beds
- 15 ER Beds, 2 Trauma Rooms, and 6 observation rooms
- 4 Operating Rooms and 2 Procedure Rooms
- Full Imaging Center, Lab, and other Outpatient capabilities
- Designed for Resiliency against natural disasters and climate change - \$2.6 Million Dollar Cost
- Total budget \$90 Million Dollars
  - \$60 million Construction
  - \$20 million equipment
  - \$10 million professional fees and soft costs
- Total New Jobs Created 250
- \$16.2 Million in Salaries, wages, benefits

# Affordable Employee Housing Opportunities

Item 8.





### Multi-Family Housing Project at Bluffton

- •120 Total Units
- •30 One-Bedroom Units
- •60 Two-Bedroom Units
- •30 Three-Bedroom Units
- Healthcare facility to include primary care and therapy/rehab care

#### **Multi-Family Housing Project at Okatie**

- •70 Total Units
- 15 One-Bedroom Units
- 36 Two-Bedroom Units
- •19 Three-Bedroom Units
- Childcare and Primary Care practice on 1<sup>st</sup> floor in mixed use development

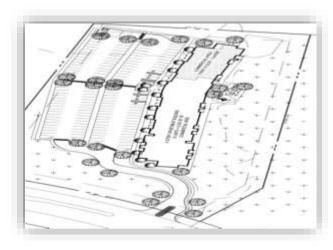


# Townhome/Single Family Home Project at Beaufort

- •29 Total Units
- •25 Two-Bedroom Town Home Units
- •4 Three-Bedroom Single Family Units

# Affordable Employee Housing Project 1

Item 8.



#### Multi-Family Housing Project at Okatie

- •Public Private Partnership with Woda Cooper Companies
- •BMH has land leased site to Woda Cooper
- •BMH will develop Primary Care practice and 2<sup>nd</sup> affordable childcare Location on first floor in build to suit model
- •Woda Cooper will develop 70 total units; units will range from 60%-80% of the AMI
- 15 One-Bedroom units
- •36 Two-Bedroom units
- •19 Three-Bedroom units
- •Have already applied for to the LIHTC program 9% tax credit
- •Town of Hardeeville issued letter of support

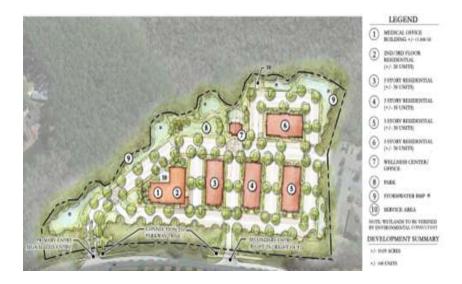


# **Affordable Employee Housing Project 2**

Item 8.

#### Multi-Family Housing Project at Buckwalter Place

- •Public Private Partnership with Woda Cooper Companies
- •Partnership with Beaufort County Beaufort County to land lease to Woda Cooper after purchase of property
- •BMH will develop Healthcare services on 1<sup>st</sup> floor of building 1 to include therapy and primary care services build to suit model
- •Woda Cooper will develop 120 total units; units will range from 60%-80% of the AMI
- •30 One-Bedroom units
- •60 Two-Bedroom units
- •30 Three-Bedroom units
- •Have already applied for to the LIHTC program 4% tax credit
- •Town of Bluffton has issued letter of support in favor of this project as part of the LIHTC application



# **Affordable Employee Housing Project 3**

Item 8.

#### • Multi-Family Housing Project At Hospital

- •BMH Specific Project targeting BMH Employees
- •Partnership with Beaufort County Beaufort County purchased Home from TCL, currently 4 properties vacant and 1 being rented by BMH employee
- •29 Total Units
- •25 Two bedroom Town Home Units
- •4 Three bedroom Single Family Housing Units
- •\$8.3 Million Dollar Project Projected \$285K per unit Cost
- •Would not be eligible for any Housing Tax Credits due to location
- •Target Rent = \$1,200-\$1,500 per unit



Beaufort Memorial Hospital Housing on Reynolds Street

### **Beaufort Memorial Previous Funding**

Item 8.

- 1. \$800,000- Ongoing support of the Emergency Room Indigent Care and Psychiatric Care
- 2. \$1.5 Million Operational Support of the potential Crisis Stabilization unit embedded in the emergency room to be spread over 3 years in conjunction with state grant to build the unit (ARPA Dollars)
- 3. \$350,000 BMH PATH program (ARPA Dollars) used for clinical instructor and scholarships for PCT's, Nurses, CMA's and others

- 1. \$800,000 Ongoing support of the Emergency Room Indigent Care and Psychiatric Care (Unchanged from previous)
  - 1. 17% of our ED patients are uninsured (6,105 patients) which represents \$13.4 million in Charity care and Bad debt
    - 1. BMH pays specialists in on call pay and locums expense \$798,500 and \$795,000 respectively to maintain appropriate ER specialist coverage.
  - 2. Inpatient Psychiatric Services BMH roughly loses \$1.67 million per year on in-patient and out-patient psychiatric services. 18% of our Psychiatric In-Patients are unfunded which equates to 105 Inpatients that stay an average of 5.4 days in the hospital. Also helps support the current detention center partnership between BMH and Beaufort County.
- 2. \$3,000,000 for Affordable Housing Projects
- 3. \$10,000,000 Bluffton Hospital
- 4. Total Ask \$13,800,000

# ONE VISION. ONE PURPOSE. Mo Limits.

Beaufort County FY 2025 Outside Agency Funding Application					
Please return this application with attachments to:		Valerie Althoff, Budget Manager, by March 15, 2024 via email: Valerie.althoff@bcgov.net			
Amount of Funding Requested		I for FY 2025	\$230,000 - State 2%ATAX (est) \$150,000 - Local 3% ATAX		
I declare that I am authorized on behalf of the agency to submit this budget request to Beaufort County, and the information provided in this refirm is true and correct to the best of my knowledge.  Authorized Signature and Date:  3-15-24					
Organization Name					
Contact Name					
Contact Phone					
Contact e-mail					
Contact Fax					

Please fill out and sign this portion of the form as appropriate indicating contact information, the amount you are requesting and that you have the authority to discuss the budget on behalf of your organization.

Any incomplete or untimely submissions will not be considered.

#### BEAUFORT COUNTY BUDGET PREPARATION BUDGET NARRATIVE - FY 2024 | 2025

The Greater Beaufort-Port Royal Convention & Visitors Bureau

BEAUFORTSC.ORG

# BEAUFORT

PORT ROYAL SEA ISLANDS



#### I. Mission/Scope of Services

The Greater Beaufort-Port Royal CVB (GBPRCVB) serves as the official destination marketing and management organization enhancing Northern Beaufort County's economy by positioning the area as a preferred visitor destination.

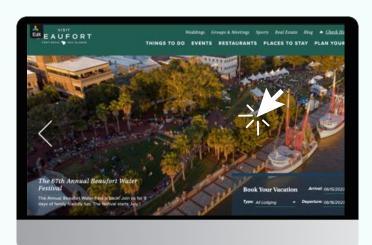
The Greater Beaufort-Port Royal CVB (GBPRCVB) serves as the official Destination Marketing Organization (DMO) for the city of Beaufort, the town of Port Royal, and the unincorporated Sea Island regions of northern Beaufort County. We serve to increase awareness of Northern Beaufort County as a vacation, group, meetings, and/or sports tourism destination while fostering visitor product development to enhance the economic growth of the region.

#### II. Organizations with Similar Services

The Greater Beaufort-Port Royal CVB (GBPRCVB) and the Hilton Head Chamber of Commerce both serve as the DMOs of Beaufort County with emphasis placed on the geographical location of Northern and Southern Beaufort County. This relationship between the two DMOs and the county has been in place for at least 15 years.

### III. 2023 | 2024 Significant Accomplishments

# BeaufortSC.org



By providing relevant and important information through BeaufortSC.org, the perception of the visitors and the perceived image of our destination changes. The visitors' decision-making process becomes significantly easier when visiting our site. Details on the destination, such as weather conditions, historical importance, attractions & rich culture help them decide to book a vacation.



# **1.6 MILLION**Total Page Views



**550k** New Users



**1:59** Avg. Session Duration



**515k**Goal Completions



**338k**Partner Referrals



#### **Top Site Pages**

- 1. Homepage
- 2. Things To Do
- 3. Places to Stay

# III. 2023 | 2024 Significant Accomplishments (Cont.)

# Visit Beaufort's Social Media **Channel Growth**

**TOP** 

**POSTS** 







142,102 Reach

> King Tide @ Sunset Hunting Island Frances St. Claire



81,675 Reach



130,601 Facebook



43,546 Instagram



3,991 **Twitter** 



1,351 **Pinterest** 



587 TikTok



381 LinkedIn



116 YouTube

78,323 Reach

#### Item 8.

# III. 2023 | 2024 Significant Accomplishments (Cont.)

#### **News Coverage of Note**

- Thrillist: Tour One of Only Two Kazoo Factories in the US in Beaufort,
   South Carolina
- Matador Network: 9 US Honeymoon Destinations That Are the Most Underrated
- Travel + Leisure: This Small Coastal Town in South Carolina Has Charleston-like Charm Without the Crowds
- AARP: 5 Romantic Getaways
- Cary Magazine: Beautiful Beaufort by the Sea
- Southern Living: Best Small Town in South Carolina
- Men's Journal: The 4-Day Weekend in South Carolina's Lowcountry



**121**Stories Placed



300+ Million
Reached



**\$3+ Million**Ad Value



THE SOUTH'S BEST

The 50 Best Small Towns In The South 2023

By Southern Living Editors

14,089

Leads acquired through Southern Living

# The Southern ARMER



HERE'S A MOMENT at Hunting Island State Park as you're biking along the Lagoon Trall-ocean beeces and intextcating beach vistas playing peckaboo to your left-when the sandy path turns inland and a sign points to Diamondback Rattlesnake Trail. A good idea? Yes

"Yes," it turns out, sums up the best way to rience Besufort, South Carolina, and its environs, including Hunting Island. Yes, the path fess taken is an excellent idea. as is the Sweet Tea Float at Scout Southern Market. Spending hours strolling through The Old Point and gazing at historic homes and even older live oaks offers endless enchantment But with my eyes peeled for rattlers, I was (yes) relieved that etine thing I discovered was more of the winding all along old dune ridgelines through a primordial wonderland

The trail affirms why Hunting Island, a breathtaking 25ate drive from Beaufort, is South Carolina's most popular state pack. With a dozen similar paths and 5 miles of pristine beach, this place leads you back eons in time through an untouched maritime forest with towering pines and ospress soaring overhead as well as magnolias and saw palmetos tangled with yaupon hollies and wax anytiles in the dense understory. Here you breathe deeper and look more closely. Life slows down, and a sense of awe percolates up.

Take a seat on one of the bench swings at Bounfort's Water-front Park. Wide and seekcorning, they move back and forth in a rhythmic hallaby. You carr't help relaxing, especially if you happen to catch a sunset or tune into the soft lapping of the Beaufort River against the floating dock, hearing the jingling

photographs by PETER FRANK CONTACO.

SOUTHERN LIVING 93





Waterfront Park showcases the un civic planning that makes Beaufort such a delight. The town's best vistas are pro-tected and preserved. There are thought-ful amenities (purking, public bathrooets. an amplitheater, picule tables, and plenty of green lawn for kids and dogs to play on). Plus it's all conveniently adjacent to an enticing array of restaurants, coffee shops, and stores along Bay Street. What better nightcap than to sit and swing a spell after enjoying grilled scallops or top-notch sushi at Saltas Biver Grill? Beaufort is subdued in the best possi-ble way. She has the same deep history

2 Leipers Fork

Natchez

Decatur

Alken South Caro

Travelers Rest South Carolina

II. Peducah

SMALL TOWNS

Beaufort South Can

Fairhope Alabama

4. Fredericksb

Williamsburg

Beaufort wears her age like the badge of shouts of grandour in whatever language

sisters. Charleston and Savannah, are cel-ebrated for, but she's fine staying slightly out of the limelight. Wise and mature. honor it is. Her Lowcountry aura feels elemental, with more patina and less pomp. Along Short Street at the edge of The Old Point, moss-heaped limbs cradle historic mansions. Beaudort's treescape oaks speak. Garden and yards aren't so much manicored as they are magical. It's easy to see why Hollywood frequently comes calling is stairwell at The Beaudort

15. Lewes Delaware 35. Covington

17. St. Francisy 38. Pawhuska Ciklahoma

39. Easton



CLOCKWISE FROM TOP LEFT:

tarbor views from Bay Street: istoric Craven Street: Lowcountry voduce Kitchen, with breaktast all lay; a slice of the sweet life from leaufort's upscale Saftus River Grill, scated on the water

Not far from Short Street, the First African Baptist Church, a Gothic Sovival gern built by freedmen in 1865, bears witness to Beaufort's African American. Gullah, and Reconstruction-era history Robert Smalls was a member here. This docurrent notes his Sanday school atten-dance and that he put a few conts in the offering plate," says the Rev. Alexander McBride, a joylal former marine and the section, a jove other marine and the charch's paster of almost 20 years, point-ing to framed, yellowing pages banging behind the sanctuary. A statue of Smalls, an enslaved crewman who heroically commandeered a Confederate ship and later served as a U.S. Congressman, is less than a mile away at Tabernacle Baptist Church, where a monument to Harriet Tubmum is also planned.





with the Penn Center across the bridge on St. Helena Island, the Gullah Art Gallery Museum on Bladen Street, and the Legacy Art Gallery on Bay Street. Each place vibrant and enduring African American and Gullah Geechee culture. Providing an overview of Beaufort's past. Capt. Henry Brandt of Coastal Expeditions offers a boat tour that cruises through the area's Native American, Spanish, and French history: Union occupation; and a view of Camp Santon's tabley ruins, where the Emancipation Proclamation was first read in South Carolina- all interspersed with movings on estuary ecosystems and the fecund marvels of pluff mud.

"tou don't fully experience Beautort until you see it from the water." Brandt claims. After warching dolohins cort and glide from the boar's bow and admiring the town's steeples rising in the back-ground, I absolutely believe him.

#### Dive Into Beaufort

Anchorage 1770 Bourique hotel in an 18th century munico with fine-dining at the Ribust Social Club The Besufort Inn

Historic main inn plus several cottages clus around a courtyard

#### EAT & DRINK

Blockstone's Cofé Classic diner like opt Common Ground Coffee, latters, baked goods, and sandwiches

Louvountry Produce Kitchen Locally sourced salady and sandwiches and a legendary tomato pie Chapmon's Grocer Grab-and-go items plus-beer, wine, and snacks

Soltus River Grill Fine dining with fresh

Unique gifts and home goods as well as delicious treats like the famous float at the Sweet Tea flar Buchelor INV Antiques Offering tousures galore Cabona22

local scalood. Southern fare, steaks, sushi, and a well-curated wine list

Old Bull Towern Gastropuls featuring a lively bar scene and

a lamb shank that does

Scout Southern Market

not disappoint

SHOP

Countal-chic boutique



The Chocolote Tree Confections such as fudge truffles, and peanut brittle Legacy Art Gollery

#### DISCOVER

Hunting Island St. Phillips bland Put Conroy Literary Center

Countal Expeditions Reconstruction Era National Historic Park

Spanish Moss Truil Creasen Street on route to The Old Point to explore

#### CLOCKWISE FROM TOP RIGHT! A rooftop sunset at Anchorage 1770: Scout Southern Market owner Ann Higgins at her beloved Sweet Tea Bar; tus River Grill, where the scenic setting



94 APRIL / 2022

#### Item 8.

# III. 2023 | 2024 Significant Accomplishments (Cont.)

# Influencer Recap

At a time when social networks are omnipresent in our daily lives, travel influencers are becoming the new gurus of the tourism sector. Instagram, TikTok, Blog or YouTube are the tools that allow them to make us dream of a destination through photos, videos and texts, each more inspiring than the last. Influencers allow us to leverage their social media presence and word-of-mouth marketing tactics to promote our destination to younger generations while also allowing us to save money on content creation.











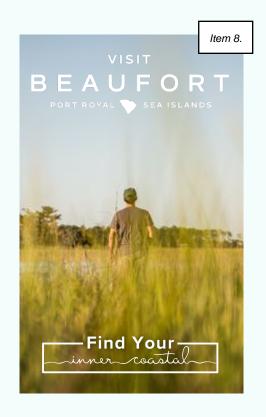


### III. 2023 | 2024 Significant Accomplishments (Cont.)

# Digital Marketing Report

The increased ROI of paid advertising

Visit Beaufort, Port Royal & Sea Islands promotes
Northern Beaufort County as a leisure travel, group,
sports and meetings destination. Our strategies
target vacationers, meeting planners, influencers,
domestic group tour operators, and travel trade
professionals. Targeting core audience segments,
our paid media efforts continue to increase overnight
visitation and extend visitors' length of stay in
Beaufort, South Carolina.





7+ Million





221K+

Clicks



115K+

**Engagements** 



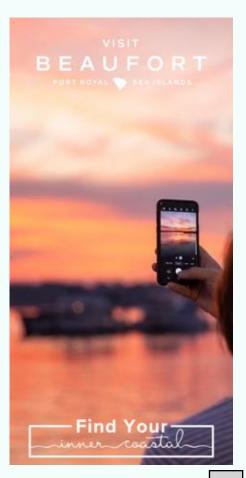
4%

Average Click Through Rate



\$5

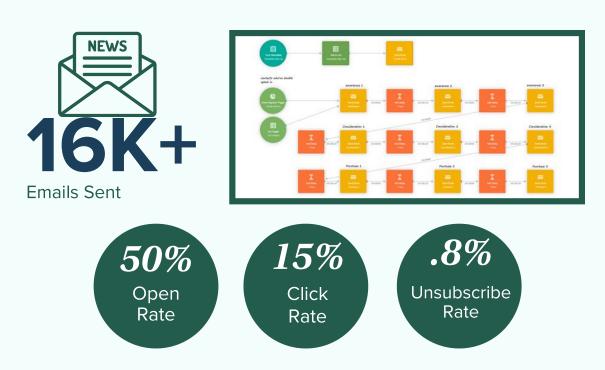
Average Cost Per Conversion



# III. 2023 | 2024 Significant Accomplishments (Cont.)

### Leisure Email Newsletter

Visit Beaufort's newsletter uses a funnel system to turn warm leads into conversions. This funnel includes 9 emails sent over a 60-day period with 3 different email groups: Awareness, Consideration, and Purchase.



# Weekly Partner Email Newsletter

Visit Beaufort's weekly partner newsletter is sent out every week to keep our partners and stakeholders up to date on the newest travel trends by collecting data from Smith Travel Research and Key Data.



# III. 2023 | 2024 Significant Accomplishments (Cont.)

### The Inner Coastal Podcast

What the Inner Coastal podcast tells the world about the Lowcountry of South Carolina is something anyone who has walked our historic streets or strolled our pristine shores knows in their heart: This is a coastal destination that changes you—and stays with you long after you leave.



# **80 Episodes**And Counting



**8,914**All Time Listens



**51%** Female



**46%** Ages 45-59



**54%**Apple Podcasts



**81%**Mobile Listens



#### 2 Awards Won

Gold for Branded Series & Distinction Silver for Individual Episodes



#### IV. Service Delivery Goals or Objectives

Our area is dependent on a strong and vibrant tourism economy to sustain the economic stability of the region. 2023 has seen our area not only gain some market share but also retain some of the gains from previous years due to last couple of years expanded marketing programs. The DMO continues to see research that indicates that visitors are seeking out outdoor activities, coastal destinations as well as trips that fit within the overall well being of the family dynamic.

Our advertising objective for the coming year is to continue to find and reach travel intenders who are likely looking or planning for a coastal destination visit and drive them to inquire about Beaufort, Port Royal and the Sea Islands.

Campaign Tactics: Integrated campaign to include paid print media, online, social media and public relations. It is designed to showcase the Beaufort area as more than a coastal destination by using a wide range of media vehicles and tactics to speak to our audience when they are dreaming of escape, receptive to travel inspiration and planning their next vacation.

Our research continues to indicate the top four interest areas that captivate visitors throughout Northern Beaufort County are History, Arts, Cuisine & Outdoor Adventure. Our marketing initiatives allow us to target our core demographic with the appropriate creative. Here is the marketing plan:

- Online (both search and web banners, behavioral targeting, lead generation)
- Print
- Social Media
- SEO

#### V. Justification for Increased Funding

The funding structure that has been established over the last decade has been a revenue share designed by the State Accommodations Tax code. As tax collections increase, the DMO receives that portion of increase through its normal appropriations. Over the years there has been discussion about transforming the local accommodations tax ordinance to reflect a similar format, but has not advanced beyond the conversation.

# VI. Contingent Strategy if there is no additional funding granted or is reduced

Quite simply, our ability to promote Northern Beaufort County would be impaired with the chances of additional revenue growth for both state and local accommodation tax being dramatically impacted.

#### VII. Outputs, Outcomes, or Measures

The GBPRCVB's marketing plan and initiatives include several strategies and tactics to attract visitors to Northern Beaufort County. Each tactic must be measurable to ensure each tactic's effectiveness. To continue as a fully accountable and transparent organization, the below information includes annual tracking initiatives and overall success metrics.

#### VII. Outputs, Outcomes, or Measures (Cont.)

Occupancy/Smith Travel Report – The GBPRCVB – in partnership with area hotels – subscribes to the monthly Smith Travel Report, which tracks and reports data for the hotel industry including occupancy, average daily rate, supply and demand for lodging businesses in Beaufort and Port Royal. This report allows us to monitor expected occupancy rates, based on historical data, and track actual occupancy rates to measure the impact and effectiveness of our marketing efforts. We also pull short term rental data from Key Data, to provide a very similar report to that of Smith Travel Research.

Website Statistics – Through Google Analytics/G4, we report traffic to our site on a monthly basis, the most recent report is included with this application, with a preview below. Google Analytics allows us to track detailed information about site visitors, including their city and state, how much time they spend on the site and what pages they view.

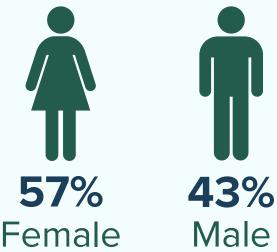
Public Relations – The GBPRCVB leverages a robust public relations database and monitoring service to meticulously track and assess the coverage our area receives. This invaluable tool also provides us with the most current contact information for media outlets and continuously updated travel writer editorial calendars. This, in turn, empowers us to strategically "pitch" the Beaufort area whenever it aligns with their specific focus or interests.

Research at Festivals/Events/Attractions – In the past, we collaborated with the University of South Carolina Beaufort's Hospitality Program to conduct surveys among attendees at major events and festivals, including the Film Festival. Presently, we collaborate with our Zartico Data Team to define key success metrics, such as Visitor Spending Lift, Overnight Stays, and Economic Impact (when data is available). This data-driven approach enhances our understanding of the impact these events have on our area.

# VII. Outputs, Outcomes, or Measures (Cont.)

#### Who is visiting our site?

Northern Beaufort County is a popular vacation destination known for its warm weather, beautiful beaches, and fun activities. Our area attracts a diverse range of visitors, but it is particularly popular among families, beach enthusiasts, history buffs and many more. Overall, Beaufort offers something for everyone and attracts visitors of all ages and interests.







# VISIT BEAUFORT

PORT ROYAL > SEA ISLANDS



701 Craven Street Beaufort, SC 29902 843.525.8500

BeaufortSC.org











coast.

#### Greater Beaufort-Port Royal Convention and Visitors Bureau

Annual Financial Report

June 30, 2022

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#### ROGER K. ELLIOTT, CPA, PC

Certified Public Accountant 1631 Paris Ave. PO Box 393 Port Royal, SC 29935 843-470-8457

#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors Greater Beaufort-Port Royal Convention and Visitors Bureau Beaufort, South Carolina

#### REPORT ON THE FINANCIAL STATEMENTS

We have audited the accompanying financial statements of the Greater Beaufort-Port Royal Convention and Visitors Bureau, which comprise the statement of financial position as of June 30, 2022, and the related statements of activities, and of cash flows for the year then ended, and the related notes to financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments; the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Greater Beaufort-Port Royal Convention and Visitors Bureau, as of June 30, 2022, and the results of its operations and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

We have previously audited the Greater Beaufort-Port Royal Convention and Visitors Bureau's June 30, 2021, financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated September 29, 2021. In our opinion, the summarized information presented herein as of and for the year ended June 30, 2021, is consistent, in all material respects, with the audited financial statements from which it has been derived.

December 14, 2022

Rogu K. EllistopA, DC

#### Greater Beaufort-Port Royal Convention and Visitors Bureau Statement of Financial Position June 30, 2022

(With Comparative Totals for 2021)

#### ASSETS

ASSETS			10.000	
		2022		2021
Current Assets				200.462
Cash in Bank - Operating	\$	224,021	5	209,462
Cash in Bank - Reserve		165,760		169,069
Cash in Bank - Held for Others (See note 4)		399,604		215,559
Accounts Receivable		153,000		32,172
Prepaids				739
Visitor Center Inventory	_	5,948	-	7,083
Total Current Assets		948,333		634,084
Fixed Assets				
Furniture & Equipment		4,137		4,137
Accumulated Depreciation		(4,137)	_	(4,137)
Total Fixed Assets				
Total Assets	\$	948,333	5	634,084
LIABILITIES and NET A	SSETS			
Current Liabilities		0.2022		20.247
Accounts Payable	5	43,073	5	39,217
Due to History Museum		13,683		6,686
Funds Held for Others (See note 4)		399,604		215,559
Other Liabilities		12,208	_	2,236
Total Current Liabilities		468,568		263,698
Long Term Liabilities	700	-	_	
Total Liabilities		468,568	_	263,698
Net Assets		100 200		
Net Assets without Restrictions		479,765		370,385
Net Assets with Restrictions	_	*	_	****
Total Net Assets	_	479,765	-	370,386
TOTAL LIABILITIES & NET ASSETS	s	948,333	\$	634,084

#### Greater Beaufort-Port Royal Convention and Visitors Bureau Statement of Activities

#### For the Year Ended June 30, 2022

(With CompensiveTetals for 2021)

	2022	2021	
Revenue			
Government Grants		\$ 995,117	
Marketing Sales	35,325	37,550	
Visitor Center Sales	41,552	32,715	
Miscellaneous Income	36,095	65,945	
Total income	1,266,706	1,131,327	
Less cost of sales visitor center	11,536	12,610	
Net Profit (lass)	1,255,170	1,118,718	
Expenses			
Salaries and Wages	312,915	304,405	
Payroll Taxes	19,298	22,600	
Workers Compensation	1,108	1,129	
Employee Benefits	29,950	16,840	
Supplies	10,311	6,319	
Postage and Shipping	2,236	12,311	
Printing	12,846	5,591	
Advertising	514,723	465,231	
Telephone	6,819	5,674	
Business Liability Insurance	958	3,495	
Travel & Tradeshows	66,126	29,178	
Dues & Subscriptions	9,789	2,595	
Staff Development	3,412	1,447	
Fees and Service Charges	7,859	4,758	
Occupancy Expenses	45,862	30,095	
Equipment Maintenance and Service	8,761	12,580	
Contract Services/Professional Fees	68,235	52,559	
Promotional Items	931	2,789	
Ad Production/Graphic Design		70,233	
Booking Engine	795	750	
Other Expenses	23,155	12,860	
Total expenses	1,146,088	1,063,440	
Change in net assets	109,081	55,278	
Net assets without restrictions, beginning of year	370,684	315,406	
Net assets without restrictions, end of year	\$ 479,765	\$ 370,684	

#### Greater Beaufort-Port Royal Convention and Visitors Bureau Statement of Cash Flows For the Year Ended June 30, 2022

(With ComparativeTotals for 2021)

		2022		2021
OPERATING ACTIVITIES				
Increase (Decrease) in net assets	5	109,081	\$	55,277
Adjustments to reconcile change in net assets to cash				
Provided by (used in) operating activities				
Depreciation		2.5		100
(increase) decrease in inventory		1,956		1,615
(Increase) decrease in prepaids				856
(Increase) decrease in accounts receivable		(95,048)		(40,000)
increase (decrease) in accounts payable		39,090		(6,453)
Increase (decrease) in funds held for others		122,924		68,693
(Increase) decrease in other liabilities		17,292		(441)
Increase (decrease) in other assets	275			
Net cash provided by operating activities		195,295		79,547
INVESTING ACTIVITIES				
Net cash used by investing activities	_		_	
Net increase in cash and cash equivalents	\$	195,295	\$	79,547
Cash and cash equivalents as of beginning of year	_	594,090		514,543
Cash and cash equivalents as of end of year	\$	789,385	5	594,090
Summary of Cash Accounts				
Cash in Bank - Operating	5	224,021	\$	209,462
Cash in Bank - Reserve		165,760		169,069
Cash in Bank - Held for Others (See note 4)		399,604		215,559
Total	5	789,385	5	594,090
Supplementary Information				Money
Cash paid for interest expense	-	None	_	None
Cash paid for income taxes	(47)	None		None

#### GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2022

(With Comparative Totals for 2021)

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### Nature of Organization

The Greater Beaufort-Port Royal CVB is the Designated Marketing Organization (DMO) for the City of Beaufort, the Town of Port Royal and the unincorporated Sea Island regions of northern Beaufort County. The CVB produces official travel and tourism information and implements a strategic tourism promotion program to increase awareness of Northern Beaufort County as a vacation, group, meetings and/or sports tourism destination, while fostering visitor product development to enhance the economic growth of the region.

#### Financial Statement Presentation

Contributions received are recorded as restricted or without restrictions, depending on the existence and/or nature of any donor restriction. Support that is restricted by the donor is reported as an increase in net assets without restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with restrictions, depending on the nature of the restriction. When a restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets are reclassified to net assets without restrictions and reported in the statement of activities as net assets released from restrictions.

#### Principles of Accounting

The financial statements of the organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and liabilities.

#### Contributed Services

No amounts are reflected in the statements for donated services unless the services received increase non-financial assets or require specialized skills that would typically have to be purchased if not provided by the donation.

#### GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2022

(With Comparative Totals for 2021)

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### Inventory

Inventory consists of merchandise and brochures, postcards, and books held for sales at the Visitor Center. The Visitor Center also sells items on a consignment basis, which are not included in inventory. Inventory values are calculated at lower of cost or market using the first-in, first-out cost method.

#### Property and Equipment

Acquisitions of property and equipment in excess of \$1,000 are capitalized. Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using the straight-line method over the asset's estimated useful life as follows:

Building renovations Office furniture and equipment 15 years 3 to 7 years

#### Cash and Cash Equivalents

For purposes of the Statement of Cash Flows, cash equivalents include time deposits, certificates of deposit and all highly liquid debt instruments with original maturities of three months or less

#### Income Taxes

The organization is a not-for-profit corporation as described in Section 501(C)(3) of the Internal Revenue Code and is exempt from both federal and state income taxes.

#### Uncertain Tax Positions

The organization is exempt from federal income tax under Section 501(C)(3) of the Internal Revenue Code. The organization follows FASB ASC 740, Income Taxes, which clarify the accounting for uncertainty in income taxes by prescribing the recognition threshold a tax position is required to meet before being recognized in the financial statements. It also provides guidance on derecognition, classification, interest and penalties, accounting in

# GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2022

(With Comparative Totals for 2021)

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

interim period, disclosure and transition. Management believes the organization is no longer subject to income tax examination by the federal authorities for tax years before 2017.

#### Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America require management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### NOTE 2 - CASH AND CASH EQUIVALENTS

The organization maintains its cash balances with local regional financial institutions. Bank balances are secured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000.

#### NOTE 3 - TEMPORARILY RESTRICTED NET ASSETS

#### Designated Marketing Operation

The organization separately accounts for the proceeds from grant awards and allocations of accommodations tax funds that are restricted for various purposes. The organization receives a 30% allocation of accommodations taxes collected in the local area by the State and passed through Beaufort County and the City of Beaufort. The organization also received allocation of 4% from the local hospitality tax on restaurant revenues collected by the City of Beaufort. These revenues are all restricted to the organization's marketing and advertising program. Beginning in fiscal year 2015, the operations of the Visitor Center and the Marketing and Advertising have been consolidated into the Public Funds Advertising Program because the revenues and expenses of these activities have been deemed to be a function of the Public Funds Advertising Programs. Therefore, all revenues and expenses generated by the Public Funds are considered temporarily restricted for the Designated Marketing Operation (DMO).

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# GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2022

(With Comparative Fetals for 2021)

## Note 4 - Cash in Bank - Held for Others

The organization is holding funds other organizations in bank accounts on June 30, 2022 as follows:

Destination Marketing Fund	\$ 338,079
Festival Account	34,344
Beaufort Sports Council	27,181
Total	\$ 339,604

These funds are recorded on the Statement of Financial Position at June 30, 2022 as an asset - Cash in Bank - Held for Others and a liability - Funds held for others.

## Note 5 - SUBSEQUENT EVENTS

Subsequent events have been reviewed through December 14, 2022, the report issuance date. As of this date, there are no subsequent events to report.

## Greater Beaufort-Port Royal Convention and Visitors Bureau

Annual Financial Report

June 30, 2023.

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## ROGER K. ELLIOTT, CPA, PC

Certified Public Accountant 1631 Paris Ave. PO Box 393 Port Royal, SC 29935 843-470-8457

#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors Greater Beaufort-Port Royal Convention and Visitors Bureau Beaufort, South Carolina

#### REPORT ON THE FINANCIAL STATEMENTS

We have audited the accompanying financial statements of the Greater Beaufort-Port Royal Convention and Visitors Bureau, which comprise the statement of financial position as of June 30, 2023, and the related statements of activities, and of cash flows for the year then ended, and the related notes to financial statements.

## Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments; the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Greater Beaufort-Port Royal Convention and Visitors Bureau, as of June 30, 2023, and the results of its operations and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

We have previously audited the Greater Beaufort-Port Royal Convention and Visitors Bureau's June 30, 2022, financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated December 14, 2022. In our opinion, the summarized information presented herein as of and for the year ended June 30, 2022, is consistent, in all material respects, with the audited financial statements from which it has been derived.

February T7, 2024

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## Greater Beaufort-Port Royal Convention and Visitors Bureau Statement of Financial Position June 30, 2023

(With Comparative Totals for 2022)

## ASSETS.

ASSETS				
		2023		2022
Current Assets				
Cash in Bank - Operating	5	258,532	5	224,021
Cash in Bank - Reserve		165,919		165,760
Cash in Bank - Held for Others (See note 4)		61,555		399,604
Accounts Receivable		274,766		153,000
Visitor Center Inventory		3,443		5,948
Total Current Assets	20	764,215		948,333
Fixed Assets				
Furniture & Equipment		4,137		4,137
Accumulated Depreciation		(4,137)		(4,137)
Total Fixed Assets			50	
Total Assets	\$	764,215	S	948,333
LIABILITIES and NET ASSE	ETS			
Current Liabilities				
Accounts Payable	5	73,952	5	43,073
Due to History Museum		10,392		13,683
Funds Held for Others (See note 4)		61,555		399,604
Other Liabilities		20,610		12,208
Total Current Liabilities		166,509	0	468,568
Long Term Liabilities	88_	*:5	-	
Total Liabilities		166,509	_	468,568
Net Assets				
Net Assets without Restrictions		597,706		479,765
Net Assets with Restrictions	- 22	*		+ -
Total Net Assets		597,706		479,765
TOTAL LIABILITIES & NET ASSETS	\$	764,215	5	948,333

## Greater Beaufort-Port Royal Convention and Visitors Bureau Statement of Activities For the Year Ended June 30, 2023

(With Comparetive Totals for 2002)

	2023	2022
Revenue	anouguab	Alexandra de la constanta de l
Government Grants	5 1,263,833	1500000
Marketing Sales	17,425	35,325
Visitor Center Sales	50.853	41,552
Miscellaneous income	35,741	36,095
Total income	1,367,851	1,266,706
Less cost of sales visitor center	9,512	11,536
Net Profit (loss)	1,358,339	1,255,170
Expenses		
Salaries and Wages	377,923	312,915
Payrol Taxes	28,229	19,298
Workers Compensation	1.231	1.108
Employee Benefits	52,038	29,950
Supplies	9,725	10,311
Postage and Shipping	3,511	2,236
Printing	2.249	12,846
Advertising	491,225	514,723
Telephone	6,909	6,819
Business Liability Insurance	856	958
Travel & Tradeshows	75,353	66,126
Dues & Subscriptions	13,744	9,789
Staff Development	1,366	3,412
Fees and Service Charges	8,847	7,859
Occupancy Expenses	46,509	45,862
Equipment Maintenance and Service	9,218	8,761
Contract Services/Professional Fees	108,285	68,235
Promotional Items	1,258	931
Booking Engine	-	795
Other Expenses	3,312	21,767
Total expenses	1,241,786	1,144,700
Change in net assets	116,553	110,469
Net assets without restrictions, beginning of year	481,153	370,684
Net assets without restrictions, end of year	\$ 597,706	5 481,153
	CONTRACTOR CONTRACTOR	

## Greater Beaufort-Port Royal Convention and Visitors Bureau Statement of Cash Flows For the Year Ended June 30, 2023

(With ComparativeTotals for 2022)

		2023		2022
OPERATING ACTIVITIES				
Increase (Decrease) in net assets	. 5	116,553	5	109,081
Adjustments to reconcile change in net assets to cash				
Provided by (used in) operating activities				
Depreciation		0.05/00		0.0500
(Increase) decrease in inventory		2,005		1,956
(Increase) decrease in prepaids				
(Increase) decrease in accounts receivable.		(121, 266)		(95,048)
Increase (decrease) in accounts payable		32,268		39,090
Increase (decrease) in funds held for others		(336,444)		122,924
(Increase) decrease in other liabilities		3,505		17,292
Net cash provided by operating activities		(303,379)		195,295
INVESTING ACTIVITIES				
Net cash used by investing activities		+		
Net increase in cash and cash equivalents	5	(303,379)	\$	195,295
Cash and cash equivalents as of beginning of year		789,385		594,090
Cash and cash equivalents as of end of year	5	486,006	5	789,385
Summary of Cash Accounts				
Cash in Bank - Operating	5	258,532	ė	224,021
Cash in Bank - Reserve		165,919		165,760
Cash in Bank - Held for Others (See note 4)		61,555		399,604
Total	5	486,006	ć	789,385
Total Control of the	3	400,000	-	702,303
Supplementary Information				
Cash paid for interest expense		None		None
Cash paid for income taxes	10	None		None

## GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2023

(With Comparative Totals for 2022).

## NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

## Nature of Organization

The Greater Beaufort-Port Royal CVB is the Designated Marketing Organization (DMO) for the City of Beaufort, the Town of Port Royal and the unincorporated Sea Island regions of northern Beaufort County. The CVB produces official travel and tourism information and implements a strategic tourism promotion program to increase awareness of Northern Beaufort County as a vacation, group, meetings and/or sports tourism destination, while fostering visitor product development to enhance the economic growth of the region.

#### Financial Statement Presentation

Contributions received are recorded as restricted or without restrictions, depending on the existence and/or nature of any donor restriction. Support that is restricted by the donor is reported as an increase in net assets without restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with restrictions, depending on the nature of the restriction. When a restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets are reclassified to net assets without restrictions and reported in the statement of activities as net assets released from restrictions.

#### Principles of Accounting

The financial statements of the organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and liabilities.

#### Contributed Services

No amounts are reflected in the statements for donated services unless the services received increase non-financial assets or require specialized skills that would typically have to be purchased if not provided by the donation.

## REATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2023

(With Comparative Totals, for 2022):

## NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

## Inventory

Inventory consists of merchandise and brochures, postcards, and books held for sales at the Visitor Center. The Visitor Center also sells items on a consignment basis, which are not included in inventory. Inventory values are calculated at lower of cost or market using the first-in, first-out cost method.

## Property and Equipment

Acquisitions of property and equipment in excess of \$1,000 are capitalized. Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using the straight-line method over the asset's estimated useful life as follows:

Building renovations Office furniture and equipment

15 years 3 to 7 years

## Cash and Cash Equivalents

For purposes of the Statement of Cash Flows, cash equivalents include time deposits, certificates of deposit and all highly liquid debt instruments with original maturities of three months or less

#### Income Taxes

The organization is a not-for-profit corporation as described in Section 501(C)(3) of the Internal Revenue Code and is exempt from both federal and state income taxes.

### Uncertain Tax Positions

The organization is exempt from federal income tax under Section 501(C)(3) of the Internal Revenue Code. The organization follows FASB ASC 740, Income Taxes, which clarify the accounting for uncertainty in income taxes by prescribing the recognition threshold a tax position is required to meet before being recognized in the financial statements. It also provides guidance on derecognition, classification, interest and penalties, accounting in

## GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2023

(With Comparative Finals for 2072)

### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

interim period, disclosure and transition. Management believes the organization is no longer subject to income tax examination by the federal authorities for tax years before 2017.

#### Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America require management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

### NOTE 2 - CASH AND CASH EQUIVALENTS

The organization maintains its cash balances with local regional financial institutions. Bank balances are secured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000.

#### NOTE 3 - TEMPORARILY RESTRICTED NET ASSETS

### Designated Marketing Operation

The organization separately accounts for the proceeds from grant awards and allocations of accommodations tax funds that are restricted for various purposes. The organization receives a 30% allocation of accommodations taxes collected in the local area by the State and passed through Beaufort County and the City of Beaufort. The organization also received allocation of 4% from the local hospitality tax on restaurant revenues collected by the City of Beaufort. These revenues are all restricted to the organization's marketing and advertising program. Beginning in fiscal year 2015, the operations of the Visitor Center and the Marketing and Advertising have been consolidated into the Public Funds Advertising Program because the revenues and expenses of these activities have been deemed to be a function of the Public Funds Advertising Programs. Therefore, all revenues and expenses generated by the Public Funds are considered temporarily restricted for the Designated Marketing Operation (DMO).

## GREATER BEAUFORT-PORT ROYAL CONVENTION AND VISITORS BUREAU NOTES TO FINANCIAL STATEMENTS JUNE 30, 2023

(With Companions Finals for 2022)

## Note 4 - Cash in Bank - Held for Others

The organization is holding funds other organizations in bank accounts on June 30, 2023 as follows:

Festival Account

\$ 61,554

## Note 5 - SUBSEQUENT EVENTS

Subsequent events have been reviewed through February 17, 2024, the report issuance date. As of this date, there are no subsequent events to report.

# Greater Beaufort-Port Royal CVB Profit and Loss by Class

July 2021 - June 2022

		BEAUFORT COUNTY	BFT COUNTY TO		tal BEAUFORT COUNTY	Total OTHER FUDNING	TOTAL	
Income								
40000 - REVENUES								
43000 - GOVERNMENT SUPPORT/GRANTS 43200 - DMO Funding								
43210 - DMO Funding 43210 - County DMO Funding	\$	213,072.00		\$	213,072.00	\$	213,072.00	
Total 43200 - DMO Funding	\$	213,072.00		\$	213,072.00		441,476.64	
43300 - OTHER ATAX FUNDING	\$	150,000.00		\$	150,000.00	\$	150,000.00	
43500 - GRANTS		,			•		•	
43510 - COUNTY ATAX GRANT			\$ 175,000.00	\$	175,000.00	\$	175,000.00	
Total 43500 - GRANTS	\$	0.00	\$ 175,000.00	\$	175,000.00	\$ 288,530.14 \$	463,530.14	
Total 43000 - GOVERNMENT SUPPORT/GRANTS	\$	363,072.00	\$ 175,000.00	\$	538,072.00	•	1,185,906.09	
Total 44000 - MARKETING SALES	\$	0.00			0.00		35,325.00	
Total 45000 - OTHER SALES	\$	0.00	\$ 0.00	\$	0.00		27,015.56	
49900 - MISCELLANEOUS INCOME	•	202 072 00	¢ 475.000.00	•		\$ 34,471.18 \$	34,471.18	
Total 40000 - REVENUES	\$	363,072.00	\$ 175,000.00	Þ	538,072.00	\$ 744,645.83 \$	1,282,717.83	
Expenses								
Total 50000 - PERSONNEL EXPENSES	\$	172,470.87	\$ 0.00	\$	172,470.87	\$ 190,800.13 \$	363,271.00	
60000 - NON-PERSONNEL EXPENSES	•	,	,	•	_,,	,	,	
61000 - GENERAL EXPENSES								
61100 - SUPPLIES	\$	4,846.24		\$	4,846.24	\$ 5,285.37 \$	10,131.61	
61110 - POSTAGE & SHIPPING	\$	1,050.89		\$	1,050.89	\$ 1,185.05 \$	2,235.94	
61200 - PRINTING	\$	1,172.28		\$	1,172.28	\$ 1,321.93 \$	2,494.21	
61210 - BUSINESS CARDS/ENVELOPES	\$	407.38		\$	407.38	\$ 459.38 \$	866.76	
61250 - COLLATERAL	\$	3,678.12		\$	3,678.12		7,808.21	
61250 - COLLATERAL - Other						\$ 745.57 \$	745.57	
61251 - VISITOR MAP	\$	437.89		\$	437.89		931.68	
Total 61250 - COLLATERAL	\$	4,116.01			4,116.01	•	9,485.46	
Total 61200 - PRINTING 61300 - ADVERTISING	\$	5,695.67	\$ 0.00	\$	5,695.67	\$ 7,150.76 \$	12,846.43	
61310 - ADVERTISING 61310 - PRINT ADVERTISING			\$ 23,164.24	2	23,164.24	\$ 51,192.14 \$	74,356.38	
61320 - ELECTRONIC MEDIA			\$ 96,563.83		96,563.83	•	185,247.86	
61350 - SOCIAL MEDIA			\$ 36,509.51		36,509.51		77,679.80	
61360 - EMAIL MARKETING			\$ 6,043.88		6,043.88		12,859.32	
61370 - PUBLIC RELATIONS			\$ 13,129.67	\$	13,129.67	\$ 14,805.80 \$	27,935.47	
61380 - WEBSITE	\$	18,138.08		\$	18,138.08	\$ 20,453.58 \$	38,591.66	
61381 - WEBSITE - PLUGINS	\$	7,510.13		\$	7,510.13	\$ 8,286.87 \$	15,797.00	
613820 - SEO	\$	9,089.48		\$	9,089.48	\$ 12,048.85 \$	21,138.33	
61399 - AD PRODUCTION / GRAPHIC DESIGN	\$	5,005.00		\$	5,005.00		10,569.88	
Total 61300 - ADVERTISING	\$	39,742.69	\$ 175,411.13	\$	215,153.82	\$ 249,021.88 \$	464,175.70	
61400 - SALES - GROUPS & MEETINGS								
61390 - Beaufort Area Sports Event - STAR	\$	20,314.14		\$	20,314.14		43,221.58	
61405 - MEMBERSHIP DUES 61410 - TRAVEL	\$	2,506.93		\$	2,506.93	\$ 1,608.07 \$ \$ 14,547.44 \$	4,115.00 14,547.44	
61420 - TRADESHOWS & MEETINGS	\$	9,489.81		\$	9,489.81		18,596.09	
61430 - PROMOTIONAL ITEMS	\$	968.92		\$	968.92		2,061.54	
61460 - ADVERTISING	\$	4,900.99		\$	4,900.99		10,427.55	
61470 - FAM TOURS/SITE VISITS	\$	1,437.03		\$	1,437.03		3,057.51	
Total 61400 - SALES - GROUPS & MEETINGS	\$	39,617.82	\$ 0.00	\$	39,617.82	\$ 56,408.89 \$	96,026.71	
61500 - TELEPHONE & TELECOMMUNICATIONS								
61510 - TELEPHONE	\$	2,014.20		\$	2,014.20	\$ 2,271.33 \$	4,285.53	
61540 - INTERNET SERVICE	\$	1,190.66		\$	1,190.66	\$ 1,342.66 \$	2,533.32	
Total 61500 - TELEPHONE & TELECOMMUNICATIONS	\$	3,204.86	\$ 0.00	\$	3,204.86	•	6,818.85	
61600 - BUSINESS/LIABILITY INSURANCE	_			_		\$ (156.00) \$	(156.00)	
61620 - BUISNESS OWNERS INSURANCE	\$	523.58		\$	523.58		1,114.00	
Total 61600 - BUSINESS/LIABILITY INSURANCE 61700 - TRAVEL & MEALS	\$	523.58	\$ 0.00	<b>\$</b>	523.58	\$ 434.42 \$	958.00	
61710 - TRAVEL & WEALS						\$ 1,207.08 \$	1,207.08	
61720 - COMMUNITY RELATIONS						\$ 13,731.83 \$	13,731.83	
61750 - BOARD MEETINGS/RETREATS						\$ 43.52 \$	43.52	
61760 - TRADE SHOWS/EVENTS					;	\$ 1,835.59 \$	1,835.59	
61770 - FAM TOURS - PR SITE VISITS					;	\$ 5,843.98 \$	5,843.98	
Total 61700 - TRAVEL & MEALS	\$	0.00	\$ 0.00	\$	0.00		22,662.00	
61800 - DUES & SUBSCRIPTIONS	\$	1,976.28		\$	1,976.28	\$ 2,228.58 \$	4,204.86	
61850 - STAFF DEVELOPMENT /TRAINING					:	\$ 3,411.99 \$	3,411.99	
61900 - FEES/SERVICE CHARGES								
61905 - BANK FEES	\$	176.46		\$	176.46		375.45	
61910 - MERCHANT SERVICE FEES	\$	3,517.16	<u> </u>	\$	3,517.16		7,483.31	
Total 61900 - FEES/SERVICE CHARGES	\$	3,693.62			3,693.62		7,858.76	
Total 61000 - GENERAL EXPENSES 62000 - OCCUPANCY EXPENSES	\$	100,351.65	\$ 175,411.13	Þ	275,762.78	\$ 355,568.07 \$	631,330.85	
62100 - OCCUPANCY EXPENSES 62100 - RENT	\$	7.050.00		\$	7,050.00	\$ 7,950.00 \$	15,000.00	
62200 - KENT 62200 - UTILITIES	φ	7,000.00		Ψ	7,000.00	ψ 1,950.00 Φ	13,000.00	

62220 - WATER & SEWER         \$ 509.57         \$ 509.57         \$ 509.57         \$ 1,084.20           Total 62200 - UTILITIES         \$ 6,126.89         0.00         \$ 6,126.89         \$ 6,090.06         \$ 13,035.95           62300 - BUILDING MAINTENANCE         \$ 1,429.04         \$ 1,429.04         \$ 1,429.04         \$ 1,611.46         \$ 3,040.50           62400 - PUBLIC RESTROOM SUPPLIES         \$ 280.87         \$ 280.87         \$ 280.87         \$ 316.73         \$ 597.60           62600 - CONTRACT SERVICES         \$ 6,136.32         \$ 6,136.32         \$ 6,919.68         \$ 13,056.00           62690 - OTHER BLDG-RELATED SERVICES         \$ 518.88         \$ 518.88         \$ 585.12         \$ 1,040.00           Total 62600 - CONTRACT SERVICES         \$ 6,655.20         \$ 0.00         \$ 6,655.20         \$ 7,504.80         \$ 14,160.00           Total 62000 - COCUPANCY EXPENSES         \$ 21,542.00         \$ 0.00         \$ 21,542.00         \$ 24,292.05         \$ 45,834.05           63000 - EQUIPMENT         \$ 420.18         \$ 420.18         \$ 473.81         \$ 893.99           63210 - COPIER/PRINTER SERVICE CONTRACT         \$ 1,692.85         \$ 1,692.85         \$ 1,908.95         \$ 3,601.80           63250 - I/S SERVICE & SUPPORT         \$ 1,958.26         \$ 1,958.26         \$ 1,958.26         \$ 2,208.24
62300 - BUILDING MAINTENANCE \$ 1,429.04 \$ 1,611.46 \$ 3,040.50 62400 - PUBLIC RESTROOM SUPPLIES \$ 280.87 \$ 280.87 \$ 280.87 \$ 316.73 \$ 597.60 62600 - CONTRACT SERVICES \$ 280.87 \$ 280.87 \$ 316.73 \$ 597.60 62600 - CONTRACT SERVICES \$ 6,136.32 \$ 6,136.32 \$ 6,919.68 \$ 13,056.00 62600 - CONTRACT SERVICES \$ 6,136.32 \$ 6,136.32 \$ 6,919.68 \$ 13,056.00 62600 - CONTRACT SERVICES \$ 518.88 \$ 518.88 \$ 518.88 \$ 585.12 \$ 1,104.00 Total 62600 - CONTRACT SERVICES \$ 6,655.20 \$ 0.00 \$ 6,655.20 \$ 7,504.80 \$ 14,160.00 Total 62000 - OCCUPANCY EXPENSES \$ 21,542.00 \$ 0.00 \$ 21,542.00 \$ 24,292.05 \$ 45,834.05 63000 - EQUIPMENT LEASES \$ 420.18 \$ 420.18 \$ 473.81 \$ 893.99 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 1,692.85 \$ 1,692.85 \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 9,90.0 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.
\$ 280.87 \$ 280.87 \$ 280.87 \$ 316.73 \$ 597.60 \$ 62600 - CONTRACT SERVICES \$ 62610 - CUSTODIAL SERVICES \$ 6,136.32 \$ 6,136.32 \$ 6,919.68 \$ 13,056.00 \$ 62690 - OTHER BLDG-RELATED SERVICES \$ 518.88 \$ 518.88 \$ 518.88 \$ 585.12 \$ 1,04.00 \$ Total 62600 - CONTRACT SERVICES \$ 6,655.20 \$ 0.00 \$ 6,655.20 \$ 7,504.80 \$ 14,160.00 \$ 10.00 \$ 21,542.00 \$ 24,292.05 \$ 45,834.05 \$ 10.00 \$ 21,542.00 \$ 24,292.05 \$ 24,834.05 \$ 10.00 \$ 21,542.00 \$ 24,292.05 \$ 24,292.05 \$ 24,834.05 \$ 10.00 \$ 21,542.00 \$ 24,292.05 \$ 24,834.05 \$ 10.00 \$ 21,542.00 \$ 24,292.05 \$ 24,834.05 \$ 10.00 \$ 21,542.00 \$ 24,292.05 \$ 24,292.05 \$ 24,834.05 \$ 21,542.00 \$ 21,542.00 \$ 24,292.05 \$
62600 - CONTRACT SERVICES 62601 - CUSTODIAL SERVICES \$ 6,136.32 \$ 6,136.32 \$ 6,919.68 \$ 13,056.00 \$ 62690 - OTHER BLDG-RELATED SERVICES \$ 518.88 \$ 518.88 \$ 555.12 \$ 1,104.00 Total 62600 - CONTRACT SERVICES \$ 6,655.20 \$ 0.00 \$ 6,655.20 \$ 7,504.80 \$ 14,160.00 Total 62000 - OCCUPANCY EXPENSES \$ 21,542.00 \$ 0.00 \$ 21,542.00 \$ 24,292.05 \$ 45,834.05 \$ 63000 - EQUIPMENT 63100 - EQUIPMENT LEASES \$ 420.18 \$ 420.18 \$ 420.18 \$ 473.81 \$ 893.99 \$ 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 \$ 63250 - I/S SERVICE & SUPPORT \$ 1,692.85 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 \$ 63300 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 \$ 63300 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 \$ 63300 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 \$ 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63000 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63000 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 \$ 0.00 \$
62610 - CUSTODIAL SERVICES         \$ 6,136.32         \$ 6,136.32         \$ 6,919.68         \$ 13,056.00           62690 - OTHER BLDG-RELATED SERVICES         \$ 518.88         \$ 518.88         \$ 518.88         \$ 585.12         \$ 1,104.00           Total 62600 - CONTRACT SERVICES         \$ 6,655.20         \$ 0.00         \$ 6,655.20         \$ 7,504.80         \$ 14,160.00           Total 62000 - OCCUPANCY EXPENSES         \$ 21,542.00         \$ 0.00         \$ 21,542.00         \$ 24,292.05         \$ 45,834.05           63000 - EQUIPMENT         \$ 420.18         \$ 420.18         \$ 420.18         \$ 473.81         \$ 893.99           63200 - EQUIPMENT MAINTENANCE/SERVICE         \$ 420.18         \$ 1,692.85         \$ 1,998.26         \$ 1,998.25         \$ 1,998.26         \$ 3,601.80           63250 - I/S SERVICE & SUPPORT         \$ 1,958.26         \$ 1,958.26         \$ 1,958.26         \$ 2,208.24         \$ 4,166.50           Total 63200 - EQUIPMENT MAINTENANCE/SERVICE         \$ 3,651.11         \$ 0.00         \$ 3,651.11         \$ 99.00         \$ 99.00           63310 - COMPUTERS/PRINTERS/TECH         \$ 9.00         \$ 0.00         \$ 99.00         \$ 99.00         \$ 99.00           Total 63300 - EQUIPMENT PURCHASE         \$ 0.00         \$ 0.00         \$ 99.00         \$ 99.00         \$ 99.00         \$ 99.00
Case
Total 62600 - CONTRACT SERVICES \$ 6,655.20 \$ 0.00 \$ 6,655.20 \$ 7,504.80 \$ 14,160.00 Total 62000 - OCCUPANCY EXPENSES \$ 21,542.00 \$ 0.00 \$ 21,542.00 \$ 24,292.05 \$ 45,834.05 63000 - EQUIPMENT   63100 - EQUIPMENT LEASES \$ 420.18 \$ 420.18 \$ 420.18 \$ 473.81 \$ 893.99 63200 - EQUIPMENT MAINTENANCE/SERVICE   63210 - COPIER/PRINTER SERVICE CONTRACT \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT PURCHASE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.0
Total 62000 - OCCUPANCY EXPENSES \$ 21,542.00 \$ 0.00 \$ 21,542.00 \$ 24,292.05 \$ 45,834.05 63000 - EQUIPMENT   63100 - EQUIPMENT LEASES \$ 420.18 \$ 420.18 \$ 420.18 \$ 893.99 63200 - EQUIPMENT MAINTENANCE/SERVICE   63210 - COPIER/PRINTER SERVICE CONTRACT \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63000 - EQUIPMENT 63100 - EQUIPMENT LEASES \$ 420.18 \$ 420.18 \$ 473.81 \$ 893.99 63200 - EQUIPMENT MAINTENANCE/SERVICE 63210 - COPIER/PRINTER SERVICE CONTRACT \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE 63310 - COMPUTERS/PRINTERS/TECH \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63000 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63100 - EQUIPMENT MAINTENANCE/SERVICE 63210 - COPIER/PRINTER SERVICE CONTRACT \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE 63310 - COMPUTERS/PRINTERS/TECH \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63000 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63200 - EQUIPMENT MAINTENANCE/SERVICE 63210 - COPIER/PRINTER SERVICE CONTRACT \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE 63310 - COMPUTERS/PRINTERS/TECH 5 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63210 - COPIER/PRINTER SERVICE CONTRACT \$ 1,692.85 \$ 1,692.85 \$ 1,908.95 \$ 3,601.80 63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63250 - I/S SERVICE & SUPPORT \$ 1,958.26 \$ 1,958.26 \$ 2,208.24 \$ 4,166.50 Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
Total 63200 - EQUIPMENT MAINTENANCE/SERVICE \$ 3,651.11 \$ 0.00 \$ 3,651.11 \$ 4,117.19 \$ 7,768.30 63300 - EQUIPMENT PURCHASE \$ 99.00 \$ 99.00 Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00 Total 63000 - EQUIPMENT PURCHASE \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29 64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63300 - EQUIPMENT PURCHASE 63310 - COMPUTERS/PRINTERS/TECH Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00  Total 63000 - EQUIPMENT \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29  64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
63310 - COMPUTERS/PRINTERS/TECH Total 63300 - EQUIPMENT PURCHASE \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00  Total 63000 - EQUIPMENT \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29  64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING & AUDIT \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
Total 63300 - EQUIPMENT PURCHASE       \$ 0.00 \$ 0.00 \$ 0.00 \$ 99.00 \$ 99.00         Total 63000 - EQUIPMENT       \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29         64000 - CONTRACT SERVICES/PROF. FEES       \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
Total 63000 - EQUIPMENT       \$ 4,071.29 \$ 0.00 \$ 4,071.29 \$ 4,690.00 \$ 8,761.29         64000 - CONTRACT SERVICES/PROF. FEES       \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
<b>64000 - CONTRACT SERVICES/PROF. FEES 64100 - ACCOUNTING &amp; AUDIT</b> \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
<b>64100 - ACCOUNTING &amp; AUDIT</b> \$ 9,300.36 \$ 9,300.36 \$ 10,487.63 \$ 19,787.99
<b>64400 - RESEARCH</b> \$ 12,055.55 \$ 12,055.55 \$ 13.594.55 \$ 25.650.10
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<b>64700 - FULFILLMENT SERVICES</b> \$ 10,651.03 \$ 12,010.73 \$ 22,661.76
64900 - OTHER SERVICES
<b>64920 - ACCOUNT SERVICES</b> \$ 11,515.00 \$ 11,515.00 \$ 27,120.00 \$ 38,635.00
Total 64900 - OTHER SERVICES \$ 11,515.00 \$ 0.00 \$ 11,515.00 \$ 27,120.00 \$ 38,635.00
Total 64000 - CONTRACT SERVICES/PROF. FEES \$ 43,521.94 \$ 0.00 \$ 43,521.94 \$ 63,212.91 \$ 106,734.85
69000 - OTHER EXPENSES
<b>61385 - BOOKING ENGINE</b> \$ 373.65 \$ 373.65 \$ 421.35 \$ 795.00
<b>69025 - PROMOTIONAL ITEMS</b> \$ 437.39 \$ 493.23 \$ 930.62
<b>69100 - TRADE SHOWS</b> \$ 940.00 \$ 1,060.00 \$ 2,000.00
<b>69999 - MISCELLANEOUS EXPENSES</b> \$ 10,339.82 \$ 11,659.80 \$ 21,999.62
Total 69000 - OTHER EXPENSES \$ 12,090.86 \$ 0.00 \$ 12,090.86 \$ 13,634.38 \$ 25,725.24
Total 60000 - NON-PERSONNEL EXPENSES \$ 181,577.74 \$ 175,411.13 \$ 356,988.87 \$ 461,397.41 \$ 818,386.28
Total Expenses \$ 354,048.61 \$ 175,411.13 \$ 529,459.74 \$ 652,707.54 \$ 1,182,167.28
Net Income \$ 9,023.39 \$ (411.13) \$ 8,612.26 \$ 93,438.29 \$ 102,050.55

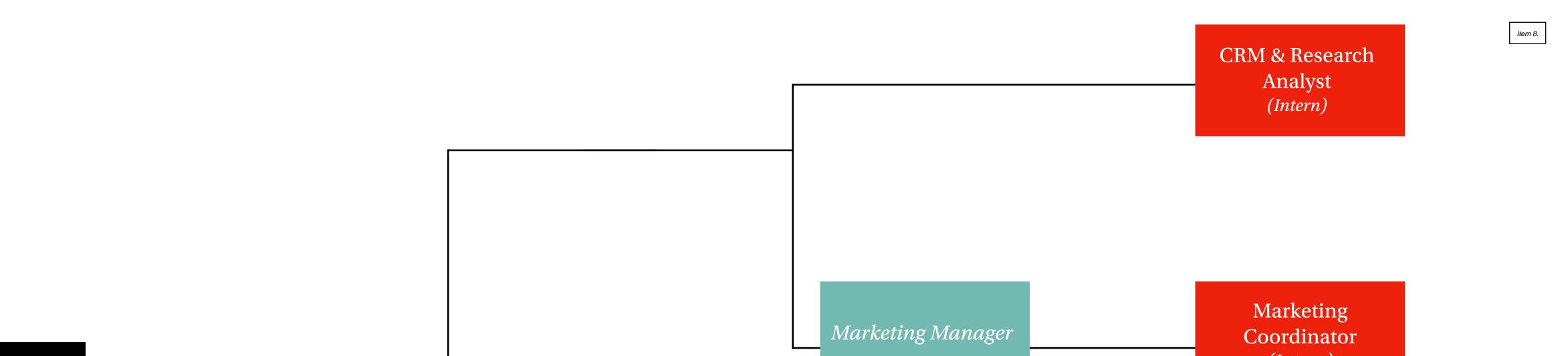
# Greater Beaufort-Port Royal CVB Profit and Loss by Class

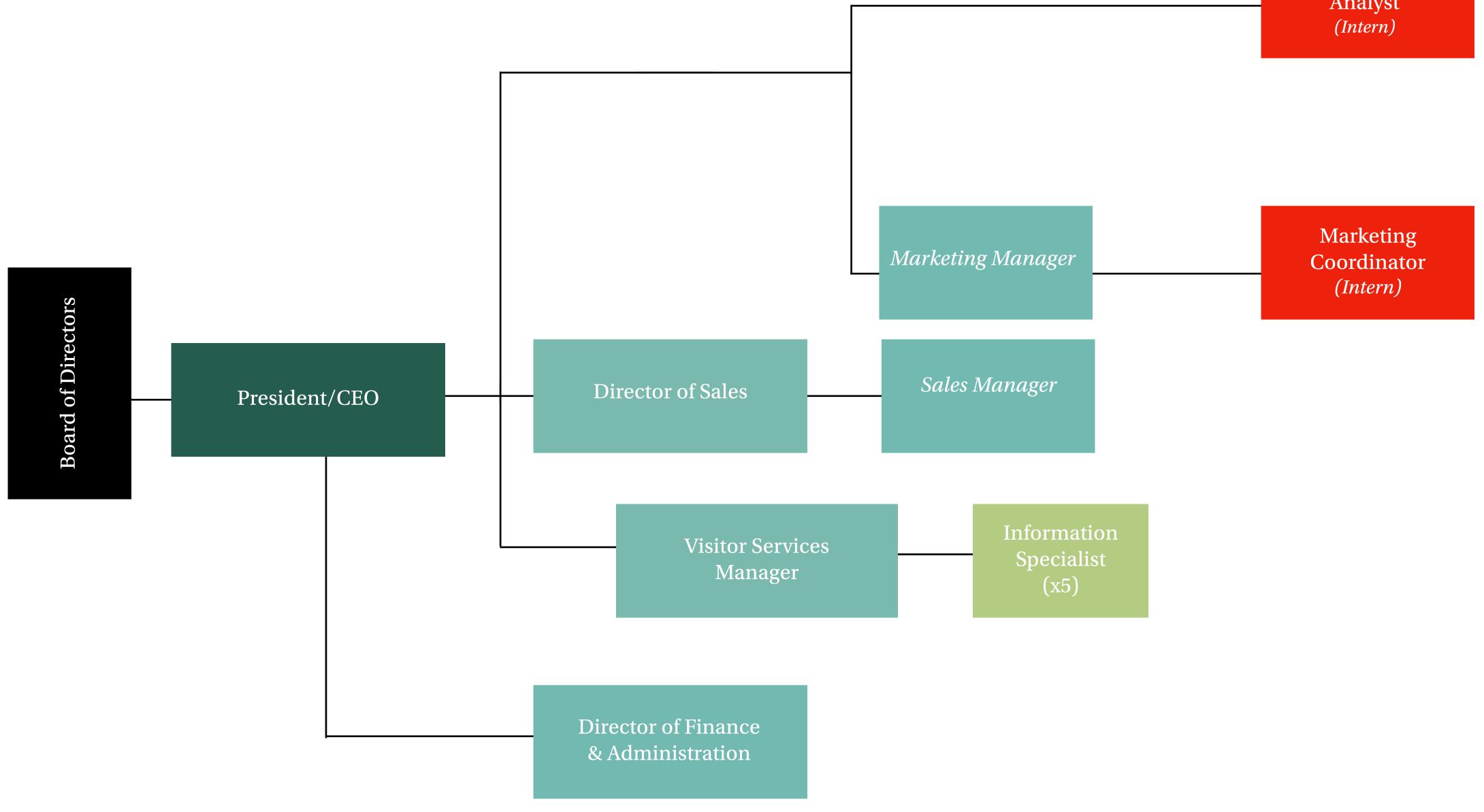
July 2022 - June 2023

	DEAUEODT	DET COUNTY	Total OTUED	ED		
	BEAUFORT COUNTY	BFT COUNTY GRANT	BEAUFORT COUNTY	Total OTHER FUNDING	TOTAL	
Income						
40000 - REVENUES						
43000 - GOVERNMENT SUPPORT/GRANTS						
43200 - DMO Funding						
43210 - County DMO Funding	\$231,795.21		\$231,795.21		\$231,795.21	
Total 43200 - DMO Funding	\$231,795.21		\$231,795.21	\$282,582.50	\$514,377.71	
43300 - OTHER ATAX FUNDING	\$150,000.00		\$150,000.00		\$150,000.00	
43500 - GRANTS						
43510 - COUNTY ATAX GRANT		\$180,000.00	\$180,000.00		\$180,000.00	
Total 43500 - GRANTS		\$180,000.00	\$180,000.00	\$269,416.17	\$449,416.17	
Total 43000 - GOVERNMENT SUPPORT/GRANTS	\$381,795.21	\$180,000.00	\$561,795.21	\$702,037.73	\$1,263,832.94	
Total 44000 - MARKETING SALES				\$20,425.00	\$20,425.00	
Total 45000 - OTHER SALES				\$25,065.89	\$25,065.89	
49900 - MISCELLANEOUS INCOME				\$49,015.57	\$49,015.57	
Total 40000 - REVENUES	\$381,795.21	\$180,000.00	\$561,795.21	\$783,269.19	\$1,345,064.40	
Expenses						
Total 50000 - PERSONNEL EXPENSES	\$180,025.73		\$180,025.73	\$259,344.49	\$439,370.22	
60000 - NON-PERSONNEL EXPENSES						
61000 - GENERAL EXPENSES	<b>***</b> • • • • • • • • • • • • • • • • • •		40.007.40	05 707 04	20.704.00	
61100 - SUPPLIES	\$3,987.18		\$3,987.18	\$5,737.64	\$9,724.82	
61110 - POSTAGE & SHIPPING	\$1,439.45		\$1,439.45	\$2,071.20	\$3,510.65	
61200 - PRINTING						
61210 - BUSINESS CARDS/ENVELOPES	\$199.44		\$199.44	\$287.00	\$486.44	
61250 - COLLATERAL	0500.00		<b>\$500.00</b>	<b>***</b>	44.007.04	
61250 - COLLATERAL - Other	\$568.80		\$568.80	\$818.51	\$1,387.31	
Total 61250 - COLLATERAL	\$568.80 \$769.24		\$568.80	\$818.51	\$1,387.31	
Total 61200 - PRINTING	\$768.24		\$768.24	\$1,105.51	\$1,873.75 \$4,750.00	
61300 - ADVERTISING	\$12,570.78	\$20.296.24	\$41,957.02	\$4,750.00	\$4,750.00	
61310 - PRINT ADVERTISING 61320 - ELECTRONIC MEDIA	\$12,570.78	\$29,386.24 \$96,066.00	. ,	\$23,345.73 \$76,193.10	\$65,302.75	
61340 - BILLBOARDS - Out of Home	φ41,220.90	φ90,000.00	\$137,286.90	\$600.00	\$213,480.00 \$600.00	
61350 - SOCIAL MEDIA	\$14,078.49	\$32,910.76	\$46,989.25	\$26,145.76	\$73,135.01	
61360 - EMAIL MARKETING	\$1,178.98		\$3,935.04	\$2,189.54	\$6,124.58	
61370 - PUBLIC RELATIONS	\$5,864.51	\$13,709.25	\$19,573.76	\$10,891.24	\$30,465.00	
61380 - WEBSITE	\$16,810.82		\$16,810.82	\$24,191.19	\$41,002.01	
61381 - WEBSITE - PLUGINS	\$5,740.00		\$5,740.00	\$8,260.00	\$14,000.00	
613820 - SEO	\$6,765.00		\$6,765.00	\$9,735.00	\$16,500.00	
61399 - AD PRODUCTION / GRAPHIC DESIGN	\$236.34		\$236.34	\$340.09	\$576.43	
Total 61300 - ADVERTISING	\$104,465.82		\$279,294.13	\$186,641.65	\$465,935.78	
61400 - SALES - GROUPS & MEETINGS	÷10-1,400.02	Ţ., <del>-, 52</del> 0.01	72. V,207. IV	Ţ 100,04 1.00	Ţ <del>1</del> 00,000.10	
61405 - MEMBERSHIP DUES	\$2,411.19		\$2,411.19	\$3,469.75	\$5,880.94	
61410 - TRAVEL	Ψ <b>=</b> , 111.10		Ψ=, 111.10	\$13,679.11	\$13,679.11	
61420 - TRADESHOWS & MEETINGS	\$11,773.05		\$11,773.05	\$16,941.70	\$28,714.75	
61430 - PROMOTIONAL ITEMS	\$512.50		\$512.50	\$737.49	\$1,249.99	
					•	

61450 - PRINTING				\$374.78	\$374.78
61460 - ADVERTISING	\$3,178.34		\$3,178.34	\$4,573.71	\$7,752.05
61470 - FAM TOURS/SITE VISITS	ψο, 17 ο.ο τ		ψο, 170.04	\$1,336.52	\$1,336.52
Total 61400 - SALES - GROUPS & MEETINGS	\$17,875.08		\$17,875.08	\$41,113.06	\$58,988.14
61500 - TELEPHONE & TELECOMMUNICATIONS	ψ17,070.00		\$0.00	\$0.00	\$0.00
61510 - TELEPHONE	\$1,736.58		\$1,736.58	\$2,498.99	\$4,235.57
61540 - INTERNET SERVICE	\$1,095.98		\$1,095.98	\$1,577.14	\$2,673.12
Total 61500 - TELEPHONE & TELECOMMUNICATIONS	\$2,832.56		\$2,832.56	\$4,076.13	\$6,908.69
61600 - BUSINESS/LIABILITY INSURANCE	Ψ2,002.00		<b>42,002.00</b>	<b>4</b> 4,010.10	ψο,σσσ.σσ
61620 - BUISNESS OWNERS INSURANCE	\$350.96		\$350.96	\$505.04	\$856.00
Total 61600 - BUSINESS/LIABILITY INSURANCE	\$350.96		\$350.96	\$505.04	\$856.00
61700 - TRAVEL & MEALS	ψοσο.σο		ψοσο.σο	ψουσ.υ-	ψοσο.σσ
61710 - TRAVEL				\$12,376.42	\$12,376.42
61720 - COMMUNITY RELATIONS				\$8,142.31	\$8,142.31
61760 - TRADE SHOWS/EVENTS				\$5,822.00	\$5,822.00
61770 - FAM TOURS - PR SITE VISITS				\$6,618.22	\$6,618.22
Total 61700 - TRAVEL & MEALS				\$32,958.95	\$32,958.95
61800 - DUES & SUBSCRIPTIONS	\$3,223.74		\$3,223.74	\$4,639.03	\$7,862.77
61850 - STAFF DEVELOPMENT /TRAINING	ψ0,220.7 τ		ψ0,220.7-	\$1,365.73	\$1,365.73
61900 - FEES/SERVICE CHARGES				ψ1,000.70	ψ1,000.70
61905 - BANK FEES	\$122.71		\$122.71	\$176.58	\$299.29
61910 - MERCHANT SERVICE FEES	\$3,627.18		\$3,627.18	\$4,920.32	\$8,547.50
Total 61900 - FEES/SERVICE CHARGES	\$3,749.89		\$3,749.89	\$5,096.90	\$8,846.79
Total 61000 - GENERAL EXPENSES	\$138,692.92	\$174,828.31	\$313,521.23	\$285,310.84	\$598,832.07
62000 - OCCUPANCY EXPENSES	\$130,032.32	ψ17 <del>4</del> ,020.31	ψ313,321.23	Ψ203,310.04	<b>\$330,032.07</b>
62100 - RENT	\$7,380.00		\$7,380.00	\$10,620.00	\$18,000.00
62200 - UTILITIES	Ψ1,300.00		ψ1,500.00	Ψ10,020.00	Ψ10,000.00
62210 - ELECTRICITY	\$4,714.36		\$4,714.36	\$6,784.07	\$11,498.43
62220 - WATER & SEWER	\$457.08		\$457.08	\$657.76	\$1,114.84
Total 62200 - UTILITIES	\$5,171.44		\$5,171.44		
62300 - BUILDING MAINTENANCE	\$687.14		\$687.14	<b>\$7,441.83</b> \$988.80	<b>\$12,613.27</b> \$1,675.94
62400 - PUBLIC RESTROOM SUPPLIES	\$84.28		\$84.28	φ900.00	\$84.28
62600 - CONTRACT SERVICES	φ04.20		φ04.20		φ04.20
	¢5 252 06		¢E 252.06	\$7,703.04	£12.056.00
62610 - CUSTODIAL SERVICES 62690 - OTHER BLDG-RELATED SERVICES	\$5,352.96 \$442.80		\$5,352.96	. ,	\$13,056.00
			\$442.80	\$637.20	\$1,080.00
Total 62600 - CONTRACT SERVICES	\$5,795.76		\$5,795.76	\$8,340.24	\$14,136.00
Total 62000 - OCCUPANCY EXPENSES 63000 - EQUIPMENT	\$19,118.62		\$19,118.62	\$27,390.87	\$46,509.49
63100 - EQUIPMENT LEASES	¢257.45		¢257.45	\$E14.20	¢071 0 <i>1</i>
	\$357.45		\$357.45	\$514.39	\$871.84
63200 - EQUIPMENT MAINTENANCE/SERVICE	¢1 441 50		¢1 441 50	¢2.074.22	¢2 E4E 92
63210 - COPIER/PRINTER SERVICE CONTRACT	\$1,441.50		\$1,441.50	\$2,074.33	\$3,515.83
63250 - I/S SERVICE & SUPPORT	\$1,084.66 \$2,536.46		\$1,084.66 \$2,536.46	\$1,560.84 \$2,635.47	\$2,645.50 <b>\$6,161.33</b>
Total 63200 - EQUIPMENT MAINTENANCE/SERVICE	\$2,526.16		\$2,526.16	\$3,635.17	<b>30, 101.33</b>
63300 - EQUIPMENT PURCHASE	<b>#905.65</b>		<b>#905.65</b>	£4 200 0E	£2.404.50
63310 - COMPUTERS/PRINTERS/TECH	\$895.65		\$895.65	\$1,288.85	\$2,184.50
Total 63300 - EQUIPMENT PURCHASE	\$895.65 \$3.770.36		\$895.65 \$3.770.36	\$1,288.85 \$5,428.44	\$2,184.50 \$0.247.67
Total 63000 - EQUIPMENT	\$3,779.26		\$3,779.26	\$5,438.41	\$9,217.67
64000 - CONTRACT SERVICES/PROF. FEES				¢4 250 00	¢4 050 00
61398 - DESIGN/PHOTOGRAPHY SERVICES	<b>#0.700.60</b>		¢0.700.66	\$1,250.00 \$14,077.48	\$1,250.00
64100 - ACCOUNTING & AUDIT	\$9,782.66		\$9,782.66	\$14,077.48	\$23,860.14
64400 - RESEARCH	\$28,439.73		\$28,439.73	\$40,925.47	\$69,365.20
64700 - FULFILLMENT SERVICES	\$4,081.25		\$4,081.25	\$5,873.02	\$9,954.27
64900 - OTHER SERVICES					

64910 - DOCUMENT SHREDDING SERVICE	\$55.00		\$55.00		\$55.00
64930 - MEDIA PLACEMENT	\$1,588.00		\$1,588.00	\$2,212.00	\$3,800.00
Total 64900 - OTHER SERVICES	\$1,643.00		\$1,643.00	\$2,212.00	\$3,855.00
Total 64000 - CONTRACT SERVICES/PROF. FEES	\$43,946.64		\$43,946.64	\$64,337.97	\$108,284.61
69000 - OTHER EXPENSES					
69025 - PROMOTIONAL ITEMS	\$515.82		\$515.82	\$742.28	\$1,258.10
69999 - MISCELLANEOUS EXPENSES	\$3,185.79		\$3,185.79	\$4,584.42	\$7,770.21
Total 69000 - OTHER EXPENSES	\$3,701.61		\$3,701.61	\$5,326.70	\$9,028.31
Total 60000 - NON-PERSONNEL EXPENSES	\$209,239.05	\$174,828.31	\$384,067.36	\$387,804.79	\$771,872.15
Total Expenses	\$389,264.78	\$174,828.31	\$564,093.09	\$647,149.28	\$1,211,242.37
Net Operating Income	-\$7,469.57	\$5,171.69	-\$2,297.88	\$136,119.91	\$133,822.03





Item 8.



## Salary Disclosure

The most recent filed 990 return has listed salaries of those employees over \$100,000.

Position Report A - \$128,095 Position Report B - \$60,000 Position Report C - \$47,500



IRS Department of the Treasury Infernal Revenue Service P.O. Box 2508, Room 4010 Cincinnati OH 45201

In reply refer to: 407795027 Aug. 09, 2018 LTR 4168C 0 57-0801740 000000 00

00034055

BODC: TE



GREATER BEAUFORT-PORT ROYAL
CONVENTION AND VISITORS BUREAU
PO BOX 501
BEAUFORT SC 29901-0501

036470

Employer ID number: 57-0801740 Form 990 required: YES

Dear Taxpayer:

We're responding to your request dated June 20, 2018, about your tax-exempt status.

We issued you a determination letter in MAY 1986, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c) (3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(l) and 170(b)(l)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1)
  Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

Item 8.

4077950279 Aug. 09, 2018 LTR 4168C 0 57-0801740 000000 00 00034056

GREATER BEAUFORT-PORT ROYAL
CONVENTION AND VISITORS BUREAU
PO BOX 501
BEAUFORT SC 29901-0501

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,

solephone a martin

Stephen A. Martin Director, ED Rulings & Agreements

## **990**

## **Return of Organization Exempt From Income Tax**

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

202 I

Department of the Treasury

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

Open to Public

Interr	al Revenue	Service		► Go to w	ww.irs.gov/Form	990 for instructions	and the latest	t informa	tion.		Inspe	ection	
Α	For the	2021 calendar	year, or ta	x year beginn	ing	07-	-01 , <b>2021</b> , a	and endi	ng	0	6-30 , 20 2	22	
В	Check if ap	oplicable:	C Name o	of organization <b>GRI</b>	EATER BEAUFO	RT PORT ROYAL	CONVENT			D Emp	Employer identification number		
	Address ch	•		ousiness as						·	57-0801	740	
=	Name cha	•			). box if mail is not delive	ered to street address)		Room/sui	ite	E Teler	hone number		
Π	Initial return	_	ро воз	,		,				(843) 525-8500			
Ħ		' n/terminated			ince, country, and ZIP or	foreign postal code		1		G Gross receipts			
Ħ	Amended i			ORT, SC 2		ioroign postal touc				\$	·	,266,706	
H				,					Ц(а) т. п.т.	•		Yes X No	
Ш	Application	i penaing	r Name a	and address of prin	cipal officer:				' '		for subordinates?	5 F	
	_			7			1		, ,		tes included?		
	Tax-exemp		601(c)(3)	501(c) (	) (insert no.)	4947(a)(1) or	527		· ·		ist. See instruction	S	
	Website:		Г						H(c) Group				
	Form of org	_	Corporation	Trust Asso	ociation Other		L Year of formati	ion: 198	86 M	State of le	gal domicile: S	SC	
Pa	Summary   1 Briefly describe the organization's mission or most significant activities:   DESIGNATED MARKETING ORGANIZATION FOR THE CITY												
	1	Briefly describe	ANIZA	TION FOR	THE CITY								
9		OF BEAUFO	RT, TOWN	OF PORT	ROYAL AND T	HE UNINCORPOR	ATED SEA	ISLANI	REGIO	NS OF	NORTHERN	BEAUFORT	
au		COUNTY, SO	OUTH CAR	ROLINA.									
ern													
Governance	2	Check this box	t ▶ 🗌 if the	e organization o	discontinued its ope	erations or disposed o	of more than 25	% of its r	net assets.				
	3	Number of votil	ng members	of the governi	ing body (Part VI, li	ne 1a)				. 3		15_	
ş	4	Number of inde	ependent vot	ting members	of the governing bo	dy (Part VI, line 1b)				. 4		15	
Activities &	5	Total number o	f individuals	employed in c	alendar year 2021	(Part V, line 2a)				. 5		12	
ŧ	6	Total number o	f volunteers	(estimate if ne	cessary)					. 6			
ď	7a	Total unrelated	business re	venue from Pa	art VIII, column (C),	line 12				. 7a		0	
	b	Net unrelated b	ousiness tax	able income fro	om Form 990-T, Pa	art I. line 11				. 7b		0	
					, ,	,			Prior Year		Currer	nt Year	
	8	Contributions a	and arants (F	Part VIII line 1	h)			_	1,131			,266,706	
<u>e</u>		Program service	•		*				1,131	.,521		0	
Revenue	10	· ·	,	•	, lines 3, 4, and 7d)								
ě	10		•	` '	•			-				0	
œ			•	` '	s 5, 6d, 8c, 9c, 10c	,						0	
					•	column (A), line 12)			1,131	1,327	1	,266,706	
				amounts paid (Part IX, column (A), lines 1-3)								0	
		•		•	column (A), line 4)			•				0_	
S	15	·	•		•	olumn (A), lines 5-10)		•	343	3,845		362,164	
Expenses	16a		_	•	lumn (A), line 11e)			•				0	
be	b		•	•	mn (D), line 25)	<b>-</b>	0						
ũ	17	Other expenses	s (Part IX, c	olumn (A), line	s 11a-11d, 11f-24e	)		•	732	2,204		795,662	
	18	Total expenses	. Add lines	13-17 (must ed	qual Part IX, colum	n (A), line 25)		-	1,076	5,049	1	,157,826	
	19	Revenue less e	expenses. S	Subtract line 18	from line 12 .			-	55	5,278		108,880	
ō	ses							Begir	nning of Curre	ent Year	End of	f Year	
Net Assets or	[ 20	Total assets (P	art X, line 16	6)					674	1,084		948,333	
ASS	ž 21	Total liabilities (	(Part X, line	26)				-	263	3,697		468,568	
		Net assets or f	und balance	s. Subtract lin	e 21 from line 20				410	387		479,765	
Pa	rt II	Signature	e Block										
						ng schedules and statemen		of my know	ledge and beli	ief, it is			
true	, correct, a	nd complete. Decla	ration of prepar	rer (other than offic	er) is based on all inform	nation of which preparer ha	is any knowledge.						
		ROBB I	WELLS								02-09-	2023	
Siç	ın 📗	Signature of								Da	ate		
He	re	ROBBI	WELLS, C	CEO									
	-		nt name and titl										
		Print/Type prepa			Preparer's signature		Date		011	☐ if	PTIN		
Pai	d			CDA	-p-:: -, 0 oignaturo				Check			026	
-	parer	Roger K			<b>511</b> 4.44 <b>55</b> 5		02-10-20		self-em	iployed	P00550	936	
	e Only		<u> </u>		Elliott CPA	PC			irm's EIN				
US	e Only	Firm's address	-		is Avenue			P	hone no.				
					al SC 29935						470-8457		
May	the IRS	discuss this re-	turn with the	e preparer show	vn above? See inst	ructions					Ye	es X Mo	

1) GREATER BEAUFORT PORT ROYAL CONVENT Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		.,
4	candidates for public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	<b>ა</b>		X
4	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		v
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		X
•	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			Λ
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	44.		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	x	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Λ	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	,-		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	46		
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		X
17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		X
	If "Yes," complete Schedule G, Part III	19		x
20 a		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	-		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_ <b>~</b> _

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Checklist of Required Schedules (continued) Part IV

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
00	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	25:		
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		.,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	31		<u> </u>
30	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	v	
Par		30	Х	
ı aı	Check if Schedule O contains a response or note to any line in this Part V			
	C. C		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	.10
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c		y
	. 0 0/0 0/ 0 1		222 (5	1

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country  See instructions for filling requirements for Fig. CFN Form 414. Report of Foreign Book and Figure 1991 Associate (FRAR)			
E.	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		17
5a h	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		<u>X</u>
b C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_X_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- 30		
<b>o</b> u	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u>X</u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?••••••••	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	00		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		<u> </u>
В	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30		X
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. 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.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	$\longrightarrow$	<u>x</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4.5		
	excess parachute payment(s) during the year?	15		X
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
••	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			98
EEA	,	Form	990 (2	

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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.

Section A. Governi	ng Body and Management				
Check if S	chedule O contains a response or note to any	line in this Part VI		 	 X
,	to line 8a, 8b, or 10b below, describe the circ	· ·	, ,		

-				
10	Enter the number of voting members of the governing body at the end of the tay year		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a h	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	х	
b 12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14	x	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		x
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u> </u>	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
40	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
20	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			
	ROBB WELLS, PRESIDENT & CEO (843)525-8500, PO BOX 501, BEAUFORT, SC 29901			

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## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Officer this box if ficting the organization flor any related	5. gainzation	. 30p	J. 104			- an on	. 0111	22., 31100101, 07 1100		
					(C)					
(A)	(B)	Position (do not check more than one				(D)	(E)	(F)		
Name and title	Average	,				s both ar	ı	Reportable	Reportable	Estimated amount
	hours	offic	er and	l a dir	ector	/trustee)	1	compensation from the	compensation from related	of other compensation
	per week (list any							organization (W-2/	organizations W-2/	from the
	hours for	Indi or d	Inst	Officer	Ke)	Hig! emp	Former	1099-MISC/	1099-MISC/	organization and
	related	Individual trustee or director	Institutional trustee	er	Key employee	hest oloye	ner	1099-NEC)	1099-NEC	related organizations
	organizations	al tr	mal		ploye	com				
	below	istee	trust		ě	pen				
	dotted line)		ee			Highest compensated employee				
(1) ROBB_WELLS										
CEO		х		х				106,000	0	0
(2) GRETA MADDOX										
BOARD MEMBER		х						0	0	0
(3) TODD MCDANIEL										
BOARD MEMBER		Х						0	0	0
(4) CHRIS_BUTLER										
BOARD MEMBER		X						0	0	0
(5) EILEEN NEWTON										
BOARD MEMBER		X						0	0	0
(6) DICK_STEWART										
BOARD MEMBER		х						0	0	0
(7) RON TUCKER										
BOARD MEMBER		X						0	0	0
(8) STEPHANIE HUNT										
BOARD MEMBER		X						0	0	0
(9) ALISSA MURRIE										
BOARD MEMBER		х						0	0	0
(10)CHRIS_JOHNSON										
BOARD MEMBER		Х						0	0	0
(11)JW WEATHERFORD										
BOARD MEMBER		Х						0	0	0
(12)LISA_KUSSUBA										
BOARD MEMBER		х						0	0	0
(13)LINDA_ROPER										
BOARD MEMBER		х						0	0	0
(14)FRANK_LESESNE										
CHAIR		Х		х				0	0	

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) Position (A) (B) (D) (E) (F) (do not check more than one Name and title Average Reportable Reportable Estimated amount box, unless person is both an hours compensation compensation of other officer and a director/trustee) from related compensation from the per week organization (W-2/ organizations (W-2/ from the (list any 1099-MISC/ 1099-MISC/ Individual trustee or director organization and Key employee Highest compensated hours for 1099-NEC) 1099-NEC) related organizations related organizations below dotted line) (15)HINA PATEL VICE CHAIR х X 0 0 0 (16)CHRISTIAN\_KATA TREASURER X x <u>(17)</u> (18)\_\_\_\_\_\_ (20)\_\_\_\_\_ (21) (22) (25) 1b Subtotal Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) 0 0 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1 Yes No 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual Х For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person ......... 5 Х **Section B. Independent Contractors** 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. (C) Name and business address Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII

		Check if Schedule O cor	ntain	is a response	or not	e to any line in this l	Part VIII			
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
s s	b	Membership dues			1b					
rant	С	Fundraising events			1c					
ñ, G	d	Related organizations .			1d					
Siffs ar A	е	Government grants (contri	butio	ons)	1e	1,153,734				
S, Si	f	All other contributions, gifts	s, gr	ants,						
ıtior er S		and similar amounts not in	clud	ed above	1f	112,972				
je je	g	Noncash contributions incl	lude	d in						
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f			1g	\$				
O w	h	Total. Add lines 1a-1f					1,266,706			
						Business Code				
e	2a									
ه ػٙ	b									
Se	С									
eve eve	d									
Program Service Revenue	е									
<u> </u>		All other program service re								
	g	Total. Add lines 2a-2f								
	3	Investment income (includir	_							
	١.	,								
		Income from investment of								
	5	Royalties	<u>· · · </u>							
		0		(i) Rea		(ii) Personal				
		Gross rents								
		Less: rental expenses	6b							
		Rental income or (loss)	6c			<u> </u>				
		Net rental income or (loss)	_	(1) 0						
	7a	Gross amount from		(i) Securiti	es	(ii) Other				
		sales of assets other than inventory	7a							
	h	Less: cost or other basis	14							
ē	-	and sales expenses	7b							
evenue	С	Gain or (loss)	7c							
		Net gain or (loss)	_							
Other R		Gross income from fundrais								
o <del>t</del>		events (not including \$	Ū							
		of contributions reported on	line		-					
		1c). See Part IV, line 18			8a					
	b	Less: direct expenses .			8b					
	С	Net income or (loss) from fu	undr	aising events						
	9a	Gross income from gaming								
		activities, See Part IV, line 1	19		9a					
		Less: direct expenses .			9b					
	С	Net income or (loss) from g	amir	ng activities		▶				
	10a	Gross sales of inventory, les								
		returns and allowances .			10a					
	1	Less: cost of goods sold			10b					
	С	Net income or (loss) from s	ales	of inventory		· · · · · · •				
w						Business Code				
e io	11a									
llan enu	b									
Miscellanous Revenue	C	All other revenue								<del> </del>
Σ						L				
		Total. Add lines 11a-11d  Total revenue. See instruc					1 066 706	^	_	100
EEA	14	TOTAL TEVELLAGE. SEE HISHING	AIOI I				1,266,706	0	0	Form <b>990</b> ( 102

## 21) GREATER BEAUFORT PORT ROYAL CONVENT Statement of Functional Expenses Part IX

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 an	y line in this Part IX			<u>x</u>
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
	9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
_	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	312,916	281,624	31,292	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	29,950	26,955	2,995	
10	Payroll taxes	19,298	17,368	1,930	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	68,235	68,235		
12	Advertising and promotion	514,723	514,723		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	45,862	45,862		
17	Travel	66,126	66,126		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,066	2,066		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	SUPPLIES	10,311	10,311		
b	POSTAGE	2,236	2,236		
С	PRINTING	12,846	12,846		
d	DUES AND SUBSCRIPTIONS	9,789	9,789		
е		63,468	63,468		
25	Total functional expenses. Add lines 1 through 24e	1,157,826	1,121,609	36,217	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and_				
	fundraising solicitation. Check here  if				
	following SOP 98-2 (ASC 958-720)				

31

32

33

Item 8.

Part X **Balance Sheet** 

(A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 532,200 789,385 2 Savings and temporary cash investments 2 61,890 3 Pledges and grants receivable, net 3 4 72,172 4 153,000 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 Inventories for sale or use 7,083 8 5,948 Prepaid expenses and deferred charges 9 9 739 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . . . . 10a b Less: accumulated depreciation . . . . . . . . . . . . 10b 10c 4,137 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 674,084 948,333 17 Accounts payable and accrued expenses 48,138 17 68,964 18 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 215,559 25 399,604 26 Total liabilities. Add lines 17 through 25 26 263,697 468,568 Organizations that follow FASB ASC 958, check here **▶** X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33, 27 Net assets without donor restrictions 410,387 27 479,765 28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30

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Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

479,765

948,333

31

32

410,387

674,084

		7-080	1740			em 8.
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					<u> - 🔲 </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,	266,	706
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,	157,	826
3	Revenue less expenses. Subtract line 2 from line 1	3			108,	880
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			410,	387
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8			(39,	502)
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			479,	765
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		[	2b	x	
	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:					
	X Separate basis					
С	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?		[	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Single Audit Act and OMB Circular A-133?			3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

EEA

Form **990** (2021)

## SCHEDULE A (Form 990)

## **Public Charity Status and Public Support**

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

OMB No. 154 Item 8.

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-E2.

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

Open to Public Inspection

Name	ame of the organization Employer identification number												
GREA	TE:	R BEAUFORT PORT ROYAL C	ONVENT				57-080174	0					
Par	: I	Reason for Public Cha	rity Status. (All	l organizations mus	t comple	te this p	art.) See instruction	ons.					
The o	gan	ization is not a private foundation bec	ause it is: (For lines	1 through 12, check only	one box.)								
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)											
3	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii)</b> .												
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 <b>section 170(b)(1)(A)(v).</b>												
7	x	An organization that normally receive	s a substantial part	of its support from a gove	ernmental u	init or from	the general public						
	_	described in section 170(b)(1)(A)(v											
8	П	A community trust described in sect		,									
9	Ħ	An agricultural research organization		, , , ,	ated in con	unction wit	th a land-grant college						
	_	or university or a non-land-grant colle					•						
		university:	,	,			· ·						
10		An organization that normally receive receipts from activities related to its e support from gross investment inconacquired by the organization after Ju	exempt functions, sume and unrelated burne 30, 1975. See <b>s</b> o	ubject to certain exception siness taxable income (le ection 509(a)(2). (Comp	s; and (2) is ss section lete Part III	no more tha 511 tax) fro .)	an 33 1/3% of its						
11	$\sqcup$	An organization organized and opera	•										
12	Ш	An organization organized and opera	•	•			•						
		one or more publicly supported orga		` ` ` `		. , . ,	. , , ,	heck					
		the box in lines 12a through 12d that											
а		Type I. A supporting organization	n operated, supervi	sed, or controlled by its s	upported o	ganization	(s), typically by giving						
		the supported organization(s) the			of the dire	ctors or tru	istees of the						
		supporting organization. You m											
b		Type II. A supporting organization											
		control or management of the su		•	sons that c	ontrol or ma	anage the supported						
		organization(s). You must com	•										
С		Type III functionally integrate		•									
		its supported organization(s) (se	,	·-									
d		Type III non-functionally integ						)					
		that is not functionally integrated	•	•		-	and an attentiveness						
		requirement (see instructions).	-	•	•								
е		Check this box if the organizatio				a Type I, T	ype II, Type III						
		functionally integrated, or Type II		tegrated supporting organ	nization.								
f		nter the number of supported organiz						• • •					
g		rovide the following information about		nization(s).									
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the or listed in you docum	r governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
(4)													
(A)													
(B)	В)												
(C)	»												
(D)													
(E)													
Total													

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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.)

Secu	on A. Fublic Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		932,093	935,136	995,117	1,153,734	4,016,080
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		932,093	935,136	995,117	1,153,734	4,016,080
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)						3,727,825
6	Public support. Subtract line 5 from line 4 .						288,255
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4		932,093	935,136	995,117	1,153,734	4,016,080
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
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	Total support. Add lines 7 through 10	, , , , ,				10	4,016,080
12	Gross receipts from related activities, etc.					12	· \(\o)
13	First 5 years. If the Form 990 is for the or						
Cooti	organization, check this box and stop her						▶ ⊔
	on C. Computation of Public Suppor Public support percentage for 2021 (line 6			11 column (f))		14	<b>–</b> 0/
14 15	Public support percentage from 2020 Sch	. , ,	•	. ,,		15	7.18 %
15 160	33 1/3% support test - 2021. If the organ						7.40 %
16a	box and <b>stop here.</b> The organization qual						
b	33 1/3% support test - 2020. If the organ	•		•			
b	this box and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances test - 202	-		-			_
174	10% or more, and if the organization mee	-					
	Part VI how the organization meets the fac						
	organization			-	-		_
h	10%-facts-and-circumstances test - 202						
b	15 is 10% or more, and if the organization	•					
	in Part VI how the organization meets the					-	-
	organization			-	-	•	
18	<b>Private foundation.</b> If the organization di						_
10	instructions						
							· · · · · · · · · · · · · · · · · · ·

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Part III	Support Schedule for Organizations Desc	ribed 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.)

Secti	on A. Public Support			•	•	,	
Calen	dar year (or fiscal year beginning in)▶	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
_	or expended on its behalf The value of services or facilities						
5							
	furnished by a governmental unit to the						
•	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
L	received from disqualified persons .		-				
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
04:	line 6.)						
	on B. Total Support	( ) 00.17	# > 0040	( ) 0040	4 11 0000		(D T ) I
	dar year (or fiscal year beginning in)▶	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the o	•	irst, second, th	ird, fourth, or f	ifth tax year as	a section 501	(c)(3)
	organization, check this box and stop her						▶ 📗
Secti	on C. Computation of Public Support						
15	Public support percentage for 2021 (line 8		•	13, column (f)	)	15	%
16	Public support percentage from 2020 Sch		<u> </u>			16	%
Secti	on D. Computation of Investment In-						
17	Investment income percentage for 2021 (I			-		17	%
18	Investment income percentage from 2020					18	%
19a	33 1/3% support tests - 2021. If the orga	nization did n	ot check the bo	ox on line 14, a	and line 15 is n	nore than 33 1/	/3%, and line
	17 is not more than 33 1/3%, check this b	ox and <b>stop h</b>	<b>nere.</b> The orga	nization qualifi	es as a publicl	y supported or	ganizatior <b>&gt;</b> 🗌
b	33 1/3% support tests - 2020. If the organization	n did not check a	box on line 14 or	line 19a, and line	e 16 is more than	33 1/3%, and	_
	line 18 is not more than 33 1/3%, check this box a	and <b>stop here.</b> T	he organization o	qualifies as a pub	licly supported or	ganization	
20	Private foundation. If the organization di	•	•		• • •	~	ctions 1

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#### Item 8.

#### Part IV **Supporting Organizations**

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

### Section A. All Supporting Organizations

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

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b Schedule A (Form 990) 2024

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		. 55	
a	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
-	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
C	A 35% controlled entity of a person described in 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
C	provide detail in <b>Part VI.</b>	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
	<u> </u>		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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	e inst	ructio	ons).
а	☐ 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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)	).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the 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.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI</b> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		r	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		110

	(Form 990) 2021
Part V	Type III

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

		Item 8.	
YAL CONVENT	57-0801740		J

1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	-		•
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1_	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally i	ntegrated Type III suppo	rting organization
	(see instructions).			

Schedule A (Form 990) 2021 EEA

**b** Excess from 2018 Excess from 2019 d Excess from 2020

Excess from 2021

. . . .

. . . .

Item 8.

57-0801740 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Secti	Current Year				
1	Amounts paid to supported organizations to accomplish e	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppor	ted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	3			
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	ո the organization is resր	onsive		
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Section E - Distribution Allocations (see instructions)  (i)  Excess Distributions  Pre-				าร	(iii) Distributable Amount for 2021
1_	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - explain in <b>Part VI</b> ). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
ее	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in <b>Part VI</b> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				

Schedule A (Form 990) 2021 EEA

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

#### Schedule B (Form 990)

### **Schedule of Contributors**

Item 8.
OMB No. 154

2021

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-PF.

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

**Employer identification number** Name of the organization GREATER BEAUFORT PORT ROYAL CONVENT 57-0801740 Organization type (check one): Filers of: Section: **X** 501(c)( **3** Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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Name of organization Employer identification number

GREATER BEAUFORT PORT ROYAL CONVENT 57-0801740

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

	· · · /	'	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	CITY OF BEAUFORT, SOUTH CAROLINA BOUNDARY STREET	\$ 371,339	Person ☑ Payroll ☐ Noncash ☐
	BEAUFORT SC 29902		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2_	BEAUFORT COUNTY, SOUTH CAROLINA RIBUAT ROAD	\$ 636,789	Person ☑ Payroll ☐ Noncash ☐
	BEAUFORT SC 29902		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SC PARKS RECREATION AND TOURISM  1205 PENDLETON ST	\$138,530	Person K Payroll Noncash (Complete Part II for
(2)	COLUMBIA SC 29201		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_4_	TOWN OF PORT ROYAL  700 PARIS AVE  PORT ROYAL SC 29935	\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash Complete Part II for noncash contributions.

EEA Schedule B (Form 990)

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No. 154 Item 8.

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Open to Public

Department of the Treasury
Internal Revenue Service
Name of the organization

tion. Inspection
Employer identification number

GREA	ER BEAUFORT PORT ROYAL CONVENT		57-0801740
Pa	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or Ac	counts.
	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 w	riting that the assets held in donor advised	
•	funds are the organization's property, subject to the organization		
6	Did the organization inform all grantees, donors, and donor ad	· ·	
•	only for charitable purposes and not for the benefit of the dono		
	conferring impermissible private benefit?		Yes No
Par			
ı uı	Complete if the organization answered "Yes"	on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the organization		
			istorically important land area
	Preservation of land for public use (for example, recreation		, ,
	Protection of natural habitat  Preservation of open space		ertified historic structure
•			
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution in the form of a co	
	easement on the last day of the tax year.		Held at the End of the Tax Year
a	Total number of concervation edeciments		2a
b	,		2b
C	Number of conservation easements on a certified historic stru	, ,	· · 2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the organ	nization during the
	tax year		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	<u>_</u>
	violations, and enforcement of the conservation easements it l	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conservatio	on easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservation ea	asements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(	B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense stater	ment and
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's financial statements tha	at describes the
	organization's accounting for conservation easements.		
Par	III Organizations Maintaining Collections	s of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in furthera	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and balance	e sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherance	ce 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 trea-		
	following amounts required to be reported under FASB ASC 9	_	
а			<b>&gt;</b> \$
h	Assets included in Form 000 Part V		• •

Part	t III Organizations Maintaining Co	ollections of Art,	, His	storical	Treasures	or O	ther Similar A	ssets	(cor		
3	Using the organization's acquisition, accession, a	and other records, chec	ck an	y of the follo	owing that mak	e signif	icant use of its				
	collection items (check all that apply):										
а	Public exhibition		d	☐ Loan o	r exchange pro	ograms					
b	Scholarly research		е	Other	0 .	Ü					
c											
	_	one and ovalain how th	oov fu	irthor the e	raonization's o	vomnt n	urnoso in Dort				
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 rece							П.	_	п	
David	assets to be sold to raise funds rather than to be		he or	ganization's	s collection?			<u>· ⊔ ˈ</u>	es_	∐ No	<u> </u>
Pari	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										
	,	swered "Yes" on F	-orr	n 990, P	art IV, line s	9, or r	eported an am	ount o	ı Fol	rm	
	990, Part X, line 21.										
1a	Is the organization an agent, trustee, custodian or	other intermediary for	cont	ributions or	other assets r	not					
	included on Form 990, Part X?							🔲 ,	es/	☐ No	)
b	If "Yes," explain the arrangement in Part XIII and	complete the following	table	e:							
							Ar	nount			
С	Beginning balance					. 10					
d	Additions during the year										
e	Distributions during the year										
	Ending balance										
f 20	Did the organization include an amount on Form 9							. П	/		_
2a						-		_		∐ No	,
b Dord	If "Yes," explain the arrangement in Part XIII. Che <b>t V Endowment Funds.</b>	ck nere if the explanati	ion n	as been pro	ovided on Part	XIII		• • • •	• •		
Part				- 000 D		40					
	Complete if the organization ans	swered yes on r	-011	11 990, P	art iv, ime ⊤	10.					
	<del>                                     </del>	a) Current year	<b>(b)</b> Pi	rior year	(c) Two years	back	(d) Three years back	(e) F	our yea	ars back	
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses										
	End of year balance										
g 2	Provide the estimated percentage of the current y	oor and balance (line 1	la co	dumn (a)) h	vold ac.						_
	Board designated or quasi-endowment	• %	ıy, cc	Julilii (a)) i	iciu as.						
a											
D		%									
С	Term endowment •%										
	The percentages on lines 2a, 2b, and 2c should e										
3a	Are there endowment funds not in the possession	n of the organization tha	at are	e held and a	administered fo	r the			_		
	organization by:								Ye	es N	0
	(i) Unrelated organizations							. 3a	(i)		
	(ii) Related organizations							. 3a(	ii)		
b	If "Yes" on line 3a(ii), are the related organizations	s listed as required on S	Sche	dule R?				. 3	<b>o</b>		
4	Describe in Part XIII the intended uses of the orga	anization's endowment	func	ls.						'	
Part											_
	Complete if the organization and		orr	n 990. P	art IV. line	11a. S	ee Form 990.	Part X	line	10.	
	Description of property	(a) Cost or other basis			or other basis		Accumulated		Book va		
	Boompasti of proporty	(investment)		1 ' '	(other)		epreciation	(4)			
1a	Land			<del>                                     </del>	. ,						_
_											
b	Buildings										
C	Leasehold improvements										
d	Equipment	4,1	.37				4,137				
е	Other										_
Total.	Add lines 1a through 1e. (Column (d) must equal i	Form 990, Part X, colu	ımn	(B), line 10d	c.)		▶				
									D /=		

Schedule D (Form 990) 2021 GREATER BEAU

Part VII Investments - Other Securities GREATER BEAUFORT PORT ROYAL CONVENT

i dit vii	Complete if the organization answered	"Yes" on Forn	n 990, Part	IV, line 11b. See Fo	orm 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book va	ılue	(c) Method of valuation:
(1) Financial (	derivatives				
(3) Other	sid equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related.	\(\sigma_{\sigma} =    \sigma_{\sigma} =    \sigm	- 000 D-4	IV II: 44 - C F-	000 Davit V II:r - 40
	Complete if the organization answered	"Yes" on Forr	n 990, Part	IV, line 11c. See Fo	rm 990, Part X, line 13.
	(a) Description of investment		(b) Book va		(c) Method of valuation:
					cost or end-of-year market value
(1) (2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)	▶			
Part IX	Other Assets.				
	Complete if the organization answered	"Yes" on Forr	n 990, Part	IV, line 11d. See Fo	orm 990, Part X, line 15.
	(a) De	scription			(b) Book value
(2)					
(3)					
<u>(4)</u>					
(5) (6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 15.)				<b>&gt;</b>
Part X	Other Liabilities.				·
	Complete if the organization answered line 25.	"Yes" on Forr	n 990, Part	IV, line 11e or 11f. S	See Form 990, Part X,
1.	(a) Description of liability	(b) Book v	alue		
(1) Federal i	ncome taxes				
(2)FUNDS	HELD FOR OTHERS	3	399,604		
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
	(b) must equal Form 990. Part X. col. (B) line 25.)		399.604		

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

> Schedule D (Form 9 118

4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  Total revenue gains and other support per audited financial statements	1	1 000 700
1	Total Total and Strot Support por addition in the strong s	1	1,266,706
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	_	
b		_	
C	Recoveries of prior year grants	_	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,266,706
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,266,706
Part		er Kett	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,157,624
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,157,624
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,157,624
Part	XIII Supplemental Information.		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	XIII Supplemental Information.		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624
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<b>Part</b> Provide	Supplemental Information.  e 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		1,157,624

EEA Schedule D (Form 99

119

# **Return of Organization Exempt From Income Tax**

Item 8.

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	2022 calend	ar year, or tax	year beginn	ing	0.	7-01 , <b>2022</b> ,	and end	ing	0	6-30 ,20	)23		
В	Check if a											tion number		
	Address	s change Doing business as								57-0801740				
	Name cha	ange	e Number and street (or P.O. box if mail is not delivered to street address) Room/suite								E Telephone number			
	Initial retu									(843) 525-8500				
	Final retu	rn/terminated	City or town, sta	ate or province,	country, and ZIP or foreig	n postal code				<b>G</b> Gros	ss receipts			
	Amended	return	BEAUFOR	RT, SC 2	9901					\$		1,367,852		
	Applicatio	n pending	F Name and addr						H(a) Is this a gr	oup return	for subordinates?	Yes X No		
		H(b) Are all									ubordinates included? Yes No			
ı	Tax-exem	pt status:	ttach a li	ist. See instructi	ions									
J	Website:	N/A							H(c) Group ex	emption	number			
K	Form of o	rganization: X	Corporation	Trust Asso	ociation Other		L Year of format	tion: 198			gal domicile:	sc		
Pa	rt I	Summar					<u> </u>				<u> </u>			
	1	Briefly descri	ibe the organizat	tion's mission	n or most significan	t activities: Di	ESIGNATED I	MARKET	ING ORGA	NIZA	TION FO	R THE CITY		
Φ		•	•		ROYAL AND T	_								
Governance			SOUTH CARC								-			
ī				-										
Ş	2	Check this be	ox if the ord	ganization dis	continued its opera	tions or disposed o	f more than 25%	of its ne	t assets.					
Ğ	3			-	ng body (Part VI, lir					3		15		
Activities &	4		-	_	of the governing boo					4		15		
itie	5		•	•	alendar year 2022 (	• ` '				5		15		
휹	6		of volunteers (e							6				
ĕ	7a		,		rt VIII, column (C),	line 12				7a		0		
					om Form 990-T, Pa					7b		0		
					,	,			Prior Year		Cur	rent Year		
	8	Contributions	s and grants (Pa	art VIII. line 1	h)				1,266	706		1,367,852		
ē			vice revenue (Pa		•				1,200	, , , , ,		0		
en	10	•	•		lines 3, 4, and 7d)							0		
Revenue	11		•	` ,	s 5, 6d, 8c, 9c, 10c							0		
_	12		•	` '	ust equal Part VIII, o	•			1,266	706		1,367,852		
	13				column (A), lines 1	, ,			1,200	, , , , ,		0		
	14				column (A), line 4)	,						0		
	15	-		•	penefits (Part IX, co				362	,164		458,190		
ses	16a	•	•		lumn (A), line 11e)	, ,.			302	,104		0		
Expenses	h		sing expenses (I	•	. , , ,		0							
×	17		٠ . ،	•	s 11a-11d, 11f-24e)			-	705	, 662		793,110		
ш	18	-	,	` '	qual Part IX, columr							•		
	19	•	s expenses. Su	•	•	,			1,157			1,251,300		
		Trevenue less	s expenses. Ou	ibilact line 10	THORITIME IZ			Basi		,880	Food	116,552		
Net Assets or	8   20 20	Total assets	(Part X, line 16)					Degi	nning of Currer	, 333	End	764,215		
éssi	E 21		s (Part X, line 26							, <u>555</u> , 568		166,509		
let /	22		•	,	e 21 from line 20					, 366 , 765		597,706		
$\overline{}$	rt II									, 765		391,100		
				mined this return	, including accompanying	g schedules and statem	ents, and to the best	of my know	/ledge and belief	f. it is				
					er) is based on all inform									
		DOBB	WELLS								02-10	9-2024		
Sig	jn	Signature of office								∟ Da	ate	2024		
He		•		<b>7</b> 0										
	-	Type or print nan	WELLS, CE	<u></u>										
		Print/Type pre			Preparer's signature		Date		Chook	☐ if	PTIN			
Pai	id		•	CDA	,			024	Check	_		:0036		
	eparer		C Elliott (		011:att 00*	DC .	02-22-20		self-emp	ioyed	P0055	0250		
	e Only				Elliott CPA	PC			Firm's EIN					
J	o Om	Firm's addres			is Avenue				Phone no.	0.40	470 045	7		
N40:	the IDC	discuss thi-			al SC 29935	ructions				843-	-470-845 □			
_	ay the IRS discuss this return with the preparer shown above? See instructions													

2) GREATER BEAUFORT PORT ROYAL CONVENT Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A	2	Х	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		Х	
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		.,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		_ <b>X</b>
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	40		
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		<u>X</u>
20 a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		_ <b>X</b>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	r	v

2) GREATER BEAUFORT PORT ROYAL CONVENT Checklist of Required Schedules (continued) Part IV

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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			
04-	employees? If "Yes," complete Schedule J	23		_ X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	04-		
<b>L</b>	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
С	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
<b>2</b> 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	250		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		_ X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
Do-	19? Note: All Form 990 filers are required to complete Schedule O	38	X	
Par	Check if Schedule O contains a response or note to any line in this Part V			
	Check it containe of contains a response of note to any life in this part v			LI No
1.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
1a				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С		1c	v	
	reportable gaming (gambling) winnings to prize winners?	10	X	

57-0801740

Item 8.

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 15			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
<b>-</b> -	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?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		X
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ou		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter:			
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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.		000	
EEA		Forn	ո <b>990  </b>	124

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.

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

Se	ction 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 on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
•	any other officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
4	supervision of officers, directors, trustees, or key employees to a management company or other person?	3 4		X
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	-		X
<i>i</i> a	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	74		
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1.0		Λ
-	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		X
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	160		17
b	with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		X
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
		16b		
Sec	organization's exempt status with respect to such arrangements?	100		
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
. •	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Don request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	ROBB WELLS, PRESIDENT & CEO (843)525-8500, PO BOX 501, BEAUFORT, SC 29901			

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GREATER BEAUFORT PORT ROYAL CONVENT

57-0801740

Item 8.

Part VII

### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee **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 the instructions for definition of "key employee."
- · List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

					(C)					
40	(5)	Position		(F)	(F)	(F)				
(A)	(B)	١ ،		eck m	nore th	nan one		(D)	(E)	(F)
Name and title	Average hours					both ar		Reportable compensation	Reportable compensation	Estimated amount of other
	per week	Onic	officer and a director/trustee)				from the	from related	compensation	
	(list any	0 =				П	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the	
	hours for	ndivi	nstitu	Officer	ey e	highe	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	related	dual	tion	, <del>"</del>	Key employee	st co	er	,	,	
	organizations below	Individual trustee or director	Institutional trustee		руее	Highest compensated employee				
	dotted line)	ee	stee			ensa				
						ted				
(1) ROBB_WELLS										
CEO		х						128,095	0	0
(2) JENNIFER KOVACS										
BOARD MEMBER		х						0	0	0
(3) TIM WAZ										
BOARD MEMBER		х						0	0	0_
(4) TODD MCDANIEL										
BOARD MEMBER		х						0	0	0_
(5) RON TUCKER										
BOARD MEMBER		х						0	0	0_
(6) DICK STEWART										
BOARD MEMBER		х						0	0	0_
(7) LINDA ROPER										
BOARD MEMBER		х						0	0	0_
(8) CHRIS JOHNSON										
BOARD MEMBER		х						0	0	0
(9) FRANK LESESNE										
BOARD MEMBER		х						0	0	0_
(10)FREDDIE MCKNIGHT										
BOARD MEMBER		х						0	0	0_
(11)NANCY_PLANK										
BOARD MEMBER		х						0	0	0_
(12)SCOTT LEE										
VICE CHAIR		х		х				0	0	0_
(13)CHRISTIAN KATA										
CHAIR		х		х				0	0	0_
(14)GRETA_SANDBERG	L									
TREASURER		х		х				0	0	

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			(C) Position (do not check more than one box, unless person is both ar officer and a director/trustee) ek					n	(D) Reportable compensation from the	(E) Reportal compensa from rela	ation ted	(F) Estimated amount of other compensation		
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organization 1099-MK 1099-NE	sc/	orgar	om the iization a organiza	
<u>(15)</u>														
<u>(16)</u>														
<u>(17)</u>														
<u>(18)</u>														
<u>(19)</u>														
<u>(20)</u>														
<u>(21)</u>														
<u>(22)</u>														
<u>(23)</u>														
<u>(24)</u>														
<u>(25)</u>														
С	Subtotal	ion A .						-	128,095		0			0
2	Total number of individuals (including but not limited reportable compensation from the organization													1
3	Did the organization list any <b>former</b> officer, director employee on line 1a? <i>If "Yes," complete Schedule</i> . For any individual listed on line 1a, is the sum of rep	J for such ind	dividua	I								3	Yes	No X
	organization and related organizations greater than individual											4		x
	Did any person listed on line 1a receive or accrue c for services rendered to the organization? <i>If</i> "Yes,"	•		•			•		n or individual			5		x
	on B. Independent Contractors	La Diaglacia de La Carte		4		1 4 .								
	Complete this table for your five highest compensate compensation from the organization. Report compensation.										ar.			
	(A) (B)  Name and business address Description of services									es		(C) Compens	ation	
	Total number of independent contractors (including received more than \$100,000 of compensation from			ose li	isted	abo	ove) wh	10					_	

		Check if Schedule O cor	ntains	s a response	or not	e to any line in this F	Part VIII			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
s ts	b	Membership dues			1b					
ra i	С	Fundraising events			1c					
s, G	d	Related organizations .			1d					
arA	е	Government grants (contri	butior	ns)	1e	1,263,833				
S, E	f	All other contributions, gifts	s, gra	ints,						
utio er S		and similar amounts not in	clude	ed above	1f	104,019				
	g	Noncash contributions incl	luded	in						
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f			1g	\$				
	h	Total. Add lines 1a-1f					1,367,852			
						Business Code				
9	2a									
<u>e</u> <u>Z</u>	b									
enc	С									
gram Ser Revenue	d									
Program Service Revenue	e	All (1								
Δ.		All other program service re								
		Total. Add lines 2a-2f								
	3	Investment income (includir other similar amounts)	-			nd 				
	4	Income from investment of the								
	5	Royalties								
		Noyanico I I I I I I I		(i) Real		(ii) Personal				
	6a	Gross rents	6a	(1) 1 (04)		(ii) i disorial				
		Less: rental expenses	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss)								
		Gross amount from		(i) Securitie	es	(ii) Other				
		sales of assets								
		other than inventory	7a							
	b	Less: cost or other basis								
Jue		and sales expenses	7b							
evenue	С	Gain or (loss)	7с							
Ä	l .	Net gain or (loss)								
Other R	8a	Gross income from fundrais	sing							
Ö		events (not including \$								
		of contributions reported on								
		1c). See Part IV, line 18			8a					
	l .	Less: direct expenses  Net income or (loss) from fu			8b					
	l .	Gross income from gaming		ising events	·					
	Ja	activities, See Part IV, line 1			9a					
	h	Less: direct expenses •			9b					
		Net income or (loss) from g								
		Gross sales of inventory, les		<b>5</b>						
	·va	returns and allowances			10a					
	b	Less: cost of goods sold			10b					
	l .	Net income or (loss) from sa								
		·				Business Code				
sn (	11a									
anc	b									
eve	С									
Miscellanous Revenue	d	All other revenue								
		Total. Add lines 11a-11d								
	12	Total revenue. See instruc	tions				1,367,852	0	0	128
ΞEA										Form <b>990</b> (

#### 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).

Dc :	crieck if Scriedule O contains a response of flote to an	(A)	(B)	(C)	(D)
	ot include amounts reported on lines 6b, 7b,	Total expenses	Program service	Management and	Fundraising
80, 9	bb, and 10b of Part VIII.  Grants and other assistance to domestic organizations		expenses	general expenses	expenses
1	_				
2	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16		+		
4	Benefits paid to or for members		-		
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	377,923	340,131	37,792	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	52,038	46,835	5,203	
10	Payroll taxes	28,229	25,407	2,822	
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
С.	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	108,285	108,285		
12	Advertising and promotion	491,225	491,225		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	46,509	46,509		
17	Travel	75,353	75,353		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,087	2,087		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	SUPPLIES	9,725	9,725		
b	POSTAGE	3,511	3,511		
С	PRINTING	2,249	2,249		
d	DUES AND SUBSCRIPTIONS	13,744	13,744		
е	All other expenses	40,422	40,422		
25	Total functional expenses. Add lines 1 through 24e	1,251,300	1,205,483	45,817	0_
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Form **990** 

EEA

Part X **Balance Sheet** 

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

			(A)		(B)
	1		Beginning of year		End of year
	1	Cash - non-interest-bearing	789,385	1	486,006
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	274 766
		·	. 153,000	7	274,766
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	-	5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	. 5,948	8	3,443
SS			5,948	9	3,443
⋖	9		•	9	
	10a	Land, buildings, and equipment: cost or other			
			137		
	b	Less: accumulated depreciation	137	10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	764,215
	17	Accounts payable and accrued expenses	- 68,964	17	104,954
	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	
w	22	Loans and other payables to any current or former officer, director,			
Liabilities	22				
ij		trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>.e</u>		controlled entity or family member of any of these persons	•	22	
_	23	Secured mortgages and notes payable to unrelated third parties	-	23	
	24	Unsecured notes and loans payable to unrelated third parties	-	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	. 399,604	25	61,555
	26	Total liabilities. Add lines 17 through 25		26	
	26		468,568	20	166,509
S		Organizations that follow FASB ASC 958, check here			
9		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	479,765	27	597,706
Ва	28	Net assets with donor restrictions	. •	28	
Þ		Organizations that do not follow FASB ASC 958, check here			
Ξ		and complete lines 29 through 33.			
or l	29	Capital stock or trust principal, or current funds		29	
ts			-		
Se	30	Paid-in or capital surplus, or land, building, or equipment fund	•	30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	•	31	
ěŧ	32	Total net assets or fund balances	479,765	32	597,706
	33	Total liabilities and net assets/fund balances	. 948,333	33	764,215
					Form 000 (2022)

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Form	990 (2022) GREATER BEAUFORT PORT ROYAL CONVENT 5	7-080	1740	1+	em 8.		
Par	t XI Reconciliation of Net Assets				em o.		
	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,	367,	852		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	251,	300		
3	Revenue less expenses. Subtract line 2 from line 1	3		116,	552		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		479,	765		
5	Net unrealized gains (losses) on investments	5					
6 Donated services and use of facilities							
7	Investment expenses	7					
8	Prior period adjustments	8		1,	389		
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	32, column (B))	10		597,	706		
Par	t XII Financial Statements and Reporting				_		
	Check if Schedule O contains a response or note to any line in this Part XII				_Ц_		
				Yes	No		
1	Accounting method used to prepare the Form 990: X Cash Cash Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on						
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х		
	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:						
	X Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		- 2b	Х			
	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:						
	X Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
С	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?		. 2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on						
_	Schedule O.						
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a		_ X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		- 3b				

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Form **990** (2022)

#### **SCHEDULE A** (Form 990)

## **Public Charity Status and Public Support**

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

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name	e of the organization Employer identification number										
GREA	TE	R BEAUFORT PORT ROYAL C	ONVENT				57-0801740				
Par	Ι.	Reason for Public Cha	rity Status. (Al	l organizations mus	t comple	ete this p	art.) See instruction	ns.			
The o	gar	ization is not a private foundation bec	ause it is: (For lines	1 through 12, check only	one box.)						
1		A church, convention of churches, o	r association of chu	rches described in <b>section</b>	on 170(b)(	1)(A)(i).					
2		A school described in section 170(b	o)(1)(A)(ii). (Attach	Schedule E (Form 990).)							
3		A hospital or a cooperative hospital s	ervice organization	described in section 170	)(b)(1)(A)(i	ii).					
4		A medical research organization ope	rated in conjunction	with a hospital described	d in <b>sectio</b> i	n 170(b)(1	)(A)(iii). Enter the				
		hospital's name, city, and state:									
5		An organization operated for the ben	efit of a college or u	niversity owned or operate	ed by a gov	ernmental	unit described in				
		section 170(b)(1)(A)(iv). (Complete	e Part II.)								
6		A federal, state, or local government	or governmental un	it described in section 1	70(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)(v	<b>ri).</b> (Complete Part I	l.)							
8		A community trust described in sect	ion 170(b)(1)(A)(v	i). (Complete Part II.)							
9		An agricultural research organization	described in <b>secti</b>	on 170(b)(1)(A)(ix) opera	ated in conj	junction wi	th a land-grant college				
		or university or a non-land-grant colle	ege of agriculture (s	ee instructions). Enter the	e name, city	, and state	of the college or				
	_	university:									
10	Ш	An organization that normally receive receipts from activities related to its esupport from gross investment inconacquired by the organization after Ju	exempt functions, su ne and unrelated bu	ubject to certain exception siness taxable income (le	ns; and (2) i ss section	no more tha 511 tax) fro	an 33 1/3% of its				
11		An organization organized and opera	ted exclusively to te	est for public safety. See s	section 50	9(a)(4).					
12		An organization organized and opera	ted exclusively for t	he benefit of, to perform t	he function	s of, or to o	carry out the purposes of	f			
		one or more publicly supported orga	nizations described	in section 509(a)(1) or s	section 50	<b>9(a)(2)</b> . Se	ee section 509(a)(3). Cl	heck			
		the box on lines 12a through 12d tha	t describes the type	of supporting organizatio	n and com	plete lines	12e, 12f, and 12g.				
а		Type I. A supporting organization	n operated, supervi	sed, or controlled by its s	upported o	rganization	(s), typically by giving				
		the supported organization(s) the	e power to regularly	appoint or elect a majority	y of the dire	ectors or tru	istees of the				
		supporting organization. You m	ust complete Part	IV, Sections A and B.							
b		Type II. A supporting organization	on supervised or co	ntrolled in connection with	its suppor	ted organiz	zation(s), by having				
		control or management of the su	pporting organization	on vested in the same per	sons that c	ontrol or m	anage the supported				
		organization(s). You must com	plete Part IV, Sect	ions A and C.							
С		Type III functionally integrate		•							
		its supported organization(s) (se	,	•	•						
d		☐ Type III non-functionally integ						)			
		that is not functionally integrated	-			•	and an attentiveness				
		requirement (see instructions).	-								
е		Check this box if the organizatio				a Type I, T	ype II, Type III				
		functionally integrated, or Type I	•	itegrated supporting organ	nization.						
f		nter the number of supported organiz						• • •			
g		rovide the following information about		( )							
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the or listed in you docum	r governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
(A)											
( <u>^</u> )											
(B)											
(C)											
(D)											
(E)											
Total											

57-0801740

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.)

	i ait iii. Ii tiic organization falls t	quality unde	i the tests his	ica below, pi	case comple	c i ait iii.	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	932,093	935,136	995,117	1,153,734	1,263,833	5,279,913
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	932,093	935,136	995,117	1,153,734	1,263,833	5,279,913
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)						3,602,252
6	Public support. Subtract line 5 from line 4 .						1,677,661
	on B. Total Support	( ) 0040	" > 0040		1 11 2004	( ) 0000	
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	932,093	935,136	995,117	1,153,734	1,263,833	5,279,913
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
•	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
40	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						F 050 010
12	Gross receipts from related activities, etc.	(soo instruction	nc)			12	5,279,913
13	First 5 years. If the Form 990 is for the o	,	,				(0)(3)
13	organization, check this box and <b>stop her</b>	•			•		, , ,
Secti	on C. Computation of Public Suppo	rt Percentag	<u> </u>				
14	Public support percentage for 2022 (line 6			11 column (f)	)	14	31.77 %
15	Public support percentage from 2021 Sch		•			15	7.40 %
16a	33 1/3% support test - 2022. If the organ						
	box and <b>stop here.</b> The organization qua						
b	33 1/3% support test - 2021. If the organ						
	this box and <b>stop here</b> . The organization				•		•
17a	10%-facts-and-circumstances test - 202	-		-			_
	10% or more, and if the organization mee	_					
	Part VI how the organization meets the fa						
	organization						
b	10%-facts-and-circumstances test - 202						
	15 is 10% or more, and if the organization	•			•		
	in Part VI how the organization meets the					=	•
	organization			•	•		• •
18	Private foundation. If the organization di						
	instructions						x

EEA Schedule A (Form 990) 2022 Schedule A (Form 990) 2022

GREATER BEAUFORT PORT ROYAL CONVENT

57-0801740

Part III	Support Schedule for Organizations Described in Section 509(a	<u>(2)</u>

(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.)

Secti	on A. Public Support			•	-	•	
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the o	rganization's f	irst, second, th	ird, fourth, or t	fifth tax year as	a section 501	(c)(3)
	organization, check this box and stop her	re					`.` <sub>П</sub>
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2022 (line 8	3, column (f), o	divided by line	13, column (f)	)	15	%
16	Public support percentage from 2021 Sch	. , ,	•	. ,	´	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2022 (			by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2021			•		18	%
19a	33 1/3% support tests - 2022. If the orga					- 1	
	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests - 2021. If the organization	-	-	· ·	-	• • • •	J
~	line 18 is not more than 33 1/3%, check this box						
20	<b>Private foundation.</b> If the organization d	-	•		•	•	ctions

57-0801740

#### Item 8.

#### Part IV **Supporting Organizations**

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

### S

ecti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
•	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in <b>Part VI.</b></i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
•	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990)</i> .	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line	•		
•	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
Ja	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	Ja		
IJ	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
^	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	30		
С		0.0		
10~	from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i> Was the organization subject to the excess business haldings rules of section 4943 because of section	9с		
I0a	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			

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

10b Schedule A (Form 990) 2022

10a

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

	EA (Form 990) 2022 GREATER BEAUFORT PORT ROYAL CONVENT 57-0801740			
Part I	V Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	11a		
	11c below, the governing body of a supported organization?  A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
С	provide detail in <b>Part VI</b> .	11c		
Section	on B. Type I Supporting Organizations	110		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
	Mana a madanta akka annanda kianta dimakana ankanaka. 12. 00. 10. 10. 10. 10. 10. 10. 10. 10. 10		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 <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	4		
Section	the supported organization(s). on D. All Type III Supporting Organizations	1		
Secur	DI B. 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		163	140
-	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	on 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	inst	ructio	ons).
a	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	١		
с 2	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions Activities Test. <b>Answer lines 2a and 2b below.</b>	).	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
u	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	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.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		ſ	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		136

Schedule A	(Form	990)	2022

Part V

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

		Item 8.
GREATER BEAUFORT PORT ROYAL CONVENT	57-0801740	

1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	-		•
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1_	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally i	ntegrated Type III suppo	rting organization
	(see instructions).			

Schedule A (Form 990) 2022 EEA

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

Sect	ion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported		
	organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required) - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive		
	(provide details in Part VI). See instructions.	8	
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

10	Line 8 amount divided by line 9 amount		10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI</b> . See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

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

# Schedule B (Form 990)

### **Schedule of Contributors**

OMB No. 154

Item 8.

Department of the Treasury

Attach to Form 990 or Form 990-PF.

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

Internal Revenue Service | Set to WWW.ins.goV/i offine latest information.

Name of the organization | Employer identification number |
GREATER BEAUFORT PORT ROYAL CONVENT | 57-0801740

Organiz	ation type (check one):	
Filers of	:	Section:
Form 990	0 or 990-EZ	▼ 501(c)( 3 ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 990	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
Check if	your organization is covere	d by the <b>General Rule</b> or a <b>Special Rule</b> .
Note: Or instruction		or (10) organization can check boxes for both the General Rule and a Special Rule. See
General	Rule	
X	· ·	Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 erty) from any one contributor. Complete Parts I and II. See instructions for determining a tions.
Special	Rules	
	regulations under sections 16b, and that received from	bed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or many one contributor, during the year, total contributions of the greater of (1) \$5,000; or ) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
	contributor, during the year literary, or educational purp	bed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one r, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, poses, or for the prevention of cruelty to children or animals. Complete Parts I (entering d of the contributor name and address), II, and III.
	contributor, during the year contributions totaled more during the year for an exc. General Rule applies to the	bed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one or, contributions exclusively for religious, charitable, etc., purposes, but no such than \$1,000. If this box is checked, enter here the total contributions that were received fusively religious, charitable, etc., purpose. Don't complete any of the parts unless the one organization because it received nonexclusively religious, charitable, etc., contributions fring the year \$\frac{1}{2} \frac{1}{2} \frac
must a	nswer "No" on Part IV, line	covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

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Name of organization 57-0801740 GREATER BEAUFORT PORT ROYAL CONVENT

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	CITY OF BEAUFORT, SOUTH CAROLINA  BOUNDARY STREET  BEAUFORT SC 29902	\$600, <b>4</b> 73	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2_	BEAUFORT COUNTY, SOUTH CAROLINA RIBUAT ROAD BEAUFORT SC 29902	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_3_	SC PARKS RECREATION AND TOURISM  1205 PENDLETON ST  COLUMBIA SC 29201	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

EEA Schedule B (Form 990)

### SCHEDULE D (Form 990)

## **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.

Open to Public

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	f the orga	nization			Employer identification number
GREA'	CER BE	AUFORT PORT ROYAL CONVENT			57-0801740
Pa	rt I	Organizations Maintaining Donor Advised	Funds or Other Sim	ilar Funds or A	ccounts.
	(	Complete if the organization answered "Yes" o	on Form 990, Part IV,	line 6.	
			(a) Donor advi	sed funds	(b) Funds and other accounts
1	Total nu	mber at end of year			
2	Aggrega	ate value of contributions to (during year)			
3	Aggrega	ate value of grants from (during year)			
4	Aggrega	ate value at end of year			
5		organization inform all donors and donor advisors in w	riting that the assets held	in donor advised	
	funds a	re the organization's property, subject to the organization	on's exclusive legal contro	ıl?	Yes No
6		organization inform all grantees, donors, and donor ad	-		
		charitable purposes and not for the benefit of the dono			
	-	ng impermissible private benefit?			
Par		Conservation Easements.			
		Complete if the organization answered "Yes" o	on Form 990. Part IV.	line 7.	
1		e(s) of conservation easements held by the organization			
•	_	ervation of land for public use (for example, recreation	_	Preservation of a h	nistorically important land area
	_	ection of natural habitat			certified historic structure
	=	ervation of open space	L	_ 1 103CI VALIOIT OF A C	ser tilled filstofie structure
2	_	' '	d concentation contributi	on in the form of a co	one on votion
2	•	te lines 2a through 2d if the organization held a qualifie	ed conservation continuati		
_		nt on the last day of the tax year.			Held at the End of the Tax Year
a		mber of conservation easements			2a
b		,			2b
C		of conservation easements on a certified historic structure.			2c
d		of conservation easements included in (c) acquired at	•		
_		structure listed in the National Register			
3	Number	of conservation easements modified, transferred, rele	ased, extinguished, or te	minated by the orga	nization during the
	tax year				
4		of states where property subject to conservation ease			
5		e organization have a written policy regarding the perio	• .	n, handling of	
		s, and enforcement of the conservation easements it h			
6	Staff an	d volunteer hours devoted to monitoring, inspecting, ha	andling of violations, and	enforcing conservation	on easements during the year
7	Amount	of expenses incurred in monitoring, inspecting, handli	ng of violations, and enfo	rcing conservation e	asements during the year
8	Does ea	ach conservation easement reported on line 2(d) above	satisfy the requirements	of section 170(h)(4)	
	and sec	tion 170(h)(4)(B)(ii)?			
9	In Part 2	KIII, describe how the organization reports conservation	n easements in its revenບ	e and expense state	ement and
	balance	sheet, and include, if applicable, the text of the footnot	te to the organization's fin	ancial statements th	at describes the
		ation's accounting for conservation easements.			
Par	t III	Organizations Maintaining Collections	of Art, Historical	Treasures, or C	Other Similar Assets.
		Complete if the organization answered "Yes" o	on Form 990, Part IV,	line 8.	
1a	If the or	ganization elected, as permitted under FASB ASC 958	, not to report in its reven	ue statement and ba	lance sheet works
	of art, h	istorical treasures, or other similar assets held for publ	ic exhibition, education, c	r research in further	ance of public
		provide in Part XIII the text of the footnote to its finance			
b	•	ganization elected, as permitted under FASB ASC 958			ce sheet works of
-		orical treasures, or other similar assets held for public	•		
		the following amounts relating to these items:			,
	•	venue included on Form 990, Part VIII, line 1			\$
		sets included in Form 990, Part X			
2					
2		ganization received or held works of art, historical treas		_	i, provide trie
_		g amounts required to be reported under FASB ASC 9			Φ.
a		e included on Form 990, Part VIII, line 1			
b	Assets	included in Form 990, Part X			\$

5	7-	กล	0	17	40	

Par	tili Organizations Maintaining	Collections of	Art, HIS	storicai	ıreasures	, or O	mer Similar <i>F</i>	Assets	s (cor	
3	Using the organization's acquisition, accession	n, and other records	, check an	y of the follo	owing that ma	ke signifi	cant use of its			
	collection items (check all that apply):			_						
а	Public exhibition		d	Loan or	r exchange pr	ogram				
b	Scholarly research		е	U Other						
С	Preservation for future generations									
4	Provide a description of the organization's coll XIII.	ections and explain l	now they fu	ırther the or	ganization's e	exempt p	urpose in Part			
5	During the year, did the organization solicit or	receive donations of	art historia	nal treasure	e or other sir	milar				
J	assets to be sold to raise funds rather than to							. г	Yes	□No
Par			it of the or	gariizatiorrs	CONCCUON:			· L	] 103	
	Complete if the organization 990, Part X, line 21.		on Forn	n 990, Pa	art IV, line	9, or re	eported an am	ount	on Foi	rm
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ry for conti	ributions or	other assets	not				
	included on Form 990, Part X?							[	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the follo	owing table	:						
							Aı	mount		
С	Beginning balance					. 1c	;			
d	Additions during the year					. 1d	I			
е	Distributions during the year					- 1e	)			
f	Ending balance					. 1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line 2	21, for esci	ow or custo	odial account	liability?			Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	olanation h	as been pro	vided on Part	XIII			<u></u>	
Par			_							
	Complete if the organization	answered "Yes"	on Forn	n 990, Pa	art IV, line	10.				
		(a) Current year	<b>(b)</b> Pr	ior year	(c) Two years	s back	(d) Three years back	(e)	) Four year	ars back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	nt year end balance	(line 1g, co	olumn (a)) h	eld as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment%									
С	Term endowment%									
	The percentages on lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posses	sion of the organizat	ion that are	held and a	dministered for	or the				
	organization by:								Ye	es No
	(i) Unrelated organizations								Ba(i)	
	(ii) Related organizations							. 3	a(ii)	
b	If "Yes" on line 3a(ii), are the related organizat	•							3b	
4	Describe in Part XIII the intended uses of the		ment fund	S.						
Par			_	000 B		44 0	F 000	<b>-</b>	:	40
	Complete if the organization									
	Description of property	(a) Cost or oth (investm		''	or other basis other)		Accumulated epreciation	(d)	) Book va	llue
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment		4,137				4,137			
е	Other									
Total.	Add lines 1a through 1e. (Column (d) must equ	ual Form 990, Part >	(, column (	B), line 10d	;.)					
FFA							Sc	hedule l	D (Form	990) 2022

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on F	orm 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
_ (E)		
_ (F)		
_ (G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes" on F	orm 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
_ (8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
Complete if the organization answered "Yes" on F	orm 990, Part IV, line	11d. See Form 990, Part X, line 15.
(a) Description		(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)FUNDS HELD FOR OTHERS	61,555
(3)	
_ (4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	61,555

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

(8)

Item 8.

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		4 065 054
1	Total revenue, gains, and other support per audited financial statements	1	1,367,851
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	_	
b	Donated services and use of facilities	_	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,367,851
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,367,851
Part		er Retu	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,251,298
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		,===,===
a	Donated services and use of facilities		
b	Prior year adjustments		
	Other losses	-	
C	Other (Describe in Part XIII.)	_	
d	Add lines 2a through 2d	-	
е	,	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	1,251,298
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	_	
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,251,298
Part	XIII Supplemental Information.		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	XIII Supplemental Information.		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298
<b>Part</b> Provide	Supplemental Information.  e 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		1,251,298

#### SCHEDULE O (Form 990)

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

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

OMB No. 154

202

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

GREATER BEAUFORT PORT ROYAL CONVENT 57-0801740 01. Form 990 governing body review (Part VI, line 11) A COPY OF THE 990 WAS PRESENTED TO THE GOVERNING BODY BEFORE IT WAS FILED. 02. Conflict of interest policy compliance (Part VI, line 12c) THE ORGANIZATION DOES HAVE A CONFLICT OF INTEREST POLICY 03. Governing documents, etc, available to public (Part VI, line 19) THE GOVERNING DOCUMENTS OF THE ORGANIZATION ARE OPEN TO THE PUBLIC.

## 2022 Filing Instructions GREATER BEAUFORT PORT ROYAL CONVENT Tax year ending 06-30-2023

#### Form filed:

Form 990 and supplemental forms and schedules

#### Filing method:

The return will be e-filed once the signed and dated Form 8879-TE has been received by this office. Do not mail the return to the IRS.

#### Due date:

11-15-2023

The return reflects neither a refund nor a balance due.

#### Please note:

The Taxpayer First Act requires tax-exempt organizations to electronically file all information returns in the 990 series and related forms for tax years beginning after July 1, 2019. Mailing these returns is no longer allowed.

#### **SCHEDULE O** (Form 990)

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

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

Item 8.

Department of the Treasury Internal Revenue Service Name of the organization

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

**Open to Public** Inspection

Employer identification number

GREATER BEAUFORT PORT ROYAL CONVENT 57-0801740 01. Form 990 governing body review (Part VI, line 11) A COPY OF THE 990 WAS PRESENTED TO THE GOVERNING BODY BEFORE IT WAS FILED. 02. Conflict of interest policy compliance (Part VI, line 12c) THE ORGANIZATION DOES HAVE A CONFLICT OF INTEREST POLICY 03. Governing documents, etc, available to public (Part VI, line 19) THE GOVERNING DOCUMENTS OF THE ORGANIZATION ARE OPEN TO THE PUBLIC. 04. List of other fees for services expenses (Part IX, line 11g) ACCOUNTING AND AUDIT 6,475 14,166 RESEARCH 15,569 WEBSITE WEBSITE PLUGINS 38,548 10,537 DESIGN PHOTOGRAPHY 22,735 FULFILLMENT SERVICES ACCOUNT SERVICES 25,492 TRANSITION SERVICES BRCOC 32,000 144 DOCUMENT SHREDDING

Please fill out and sign this portion of the form as appropriate indicating contact information, the amount you are requesting and that you have the authority to discuss the budget on behalf of your organization.

Any incomplete or untimely submissions will not be considered.

Beaufort County FY 2025 Outside Agency Funding Application									
Please return this appli attachments to:	cation with	Valerie Althoff, Budget Manager, by March 15, 2024 via email: Valerie.althoff@bcgov.net							
Amount of	Funding Requested	l for FY 2025	\$365,000						
and the information pro	ovided in this return is	s true and correct to the b							
Organization Name	Hilton Head Isla	nd-Bluffton Chamber	of Commerce						
Contact Name	Bill Miles								
Contact Phone	Contact Phone 843-785-3673								
Contact e-mail	bmiles@hiltonhe	eadisland.org							
Contact Fax	843-785-7110								

#### **Budget Narrative**

#### Mission/Scope of Services

The Hilton Head Island-Bluffton Chamber of Commerce has led Southern Beaufort County for over 25 years as their Designated Marketing Organization (DMO).

Our organization is driven by a mission to stimulate the regional economy while enhancing the quality of life for all.

Our organization's brand commitment to Southern Beaufort County is an extension of Hilton Head Island promoting Bluffton and Daufuskie Island. Bluffton and Daufuskie Island provide a unique experience that travelers are looking for from outdoor excursions, to arts and culture, culinary and so much more. The elements of the brand personality related to tranquility and driven by nature are strong and position Southern Beaufort County as a destination for our target audience.

Our organization leads all out-marketing efforts tied to tourism into Southern Beaufort County. Our efforts encompass, but are not limited to, managing the destination website, digital media (paid and organic), social media, public relations, meetings and groups, weddings and all research and analytics.

Our target demographic, based upon website and digital analytics, commissioned visitor profile study and economic impact report, define the visitor we are reaching.

#### **Demographics Overview:**

- 47.5% Men / 52.0% Women / 0.5% Self-identify
- \$150K-\$250K+ Household Income/Affluent Traveler
- 51.1% Undergraduate Degree or Higher
- 2 4 Trips Per Year
- 5 Nights Average Length of Stay

#### Age Distribution:

Ago Biotribution.			
Age	Hilton Head	Bluffton	Total
19 years old or younger	0.3%	0.3%	0.3%
20 to 24 years old	2.5%	6.0%	3.4%
25 to 29 years old	21.5%	17.9%	20.6%
30 to 34 years old	20.2%	22.8%	20.8%
35 to 39 years old	19.3%	14.0%	18.0%
40 to 44 years old	4.8%	7.0%	5.3%
45 to 49 years old	3.6%	5.2%	4.0%
50 to 54 years old	4.6%	5.4%	4.8%
55 to 59 years old	4.8%	5.4%	4.9%
60 to 64 years old	6.1%	5.7%	6.0%
65 to 69 years old	5.5%	4.1%	5.1%
70 years old and over	6.3%	6.0%	6.2%
Prefer not to say	0.5%	0.3%	0.5%

#### **Household Income Distribution:**

Household Income	Hilton Head	Bluffton	Total
Under \$24,999	1.1%	1.4%	1.1%
\$25,000 - \$34,999	1.8%	5.4%	2.7%
\$35,000 - \$49,999	6.5%	11.0%	7.7%
\$50,000 - \$74,999	17.1%	14.7%	16.5%
\$75,000 - \$99,999	17.0%	20.1%	17.8%
\$100,000 - \$149,999	17.0%	18.1%	17.3%
\$150,000 - \$199,999	18.0%	14.7%	17.2%
\$200,000 - \$249,999	15.9%	10.8%	14.6%
\$250,000 or more	5.6%	3.7%	5.1%

#### **Full Visitor Profile Report**

#### Organizations with Similar Services; Opportunities for Collaboration

The Hilton Head Island-Bluffton Chamber of Commerce holds the designation from Beaufort County as the Destination Marketing Organization (DMO) for Southern Beaufort County. We've held this designation for over 25 years.

Visit Beaufort, Port Royal, and the Sea Islands is our DMO counterpart for Northern Beaufort County.

The Beaufort County Black Chamber also represents tourism within Beaufort County with a mission to support African American businesses within the County.

Our out-marketing efforts are focused on the unique attributes and assets south of the Broad River in Southern Beaufort County. The current structure that is listed above is efficient and effective. We focus closely on Daufuskie Island, building brand awareness and demand for this remote barrier island. In addition, we support Bluffton, both incorporated and unincorporated, through their proximity to the May River, rich historical and cultural assets and ties to the Gullah Geechee Cultural Heritage Corridor, rich arts community and emerging culinary scene.

Our organizations are in constant contact, are aligned on the trends and metrics regarding our number one economy of tourism and partner where appropriate.

#### **Significant Recent Accomplishments**

#### FY 2023-2024

- Media partnership with Garden & Gun #1 that repurposed a previous campaign highlighting a weekend in Bluffton had over 865K impressions
- Media partnership with Garden & Gun #2 focused on the Roots & Rivers Festival and several local businesses and had a total audience reach across all platforms of over 1.89M.
- Continued promotion of VisitBluffton.org,
  - o Total Website Sessions YTD: 402.7K
  - o Partner Referrals YTD: 81.2K

\*Due to the changeover from UA to GA4 reporting, we do not have a year-over-year comparison until July 2024. Year-over-year reporting will be available in next year's report.

- Over the last few years with Bluffton's designated social media pages launch, we welcomed 35,313 Facebook followers and 10,190 Instagram followers. These followers represent people who are seeing Bluffton content every day. Seeing Bluffton's culture, history, events, local business, and more. Bringing overall brand awareness and increasing Bluffton's exposure to necessary target markets to ensure our local economy thrives.
- Expansion of air service and air carriers at both airports serving the region.
- Continued partnership with the College of Charleston, Office of Tourism Analysis for the Beaufort County and Bluffton Economic Impact Reports and Visitor Profile Study.

#### FY 2022-2023

- Media partnership with Garden & Gun on a robust digital program that reached an estimated audience of 2.3M+ across all platforms.
- Media partnership with The Local Palate including native content, social content and print advertising driving users to a dedicated Bluffton hub city guide on The Local Palate website.
- Continued promotion of VisitBluffton.org,
  - Total Website Sessions YTD: 165.7K (+18.1%)
  - o Partner Referrals YTD: 35.3K (+15.8%)
- Launched Bluffton TikTok account, Explore BlufftonSC.
- Expansion of air service and air carriers at both airports serving the region.
- Continued partnership with the College of Charleston, Office of Tourism Analysis for the Beaufort County and Bluffton Economic Impact Reports and Visitor Profile Study.

#### FY 2021-2022

- Collaboration with Garden & Gun and influencer Venita Aspen on a digital campaign that reached an estimated audience of 5.2M+ across all platforms.
- Continued promotion of VisitBluffton.org,
  - o Total Website Sessions: 188.1K
  - o Partner Referrals: 44.2K
- Content capture and deployment of the Explore Bluffton Video series.
- Expansion of air service and air carriers at both airports serving the region.
- Commissioned and partnered with the College of Charleston, Office of Tourism Analysis on producing the first annual Bluffton Economic Impact Study and Visitor Profile Study.

#### FY 2020-2021

Lead the country and other tourism organizations in the reopening process.

- O Developed and implemented the Path Forward Readiness Plan, a uniform set of recommended protocols for businesses to follow, provided a consistent and evidence-based approach to protecting the health of our residents, workforce and visitors. Over 150 business owners, residents and community members and government officials gave their input and over 300 businesses took the Pledge to adhere to the recommended guidelines. The Path Forward story was picked up by 140 different media outlets and adopted nationally by the Vacation Rental Management Association, VRMA.
- Integrated Zoom technology for the organization to be able to adapt and continue operating seamlessly.
- Developed the weekly Tele-Town Hall series to deliver relevant and up to date information to listeners and provide insight from key thought leaders throughout 2020 and into 2021.
- Launched VisitBluffton.org as an independent website, delivering high-quality referrals to partners and an increasingly powerful social presence.
- Launched the Official Vacation Planner for the destination.
- Expanded air-service and air-carriers at both airports serving the region.
- Commissioned and partnered with the College of Charleston, Office of Tourism Analysis on the execution of the Beaufort County Economic Impact Report.

#### **Service Delivery Goals and Objectives**

The Hilton Head Island-Bluffton Chamber of Commerce will focus this fiscal year's out-marketing efforts on the below pillars. These areas of focus were determined by website analytics and travel and tourism trends.

- Gullah Geechee Cultural Heritage Corridor
- History, Culture and Arts
- National Historic Register Designations
- Natural beauty, Waterways, Parks
- Local Culinary and Local Market experiences
- Festival and Events

#### 2024-2025 Goals, Strategies & Tactics

**Goal:** The overarching goal of the marketing plan is to drive qualified visitation to the destination through a series of demand creation and demand capture activations.

#### Strategies:

- 1. Build brand awareness and support qualified visitation to the destination among target out markets.
- 2. Drive the discovery and exploration of the destinations with deeper storytelling of the destination's key attributes.

- 3. Leverage a strategic mix of targeted methods to identify and reach the most qualified users.
- 4. Create an understanding of, and respect for, the delicate ecosystem of the destinations.
- 5. Enhance Leisure and Group business through qualified visitation that aligns with the demographics and target audience we are reaching.

#### Tactics:

- 1. Paid and organic social media strategy across all platforms with creation of new assets and content for videos/ reels/stories, and sourcing of user-generated content (UGC).
- 2. Email marketing, display remarketing advertising, search engine marketing, search engine optimization and digital media.
- 3. Development and production of the Official Bluffton Vacation Planner.
- 4. Traditional ad placements in print and digital with partners, as an example, Garden
- & Gun and Southern Living.
- 5. Strategically target audiences according to the demographic and persona profiles specific to Bluffton through paid, owned, and organic efforts.
- 6. Develop additional content (blogs, social posts, videos), designed to tell stories about the destination, its history, culture and beautiful scenic touch points, such as the May River, historical locations and parks, in engaging and informative ways and include tips and itineraries to guide visitors through the destination for deeper experiences.
- 7. Public relations efforts with media outreach.

#### **Justification for Increased Funding**

The Hilton Head Island-Bluffton Chamber of Commerce is not seeking increased funding with this request. This funding request by the Hilton Head Island-Bluffton Chamber of Commerce, the designated Destination Marketing Organization for Southern Beaufort County, is for the recurring 15% of the 2% of the State Accommodation Tax as well as the local accommodations tax allocation of \$150K.

#### Impact and Contingent Strategy if Funding is Denied or Reduced

The defunding of tourism efforts into Southern Beaufort County directly impacts businesses and business owners, the overall health and vitality of the Southern Beaufort County community and the great amenities they enjoy due to tourism dollars and the County will see a decrease in bed tax collections.

When tourism is defunded the impact is felt across all industries and touchpoints of a community. The trickle down effect takes years to recover from, if the destination recovers at all. Once you have removed or minimized your destination from a promotional space it is quickly filled with other destinations vying for the same demographic/ consumer.

Tourism employs 44,763 people or 36.7% of all jobs within Beaufort County and generates \$3.98 billion in economic impact for Beaufort County. In defunding tourism you are defunding the county's number one economy and impacting the quality of life for all.

Attached please reference the past two years of Economic Impact reports for Beaufort County and Town of Bluffton. These reports are commissioned by the Hilton Head Island-Bluffton Chamber of Commerce and executed and produced by the College of Charleston, School of Business, Office of Tourism Analysis.

<u>2023 Estimated Total Impact of Tourism on Beaufort County</u> 2022 Estimated Total Impact of Tourism on Beaufort County

2023 Estimated Total Impact of Tourism in Bluffton on Beaufort County 2022 Estimated Total Impact of Tourism in Bluffton on Beaufort County

#### **Significant Service Outputs, Outcomes and Measures**

- 1. Website:
  - o Total Website Sessions YTD: 402.7K
  - o Partner Referrals YTD: 81.2K
- 2. Social:
  - Total Followers: 48.4 (+20.4%)
  - Impressions: 10.4M (-11%)
  - Engagement Rate: 3.9% (industry avg 2.9%)
- 3. \$3.98 billion economic impact of tourism on Beaufort County in 2023
- 4. 3.94 million visitors in Beaufort County in 2023
- 5. 44,763 jobs generated from tourism in Beaufort County (36.7% of all jobs in

**Beaufort County)** 



Beaufort County FY 2025 Outside Agency Funding Application								
Please return this a attachments to:	pplication with	Valerie Althoff, Budget Manager, by March 15, 2024 via email: Valerie.althoff@bcgov.net						
Amount of F	unding Requeste	d for FY 2025	\$ Multi-year commitment					
County, and the infor	I declare that I am authorized on behalf of this agency to submit this budget request to Beaufort County, and the information provided in this return is true and correct to the best of my knowledge.  Authorized Signature and Date:							
Organization Name	Technical College	e of the Lowcountry						
Contact Name	Nancy Weber							
Contact Phone	Contact Phone 843-525-8226							
Contact e-mail nweber@tcl.edu								
Contact Fax	NA							

#### Required Information and Documents

1. A copy of your organization's two most recent audited financial statements or reports.

The Technical College of the Lowcountry is required to make publicly available all audits and financial statements. These can be found on the college's financial transparency webpage: <a href="https://www.tcl.edu/about-tcl/consumer-information/transparency/">https://www.tcl.edu/about-tcl/consumer-information/transparency/</a>

2. A copy of your organization's two most current revenue and expenditure budgets.

See Exhibit A.

3. Salary disclosure of all personnel serving the organization by position only (not by name of employee).

See Exhibit B.

#### **Budget Narrative**

#### **Mission/Scope of Services**

The Technical College of the Lowcountry provides accessible, high-quality academic education and workforce training to serve the needs of individuals, businesses and industries in Beaufort, Colleton, Hampton and Jasper counties. The college is the largest institution of higher education and workforce training in the area.

#### Organizations with Similar Services; Opportunities for Collaboration

The Technical College of the Lowcountry is uniquely focused on serving traditional college students as well as working learners. The college provides education and training to advance local workforce development – meeting student needs for higher income and career advancement and simultaneously strengthening the area's economies.

#### **Significant Recent Accomplishments**

#### In FY2023:

- 1. TCL and Beaufort County School District (BCSD) announced the Tides High School Dual Enrollment Program (Tides is the college's mascot). Beginning Fall 2024 the program provides eligible high school students beginning in the 9<sup>th</sup> grade a full-time dual enrollment option delivered on site at both the college's New River Campus and Beaufort Mather Campus. While in high school BCSD Tides cohorts can earn two associate degrees and a technical certificate from TCL in a variety of college and career pathways.
- 2. College completed renovations on the historic Moor Hall on its Beaufort Mather Campus and launched the HUB a one stop enrollment center housing admissions, advising, financial aid, testing and more.
- 3. TCL was the first college in the SC Technical College System to earn the silver-grade academic award as part of its Military Academic Recognition Program.
- 4. The college's Cybersecurity Program earned the National Security Agency's Centers of Academic Excellence in Cybersecurity designation.
- 5. After a months-long, community-wide selection process, TCL announced "Tides" as its official mascot.
- College received \$10MM from the State of South Carolina to support the construction
  of the Arthur E. Brown Regional Workforce Training Center. Total estimated cost of
  construction for the Center is \$20MM.

#### Service Delivery Goals and Objectives

The college has four key objectives: (1) increase student enrollment; (2) increase student retention; (3) increase student completion (graduation); and (4) increase student placement.

#### In FY2023:

- 1. Fall over fall enrollment increased by 7%.
- 2. Retention increased by 3%.
- 3. Student completion increased by 19%
- 4. Student placement rate increased from 94% to 96%.

#### **Justification for Increased Funding**

The college is requesting a funding commitment of \$7.5MM to be distributed over multiple years. The County's commitment along with \$10MM from the State of SC and \$2.5MM from the College will support the cost of construction for the workforce training center. If funded, analysis indicates that the Arthur E Brown Regional Workforce Training Center will add 102 new workers to the area annually with long run annual impacts of \$4.4MM. College-wide it is

estimated that TCL's annual economic impact is more than \$155MM. For every dollar invested in TCL, taxpayers gain \$3.30 in added tax revenue.

See Exhibit C.

#### Impact and Contingent Strategy if Funding is Denied or Reduced

The community will be unable to build the Regional Workforce Training Center. This will negatively impact the area's economic growth.

#### Significant Service Outputs, Outcomes and Measures

Arthur E. Brown Regional Workforce Training Center impacts:

- 1. Enables the college to serve an additional 850 students.
- 2. An estimated 12% will be from outside of the Lowcountry (added workforce).
- 3. Enables the college to offer new programs in high demand workforce sectors such as Computer Technology, Business, Logistics and Advance Manufacturing.
- 4. Strengthens the area's economy by supporting business retention, expansion and new business development.
- **5.** Generates annual economic impact of \$4 million. This figure is expected to rise in tandem with enrollment growth and graduates.

#### List of exhibits:

- A. Current Revenue & Expenditure Budgets
- B. Salary disclosure of all personnel serving the organization by position only Beaufort County
- C. Official letter of request: \$7.5 million commitment
- D. Budget meeting presentation PowerPoint.



April 09, 2024

Beaufort County Council

Beaufort County Government Center

100 Ribaut Road

Beaufort, SC 29902

SUBJECT: Request for \$7.5 million commitment for the construction of the Arthur E. Brown

Regional Workforce Training Center

Dear Members of Beaufort County Council,

The Technical College of the Lowcountry respectfully requests Beaufort County's financial support for the construction of the Arthur E. Brown Regional Workforce Training Center. We request a commitment of \$7.5 million by June 30, 2024. The allocation of funds may be spread across several years.

The projected construction budget for the facility is \$20 million. Our goal is to secure the total amount by June 30. Achieving this objective will allow us to begin work on the Center. South Carolina has allocated \$10 million to this workforce project, and the College has allocated \$2.5 million from its resources. The County's commitment is the final piece needed to initiate construction.

The Regional Workforce Training Center will meet student training and career advancement needs and simultaneously strengthen our local economy. The 50,000 sq ft Center is designed to serve as a hub for comprehensive training programs, offering a diverse range of skills development opportunities across various industries, including but not limited to manufacturing, computer technology and business.

The Workforce Center's impacts are measurable:

• The expansion empowers the college to offer new programs in supply chain/logistics, robotics, composite materials, and advanced manufacturing and enhance current high-demand offerings in areas like cybersecurity and business.



- The increased capacity will provide educational opportunities to an additional 850 students annually. Analysis suggests that 12% of these students will likely come from beyond the Lowcountry region, allowing the local area to expand its workforce.
- The County's investment will yield quantifiable returns. The Center is projected to generate an annual economic impact of \$4.4 million, which is expected to rise in tandem with the growth in student enrollment and the number of graduates.

We sincerely appreciate your consideration of our request and are grateful for your ongoing trust in our College. It is only together that we can build stronger communities and an ever-better community college.

Sincerely,

Dr. Richard J. Gough, President

Please fill out and sign this portion of the form as appropriate indicating contact information, the amount you are requestions and that you have the authority to discuss the budget on behalf of your organization.

Any incomplete or untimely submissions will not be considered.

Beaufort County FY 2025 Outside Agency Funding Application								
Please return this with attachments		Valerie Althoff, Budget Manager, by March 15, 2024 via email: Valerie.althoff@bcgov.net						
Amount of F	Amount of Funding Requested for FY 2025 \$50,000							
Beaufort County, a of my knowledge.	and the information	0 ,	submit this budget request to n is true and correct to the best					
Organization Name	Community Fou	ndation of the Low Co	ountry and SCNRI					
Contact Name	Contact Name Robert Elliott							
Contact Phone	989-430-4436							
Contact e-mail	Ellbob4901@gm	nail.com						
Contact Fax N.A.								

#### Executive Summary

The South Carolina Nurse Retention Initiative (SCNRI) was created in 2021 to address the severe nurse shortage which existed and had worsened with the pandemic.

SCNRI operates an incentive program under the Community Foundation of the Low Country to assist nurses with expenses, further education and housing in order to incentivize them to come and remain in the local area to live and work after receiving training.

Adding Nurses to the workforce has a positive impact on the availability and quality of Health care.

Beaufort County provided \$50,000 of funding in 2023 for nurse workforce development with further funding consideration contingent on demonstrating success and impact.

The Initiative HAS demonstrated that it is able to attract and retain nurses and contribute to the improvement in the availability and quality of health care in Beaufort County.

Nurse Workforce development supports the Counties vision of having World class Health care facilities that meet the needs of current and future populations.

Item 8.

19 health care providers in Beaufort County including Hospitals, Hospice , Home Care , Rehab centers , schools and our Naval base currently have job openings for nurses.

The need for nurses will continue to grow with the expansion of Health Care facilities.

SCNRI is requesting \$150,000 over the next three years to continue its mission and to add 20-25 nurses per year to the program.

#### **Budget Narrative**

#### Mission/Scope of Services

The South Carolina Nurse Retention Initiative (SCNRI) delivers Health care services to the citizens of Beaufort County through the nurses it recruits and retains.

SCNRI is helping to combat the growing nurse shortage facing the Low country and Beaufort County.

While the need for nurses has been critical over the past few years, with tens of thousands of residents expected to join our communities over the next few years, and significant infrastructure investments being planned in Health Care facilities and capabilities, the focus on our Nurse workforce is taking on a new urgency.

SCNRI is a donor advised fund with the Community Foundation of the Lowcountry, offering a financial incentive to nurses who come and remain employed in Beaufort County, and was created to help us improve our healthcare system – both now, and as our population continues to rise in record numbers.

To attract nurses to our area and then keep nurses from leaving the area, the South Carolina Nurse Retention Initiative offers a unique "post-graduation" Stipend in return for a work commitment – providing up to \$12,000 (BSN) and \$6,000 (ADN) paid over two years based on their continued employment in Primary Care in Beaufort County.

#### Organizations with Similar Services; Opportunities for Collaboration

We collaborate with Health care providers and complement their efforts to recruit and retain the nurse workforce they need to provide quality Care to the citizens of Beaufort County.

We collaborate with nine colleges of Nursing within 100 mile radius to ensure that the graduating students are aware of our program BEFORE they have made an employment decision.

We believe that we are a contributing factor to the improvement in hiring and Retention of the nurse workforce which has recently been reported by Health Care providers.

We view our program as just one solution to what must be comprehensive approach to addressing the nurse workforce shortfall.

There is also a need to address the shortage of Nurse educators, school capacity, salary differentials, lack of affordable workforce housing etc.

There is an opportunity to collaborate with CCDC and other entities focused on Affordable housing to help our nurses to overcome this issue impacting retention.

#### Significant Recent Accomplishments

In 2.5 years since our start up in Sept 2021 we have added 40 nurses to the Retention program with plans to add 20-25 more in 2024. With 37 nurses remaining on the program we have achieved a 93 % nurse retention rate versus the National average of 50%.

In 2023 we exceeded our goal by adding 23 nurses to the program representing a financial commitment of \$228,000. This was made possible with the contribution Beaufort County made to the program in April ,2023.

The program has investment over \$600,000 towards building and retaining the nurse workforce to provide Health services to the citizens of Beaufort County.

- 32 nurses are employed in Beaufort County in Hospitals and other primary care settings.
- -8 Hilton Head Hospital
- -21 Beaufort Memorial Hospital
- -3 Sea Island Pediatrics +Beaufort Pediatrics +Agape Hospice

#### Service Delivery Goals and Objectives

The program is making a difference to the availability and quality of health care and to the individuals and their families on the program.

By increasing the number of nurses on staff in local primary care settings we can ensure that each patient receives the care they need.

Addressing the nurse shortage benefits the ENTIRE population of Beaufort County.

Health care improvement benefits ALL segments of our population.

One nurse will care for an average 5,000 patients per year.

#### Justification for Increased Funding

We launched the SCNRI in Sept 2021.

I approached the Council in June 2021 to review our program and request funding.

The County council liked the program and explored funding options at that time. August 2022 Hank Amundson, special projects became involved. \$50,000 was granted from ARPA in April 2023.

SCNRI was considered a Pilot program aligned with PATH program with continued funding contingent on demonstrating Impact to the citizens of Beaufort County.

Hank Amundson in May,2023 describes how Beaufort County viewed the nurse retention program.

"Beaufort County is excited to support SCNRI as another step on the PATH to a great Healthcare career, said Hank Amundson, Special Assistant to the County Administrator. Amundson added, "SCNRI will help the newly graduated nurses remain local and put down roots. This financial support, while they get settled into their new career, will allow them to live where they work and play. This retention initiative will pay dividends for us all, as a community, by supporting a more robust, sustainable healthcare system."

In 2023 we used the funds (along with other contributions) to add 23 nurses to the program representing a \$228,000 Investment in our Nurse Workforce.

Our Goal is to raise \$210,000 per year for the next several years to add 20-25 nurses to the retention initiative each year.

#### **Funding Request**

The SCNRI is asking the Beaufort County council to make an investment in Health Care and specifically, Nurse Workforce development.

We are requesting \$150,000 to support the program for the next three years. 100% of the funds will be invested over the next three years in Beaufort County nurse workforce development.

A multi-year commitment from Beaufort County strengthens the program and ensures that it is impactful and sustainable.

A report will be provided to council at year end and on an annual basis to validate that the program is having the intended impact.

#### Justification

- -Beaufort County's vision is to continue to be one of the most desirable places in the United States to live, work, and enjoy a sense of community in a culturally diverse coastal setting.
- To achieve its vision, Beaufort County desires to have world class health care facilities that meet the needs of current and future populations.

Beaufort County Vision discussions, Joe Passiment presentation to council:

- "We will have world class facilities that meet the needs of current and future populations. Level 1,2 and 3 Trauma centers; specialized facilities for disease and accidents; wellness centers; rehabilitation centers, short term care centers ; long term care centers. Teaching centers and laboratories."
- -The need for nurses will continue to grow with the expansion of health Care facilities and capabilities
- -Nurse are referred to as the backbone of the health care system or the "Quiet Hero's " of Healthcare and building an adequate Nurse workforce is a necessity.

- -This critical nurse workforce shortage was both exposed and made worse by the COVID-19 pandemic.
- -There are currently over 200 RN open positions in Hospitals, Home Care, Hospice, Rehab centers, Schools and the Naval hospital in Beaufort County.
- -The SCNRI created and operates a program under the Community Foundation of the Low Country to incentivize recent nurse graduates to first come and then remain employed in Beaufort County.
- -The funds are used to assist nurses with expenses, student debt , Further education, Housing etc.
- -This retention program benefits Beaufort Counties overall medical service delivery system by retaining nursing professionals that are in a state of critical shortage in the medical field.
- -SCNRI supports ALL Health Care providers operating in Beaufort County and serving the county's population in their efforts to build and retain their nurse workforce.

#### Impact and Contingent Strategy if Funding is Denied or Reduced

If the funding request of \$150,000 over three years is not feasible than \$50,000 for fiscal year 2024-25 would allow us to achieve our goal in 2024-25 and have a significant impact on the quality and availability of Health care required to meet the needs of a growing population.

#### Significant Service Outputs, Outcomes and Measures

We measure the number of nurses we add to the program and the length of retention. We measure our ability to recruit nurses to the area based on the colleges they graduate from. Many nurse graduates are applying from colleges over 100 miles away.

One nurse will care for an average 5,000 patients per year.

Studies show that increasing the staffing levels has a direct impact on the quality of patient care and patient outcomes.

With additional nurses and improved nurse to patient ratios:

- Fewer medication errors
- Lower patient mortality
- Shorter hospital stays

- Lower patient care costs associated with readmission
- Increased patient satisfaction

We are also thanking the nurses for their service and helping them to become financially stable to remain within our County.

Support from Government and individuals within the community demonstrates that this Nurse shortage is an important issue we face and something that needs to be addressed in a comprehensive manner.

The program has demonstrated its ability to BOTH attract and retain.

Recent Survey of all recipients indicated that 100 percent are influenced to stay because of the program even though they have had job offers outside our County.

We are demonstrating that the program is helping our nurses to remain in our local area despite the salary differentials and higher cost of living. Nurses in our program indicate that they feel appreciated, motivated and valued by the community – with many indicating that they have received offers to move but the program is the reason they are staying.

Here are just some ways SCNRI is making a difference – and having a positive impact both on the lives of the nurses in our program, as well as having a positive impact on our local health care system by working to combat the critical, and growing, nurse shortage in our area.

"The SCNRI was a large part of the reason I am choosing to remain in Beaufort County. With the cost of living on the rise, the extra funds are extremely helpful, especially as a mom raising two children."

"I have been able to use the stipend to make up for the difference in the cost of living here when compared to other places and that has allowed me to stay."

"As resident of Beaufort County, I desire to see those around me live healthier lives. I am honored to take care of those in my community first. I had many offers to work outside of my community but I chose not to."

"This scholarship has influenced my decision to stay at Beaufort Memorial for the full 2 years of employment. It has been difficult to keep up with the cost of living in Beaufort County but this scholarship has assisted me in paying my student loans."

"It highly impacts my decision to remain employed in the area every single day. I appreciate the money of course! But beyond that, the way you handle the program and the way you include us nurses in fundraising events and advertising opportunities continues to strengthen our relationship with the population we serve as health professionals. This is something very special to me and I think this is what makes SCNRI something that is so much more than just a stipend or a retaining bonus. You and your team are doing an excellent job and I am so proud and thankful to be a part of this amazing program."

Please fill out and sign this portion of the form as appropriate indicating contact information, the amount you are requestions and that you have the authority to discuss the budget on behalf of your organization.

Any incomplete or untimely submissions will not be considered.

Beaufort County FY 2025 Outside Agency Funding Application								
Please return this applicattachments to:	cation with	Valerie Althoff, Budget Manager, by March 15, 2024 via email: Valerie.althoff@bcgov.net						
Amount of	Funding Requested	l for FY 2025	\$ 75,000					
	ovided in this return is	this agency to submit this true and correct to the be	budget request to Beaufort County, est of my knowledge.					
Organization Name	Coastal Empire	Community Mental H	ealth					
Contact Name	Jennifer Cobb-H	layes and Angie Salle	<b>Р</b> У					
Contact Phone	Contact Phone 843-524-8899 or 843-524-3378							
Contact e-mail	Jennifer.cobb-ha	ayes@scdmh.org; an	gie.salley@scdmh.org					
Contact Fax	843-524-1879							

#### **Budget Narrative**

#### Mission/Scope of Services

Mission: To support the recovery of people with mental illnesses. Coastal Empire Community Mental Health Center (CECMHC) provides an array of comprehensive outpatient mental health services to both children and their families and adults. Our services include crisis intervention, therapy, medication management, medication administration, care coordination, psychosocial rehabilitation and other services that support the recovery of individuals impacted by mental illness. Services are community based and can be provided on-site, in the patient's home, schools and other safe settings in the community.

#### Organizations with Similar Services; Opportunities for Collaboration

There are other mental health providers that provide outpatient services, as well as inpatient. Coastal is one of the largest and leading providers of comprehensive outpatient services in the community. We are a state agency and unable to merge with other agencies. We also collaborate with and make referrals to other agencies as appropriate such as Beaufort Co. A & D, DDSN, BMH, DSS, Voc. Rehab, BCSD and others. We also have a MOU in place with Good Neighbor Medical Clinic and refer patients to them in need of physical health treatment and they refer to us for mental health treatment.

#### **Significant Recent Accomplishments**

CECMHC received our National Accreditation by CARF (Commission on Accreditation of Rehabilitation Facilities); we will be applying for our next survey in May 2024.

CECMHC also received the honor of being recognized at the 2023 2<sup>nd</sup> place for Lowcountry's BEST for Mental Health Services.

The S.C. Department of Mental Health highest honors for EOY in 2022 and the Hassenplug Winner for 2023 were both employees from CECMHC.

#### **Service Delivery Goals and Objectives**

We are committed to offering the highest quality of recovery-oriented treatment that is proven to produce positive results consistent with our values.

OUR VALUES

Respect for the Individual – We believe that the people we serve have the right to personal dignity, respect, and the highest possible degree of independence. We are committed to services that promote the individual's quality of life, focus on the individual's strengths, foster independence, and honor the rights, wishes, and needs of the individual.

Support for Local Care – We believe that people are best served within their home community. We are committed to the availability of a full and flexible range of coordinated services with the community as the primary focus of care, and services that appropriately meet the needs of the individual in the most normal environment possible. We are committed to programs which build upon the local support provided by family, friends, other agencies, and the community, and which offer employment, leisure, learning, residential and psychiatric/rehabilitation services within this supportive framework.

Professionalism and Commitment to Quality – We believe that we should encourage and reward excellence. We will create a work environment which inspires and promotes innovation and creativity, supports education and research, and continually

seeks more efficient and effective ways to provide clinical and administrative services. We are committed to maintaining a skilled and ethical work force, remaining culturally competent and dedicated to the highest standards of courtesy, understanding and respect. We are an agency worthy of the highest level of public trust.

Patient Advisory Board— CECMHC is guided by the feedback and needs that are identified by our community. We strive to provide quality ears to our community that

identified by our community. We strive to provide quality care to our community that uniquely responds to their needs. Towards providing that care we have established a patient advisory board that is constituted by active patients of CECMHC that meets quarterly and discusses our processes and services.

Our goals are to ensure wide-reaching accessibility to those seeking services and support; continue recruiting and retaining the highest quality of professionals; to provide the highest quality of care to our patients and families and to create a culture of diversity, equity, and inclusion with a focus on expert customer service. CECMHC's objectives are to maintain a model of same day access to care; offer a variety of platforms for services offered; and address gapes in operations with committees such as our Patient Advisory Board and Executive Leadership and establishment of a Performance Improvement Team. Objective for recruiting and retaining the highest quality staff is to maintain affiliation agreements with at least 3 academic institutions of higher learning; maintain a process to support clinicians towards professional licensure and implementation of a process of annual employee recognition. Our objectives to meet the goal of providing the highest quality of care to our patients and families is the implementation of a Performance Improvement Officer and committee who will use the center's data from dashboard to measure effectiveness; PIO will collect data quarterly and report trends, gaps, and information to assist in analysis of all programs and services. Our objective for creating and maintaining a culture of diversity, equity and inclusion is to constantly assess for needs and opportunities and threats that may impact workplace culture for both staff and patients; seek feedback from staff annually. In addition the E.D. along with Cultural Competence Committee chair will have annual assessment for the SCDMH Office of Cultural Competence on our workplace practices and policies.

#### **Justification for Increased Funding**

CECMHC has a current MOU with the Beaufort County Sheriff's Office in which we provide a Full-Time Law Enforcement Embedded Clinician to work with the Sheriff's Office. The role of the Clinician is to engage with individuals in the community that need services and connect them with the Center. The Clinician is also able to provide services and support to Law Enforcement Personnel when needed as well as serves as a liaison between the Sheriff's Department and our MC Team and Beaufort and Hilton Head Clinic staff. Currently there is no financial support for this position. We would also like to increase service delivery in the community from our Mobile Mental Health Unit, which is staffed with a Mental Health Professional, a psychiatric RN and APRN when available. The Center also provides crisis intervention services 24/7 through our Mobile Crisis Team, and we provide evaluations to the Beaufort County Probate Court for mental health evaluations. In addition, our staff must serve as designated examiners for probate hearings for Beaufort County Alcohol and Drug, which involves use of our medical staff. Additional wrap-around services include Care Coordination, ICT (Intensive Community Treatment, IPS (Individual Placement Services – employment) and MDFT (Intensive Family Therapy) programs. The cost to Coastal Empire Community Mental Health to operate a mental health clinic in Beaufort County is roughly \$4.1M per year, this does not include what we pay for after-hours mobile crisis response here. To help us maintain superior coverage and service, we are asking \$75,000 which will help support the salary of the full-time law enforcement embedded clinician and will help in recovering the loss of revenue

incurred when we have to provide the chemical dependence evaluations for probate court. In those instances, we must cancel scheduled appointments for our routine scheduled patients. We would also like to expand use of our Mobile Mental Health Unit in the Community to provide treatment to those that have barriers to being able to come into the clinic for services.

#### Impact and Contingent Strategy if Funding is Denied or Reduced

If we don't receive support, it may impact our ability to continue providing the full-time embedded clinician in the capacity she functions in now for the Sheriff's Office. The lack of funding could also impact our ability to continue providing the Mobile Mental Health Unit and in a broader capacity.

#### Significant Service Outputs, Outcomes and Measures

Our 29 Beaufort County dedicated clinicians provided over 15,000 hours of actual in person services in Beaufort County and 1600 hours were dedicated to the Beaufort County Sheriff's Office. We are consistently serving more patients and providing more services each year as shown in the service comparison below.

#### SERVICE COMPARISON FOR THE LAST 3 YEARS

	FY22 total	FY23 total	FY24 to date 2/29/2024
Contacts	20764	24116	15483
Patients	2306	2351	2036

#### TO SAME TIME PERIOD FOR THE LAST 3 YEARS

Contacts	to 2/28/2022 13277	to 2/28/2023 15378	FY24 to 2/29/2024 15483	
Patients	1874	1914	2036	

ADD-ONS												ADD-ONS
ENTITY	MILLAGE OR FEES	F	Y 25 REQUEST	F	FY 24 REQUEST/REV BUDGET	FY	24 ACTUAL AS OF 4.12.24	BUDGET % DIFFERENCE	F	FY 23 ACTUAL	ACCOUNT	Item 8.
Treasurer		\$	2,522,563.00	\$	2,364,980.00	\$	1,404,766.00	6.66%	\$	1,863,910.00	1000-10-1020	
Treasurer Exec Fees	FEES	\$	2,030,925.00	\$	2,283,749.00	\$	1,263,742.00	-11.07%	\$	932,136.00	2011-10-0000	
Sheriff												
Sheriff Admin		\$	32,410,607.00	\$	31,760,644.00	\$	23,330,899.00	2.05%	\$ 2	29,268,570.00	1000-20-1201	
HH Police	FEES	\$	6,229,224.00	\$	5,598,467.00	\$	4,171,692.00	11.27%	\$	35,569.00	2280-20-0000	FY24 includes \$96054 in vehicle purchases
School Resource		\$	1,191,329.00	\$	971,224.00	\$	718,265.00	22.66%	\$	848,318.00	2253-20-0000	
Public Defender		\$	4,727,523.00	\$	4,227,634.00	\$	2,954,156.00	12%	\$	3,964,544.00	2110-10-1142	
Island Rec Center 55203		\$	200,000.00	\$	150,000.00	\$	150,000.00	33.33%	\$	145,000.00	1000-10-1198-55203	
LRTA dba Palmetto Breeze 55200		\$	717,639.00	\$	337,097.00	\$	252,823.00	112.89%	\$	337,097.00	1000-10-1198-55200	
Military Enhancement Committee 55202		\$	100,000.00	\$	100,000.00	\$	100,000.00	0.00%	\$	100,000.00	1000-10-1198-55202	
Small Business Development Center 55250		\$	40,000.00	\$	40,000.00	\$	40,000.00	0.00%	\$	40,000.00	1000-10-1198-55250	
Keep Beaufort County Beautiful		\$	270,500.00	\$	10,000.00	\$	-	2605.00%	\$	-	1000-10-1198-55201	NEW ASK
Beaufort Jasper Hampton Comp Health	0.4	\$	1,140,000.00	\$	1,040,651.00	\$	1,040,651.00	9.55%	\$	899,418.00	1401-40-0000-55000	
Lowcountry Council of Governments												
Dues 55210		\$	159,049.00	\$	140,338.00	\$	105,253.00	13.33%	\$	140,338.00	1000-10-1198-55210	
HOME Consortium Match 55215		\$	75,000.00	\$	75,000.00	\$	56,250.00	0.00%	\$	75,000.00	1000-10-1198-55215	
MPO Match 55212		\$	26,154.00			\$	-	0.00%	\$	11,618.00	1000-10-1198-55212	
14th Circuit Solicitor		\$	2,615,661.00	\$	1,700,450.00	\$	1,700,450.00	53.82%	\$	1,700,450.00	1000-10-1098-55000	
Beaufort County Soil and Water Conservation												
District 55204		\$	39,950.00	\$	25,000.00	\$	25,000.00	59.80%	\$	25,000.00	1000-10-1198-55204	
Economic Development 55240												
Operations		\$	375,000.00	\$	495,000.00	\$	281,250.00	-24.24%	\$	495,000.00	1000-10-1198-55240	
Millage Revenue	0.3	\$	780,500.00	\$	746,350.00	\$	76,392.00	4.58%	\$	727,256.00	1010-10-0000-55240	
Site Acquisition and Development		\$	7,500,000.00	\$	10,000,000.00	\$	-	-25.00%	\$	-		NEW ASK
Beaufort Memorial Hospital 55100	0.4	\$	15,000,000.00	\$	1,040,651.00	\$	1,040,651.00	1341.41%	\$	899,418.00	1402-40-0000-55000	
South Carolina Dept of Mental Health		\$	75,000.00	\$	-	\$	-	0.00%	\$	-	1000-10-1198-55206	NEW ASK
South Carolina Nurse Retention Initiative		\$	50,000.00	\$	-	\$	-	0.00%	\$	-	NEW	NEW ASK
Greater Beaufort-Port Royal CVB												
State 2% ATAX		\$	230,000.00	\$	220,000.00	\$	97,654.00	4.55%	\$	409,314.00	2000-10-0000-55000	
Local 3% ATAX		\$	150,000.00		150,000.00	\$	75,000.00	0.00%	\$	150,000.00	2001-10-0000-55000	
Hilton Head Bluffton Chamber of Commerce												
State 2% ATAX		\$	215,000.00	\$	235,000.00	\$	97,654.00	-8.51%	\$	229,315.00	2000-10-0000-55000	
Local 3% ATAX		\$		\$	150,000.00	\$	75,000.00	0.00%		· · · · · · · · · · · · · · · · · · ·	2001-10-0000-55000	
University of South Carolina Beaufort	1.1			\$	2,861,790.00	\$	2,861,790.00	-100.00%	\$	2,585,826.00	1600-60-0000-55000	
Technical College of the Lowcountry	1.1	\$	7,500,000.00	\$	2,861,790.00	\$	2,861,790.00	\$ 1.62	\$	2,585,826.00	1600-60-0000-55000	Multi-year request
Beaufort County School District								#DIV/0!	\$		8010-05-0000-55000	•
Bluffton Fire District								#DIV/0!				
Burton Fire District								#DIV/0!				
Daufuskie Island Fire District								#DIV/0!				
Lady's Island St. Helena Fire District								#DIV/0!				

#DIV/0!

Sheldon Fire District

**ADD-ONS** 



# Coastal Empire Community Mental Health Center

# Beaufort County Clinics





Physical Addresses: 1050 Ribaut Road Beaufort, SC 29902

151 Dillon Drive Hilton Head, SC 29928

# Our mission ...

"To support the recovery of people with mental illnesses."

Priority is to treat adults with serious and persistent mental illnesses and children with severe emotional disturbances.

# Services we provide...

- Clinic Based Outpatient
- Services at the Schools
- Consultation to Detention Center
- Consultation to Medical Center
- Community Education
- Community Support
- Mobile Crisis 24/7

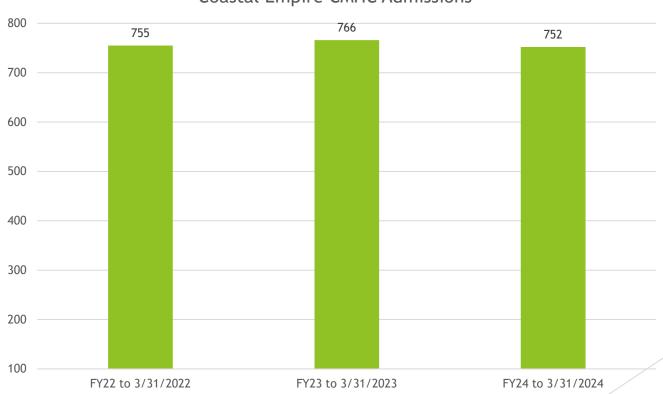


## Community Collaboration . . .

- Law Enforcement Embedded Clinicians with Beaufort County Sheriff's Department and City of Beaufort Police Department
- Consultation to Beaufort County Detention Center
- Bluffton Police Department
- Beaufort County Probate Court
- Beaufort County Human Services Department
- Beaufort County Alcohol & Drug
- Beaufort County School District
- "Together for Beaufort County"
- Good Neighbor Clinic
- Collaborative Organization of Services for Youth (COSY)
- SC Department of Disabilities & Special Needs
- SC Department of Social Services
- Hopeful Horizons

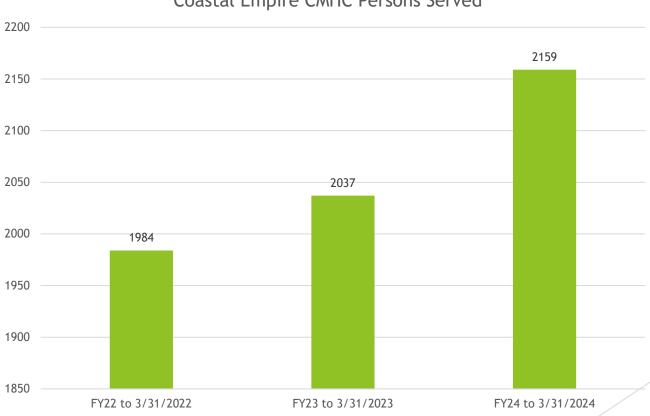
## Admissions ...

### Coastal Empire CMHC Admissions



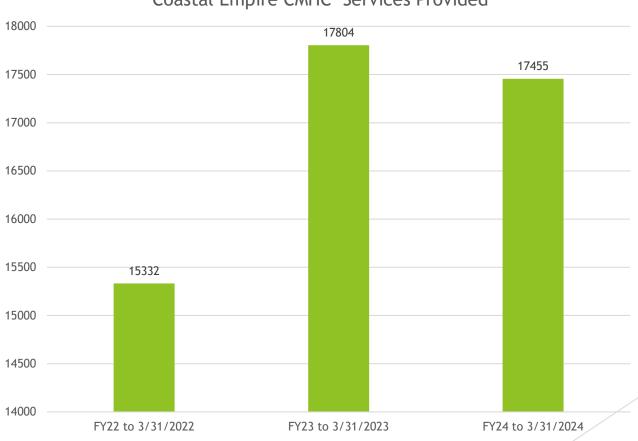
# Patients...

### Coastal Empire CMHC Persons Served



## Services ...

### Coastal Empire CMHC Services Provided



## County Support is important . . .

- Population growth increasing Mental Health demand
- Untreated Mental Illnesses can lead to tragedy in the community
- Law Enforcement/Detention Center/Probation/DJJ need us
- DSS needs us....
- Schools need us...
- Hospitals needs us...
- Our community needs us...
- You need us.

#### Item 8.

## **Executive Leadership**

Angie B. Salley, Executive Director
Dr. Jennifer Cobb-Hayes, Director of Administration
Frances Moody, Director of Clinical Operations
Dr. Brittany Sauerborn, Medical Chief
Jeremy Tanner, Human Resources Manager
Omega Smalls-Francis, Hilton Head Clinic Director
Courtney Humes, Beaufort Clinic Director

### **Board Members**

Henry Hiott, Acting Board Chair Dr. Thomas Miller Leigh Ann Smith Genora Kennedy Linus Wright Randy Boehme Korey Williams Dr. Brook Dean







# SCNRI SCHOLARSHIP RECIPIENTS



#### Item 8.

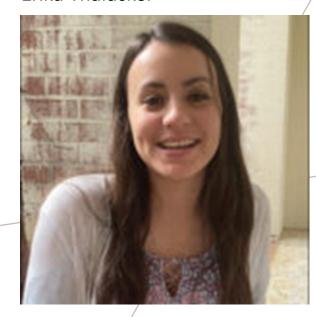
Lauren Londono



Krystal Maldonado



Erika Thalacker



#### Item 8.



Alexandria Coleman



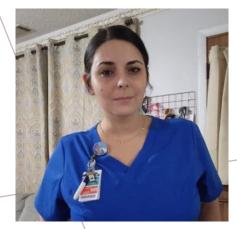
Anna Kallmeyer



Melanie Kelly



Sharonda Jenkins



Glaychia Reber



Kimberly Lunceford



Mary Montana



Trenisha Bonds



Anna Graves



Bailey Moore



Cherise Gardner



Christian Lorenzo



Christine Flores



Cullen Estep



Darian Dubie



Kaitlyn Davis



Dean Smith



Jenny Schumann



Jessica Leaky



Hayden Brown



Elizabeth Reed



Gracelyn Stubblefield



Kendra Zavala



Kimberly Alicea



Mariela Moreno



Nana Ackaah



Natalye Landon



Rosalyn Paulino



Samantha Parlagreco



Blaine Alexander



Blair Wilkins



Julia Demarzo



Erin Drew



Rachel Buchholz



Item 8.





A welcoming, world-class community embracing nature, culture and economic vibrancy for residents and visitors.



Stimulate the regional economy while enhancing the quality of life for all.



## **ORGANIZATIONAL GOVERNANCE**





#### **MEDIA MENTIONS**

#### TRAVEL + LEISURE

Readers' 10 Favorite Resorts In South Carolina, Montage Palmetto Bluff #5

#### **SOUTHERN LIVING**

It's Time To Visit Daufuskie, South Carolina The Little Known Island Hiding In Plain Sight Of Hilton Head

#### **CONDÉ NAST TRAVELER**

Top 20 Resorts In The South: Reader's Choice Awards - Montage Palmetto Bluff #1

#### TRAVEL + LEISURE

How To Plan The Perfect Trip To Bluffton, South Carolina

#### **FORBES**

Montage Palmetto Bluff Celebrates Local Talent With New Wellness And Lifestyle Programs

#### **ESSENCE**

Luxe Living: The Wellness Scene In The Lowcountry At Montage Palmetto Bluff

#### **FODERS**

Daufuskie Island one of "13 Hidden Beaches Across the U.S."

#### **AARP**

4 Car-Free Destinations

#### ROBB REPORT

This Chef Wants To Create A Destination For African-Inspired Cuisine In This Small South Carolina Town

#### **FOODSIDED**

Exploring Bluffton: Celebrating the Flavorful Food Scene One Dish At A Time

#### **GARDEN & GUN**

Open Table: In Bluffton, South Carolina, An Innovative Dining Scene Starts With An Equitable Small Business Community

#### **YEAR IN REVIEW**



**WEBSITE VISITS** VisitBluffton.org & VisitDaufuskie.org

402.7K **WEBSITE VISITS** 

81.2K **PARTNER REFERRALS** 





**SOCIAL MEDIA ExploreBluffton** 

48.4K **TOTAL FOLLOWERS** 

3.9% **ENGAGEMENT RATE** 





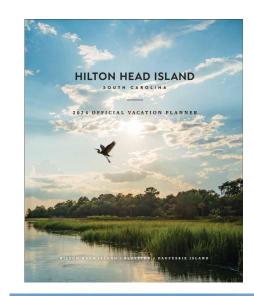
HOTEL **Bluffton** 

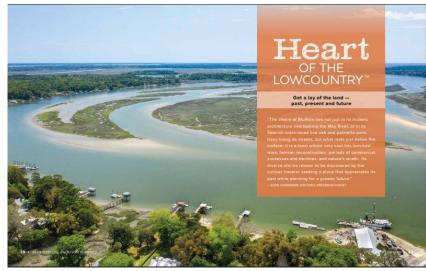
69.3% 13% \$264.95 13.2% \$183.63 REVPAR



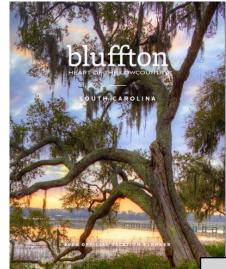
### **YEAR IN REVIEW - VACATION PLANNER**

100.8K
TOTAL FULFILLED



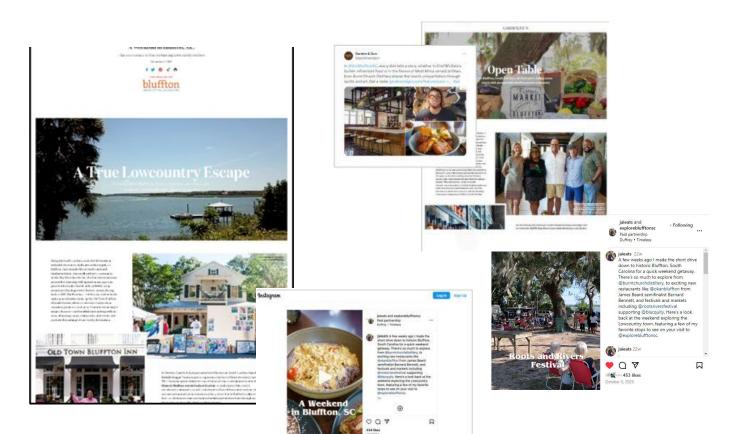






#### YEAR IN REVIEW - PAID MEDIA BUYS





#### Garden & Gun Partnership

Media Partnership #1

Repurpose of existing article highlighting a weekend in Bluffton.

Campaign Run Dates: June - July, 2023

Results

Total Impressions: 868,616 Total Engagement: 40,791 Engagement Rate: 4.7%

#### Media Partnership #2

Partnering with the River & Roots Festival, Garden & Gun contributor, Jai Jones joined us for a weekend to experience the festival and Bluffton.

Campaign Run Dates: September - November, 2023

Results

Audience Reach: 1.89M

Digital Article Pageview:16.5K Social Engagements: 47.5K

Social Clicks: 14.8K

### YEAR IN REVIEW - BLUFFTON PUBLIC RELATIONS

108
MENTIONS

1,029,532,390 IMPRESSIONS

\$421,920.04 AD VALUE



Robb Report

Southern Living



Forbes GARDENGGUN



#### **KEY AREAS OF INTEREST**

- Gullah Geechee Cultural Heritage Corridor
- 2. History, Culture, and Arts
- 3. National Historic Register Designations

- 4. Natural beauty, Waterways, Parks
- 5. Local Culinary and Local Market Experiences
- 6. Festival and Events





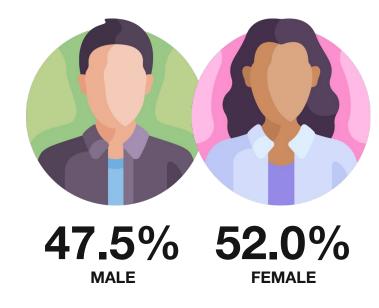








### TARGET DEMOGRAPHIC





\$150K - \$250K+



51.1%

UNDERGRADUATE DEGREE OR HIGHER



**2-4**TRIPS PER YEAR



FAMILY
TRAVELER

MILLENNIAL
TRAVELER

AFFLUENT
TRAVELER

## THE VISITOR JOURNEY

An Always On Approach



# **FY 2024-2025 STRATEGIES**

#### **GOALS & STRATEGIES**

2024-2025

#### **Overarching Goal:**

The overarching goal of the marketing plan is to drive qualified visitation to our the Southern Beaufort County area, Daufuskie Island and Town of Bluffton.

#### **GOALS**

- 1. Build brand awareness and support qualified visitation to the destinations among target out markets.
- 2. Drive the discovery and exploration of the destination with deeper storytelling of the destination's key attributes.
- 3. Leverage a strategic mix of targeted methods to identify and reach the most qualified users.
- 4. Create an understanding of, and respect for, the delicate ecosystem of the destinations.
- 5. Enhance Leisure and Group business through qualified visitation.

## **GOAL #1 & STRATEGIES**

GOAL #1	STRATEGIES	
Build brand awareness and support qualified visitation to the destination among target out markets.	<ul> <li>Digital display</li> <li>Programmatic advertising</li> <li>Traditional ad placements (Print)</li> <li>Social media marketing (Facebook, Instagram, Spotify, Pinterest, Twitter)</li> <li>User Generated Content curation (UGC)</li> <li>Public relations (media outreach, partnerships, influencers, paid earned media placements)</li> </ul>	

## **GOAL #2 & STRATEGIES**

GOAL #2	STRATEGIES	
Drive the discovery and exploration of the destination with deeper storytelling of the destination's key attributes.	<ul> <li>Lead generation ads</li> <li>Paid social media</li> <li>Search optimization</li> <li>Social media videos/ reels/ stories</li> <li>User Generated Content (UGC)</li> </ul>	

# GOAL #3 & STRATEGIES

GOAL #3	STRATEGIES	
Leverage a strategic mix of targeted methods to identify and reach the most qualified users.	<ul> <li>Target audience, utilizing insights from demographic &amp; persona findings</li> <li>Paid social media</li> <li>Search optimization</li> <li>Digital experience personalization</li> </ul>	

# **GOAL #4 & STRATEGIES**

GOAL #4	STRATEGIES	
Create an understanding of, and respect for, the delicate ecosystem of the destinations.	<ul> <li>Develop digital content (Blogs, social, videos)</li> <li>Conservation initiatives including, but not limited to:         <ul> <li>Environment &amp; natural resources</li> <li>Waterways</li> <li>Wildlife</li> <li>Volunteer opportunities</li> </ul> </li> </ul>	

# **GOAL #5 & STRATEGIES**

GOAL #5	STRATEGIES	
Enhance Leisure and Group business through qualified visitation.	<ul> <li>Email marketing</li> <li>Social and display remarketing</li> <li>SEO</li> <li>Search optimization</li> <li>Virtual networking</li> <li>Digital media</li> </ul>	

# **BUDGET**

Bluffton / Southern Beaufort County Budget (FY2023-2025)				
	FY2023 BUDGET	FY2024 BUDGET	FY2024 ACTUAL	FY2025 BUDGET
REVENUES			YTD thru 31MAR2024	
Southern Beaufort County DMO	\$365,000	\$385,000	\$256,960	\$365,000
Total Revenues				
EXPENSES				
Digital Promotions / SEM	\$27,966	\$25,360	\$26,357	\$22,172
Website Maintenance	\$25,260	\$14,400	\$11,700	\$15,300
Website Hosting	\$758	\$864	\$642	\$1,224
Social Marketing & Content Strategy	\$12,630	\$14,400	\$11,700	\$15,300
Paid Social	\$36,627	\$42,096	\$28,768	\$36,720
SEO	\$7,578	\$8,640	\$7,020	\$10,200
Bluffton Insiders (enews)	\$12,630	\$9,600	\$0	\$10,200
Bluffton Vacation Planner/Fulfillment	\$35,785	\$56,640	\$66,281	\$63,750
Regional Vacation Planner/Fulfillment	\$27,365	\$16,800	\$15,375	\$22,440
Media Partnerships	\$42,100	\$24,000	\$7,852	\$12,750
Photography/Videography	\$21,050	\$19,200	\$0	\$5,100
Research & Planning	\$8,420	\$9,600	\$0	\$10,200
Contingency	\$4,631	\$4,800	\$0	\$2,769
Ops & Management	\$102,200	\$138,600	\$84,797	\$136,875
TOTAL EXPENSES	\$365,000	\$385,000	\$260,491	\$365,000









# TECHNICAL COLLEGE OF THE LOWCOUNTRY

Beaufort Mather Campus | Bluffton New River Campus

Hampton Campus | Culinary Institute of the South | Online

# WHAT WE DO EVERYDAY:









**Technical College of the Lowcountry** is uniquely focused on serving traditional college students as well as working learners. The College provides education and training to advance local workforce development – meeting student needs for higher income and career advancement and simultaneously strengthening the area's economy.

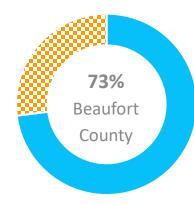


# **MEASURABLE IMPACT:**



## **TARGETED**

2940 Students 91% of our students are Lowcountry residents. Almost 18% are Active-Duty Military, Veterans or their dependents.



# LOCAL

73% of our students are Beaufort County residents. 9% are from Jasper County; 8% from Hampton County; and 4% from Colleton County



# **RELEVANT**

96% of our graduates are placed in a job related to their field of study or continue their studies and further their education.



# **QUANTIFIABLE**

The college's economic impact to the Lowcountry increases each year. For every dollar invested in TCL, taxpayers gain \$3.30 in added tax revenue.



# FY 2023 COLLEGE HIGHLIGHTS:

TCL and BCSD Announce Tides High School Dual Enrollment Program. TCL Completes Historic Moor Hall Renovation Creating The HUB. TCL First S.C. Technical College to Earn Special Veterans Designation. TCL Cybersecurity Program Opened the Securities Operation Center. TCL Chartered Tri-Alpha Honor Society, Recognizing First-Generation Students. TCL Opens Colleton County Satellite Campus in Partnership with the Colleton County Adult Education Center. S.C. Allocates \$10 Million to Arthur E. Brown Regionals Workforce Training Center.



# **ANNUAL MILLAGE IMPACT:**

For the Year Ended June 30, 2023	Expense	Revenue
Operating Revenues		\$12,149,131
Operating Expenses	\$ 30,877,910	
Operating Loss	\$ (18,728,779)	
Other Revenues:		
Federal Grants & Contracts		\$ 7,392,395
State Appropriation		\$ 6,784,383
Beaufort County Appropriation		\$ 2,592,076
Hampton County Appropriation		\$ 25,000
Jasper County Appropriation		\$ 10,000
Other		\$ 28,725
Net Position	\$ (1,896,200)	



# Request for \$7.5 million commitment for the construction of the Leman 1. Arthur E. Brown Regional Workforce Training Center

- Cost of construction: \$20 million
  - \$10 million from South Carolina
  - \$2.5 million from College resources
  - \$7.5 million requested from Beaufort County
- Empowers the College to offer new programs:
  - Supply chain/logistics and Business
  - Computer Technology and Robotics
  - Advance manufacturing
- Provides training opportunities for an additional 850 students annually:
  - Analysis suggests 12% of these students will be from outside of the Lowcountry – new workers.
- Generates annual economic impact of \$4M:
  - This figure is expected to rise in tandem with enrollment growth and number of graduates.





### **REFERENCES & RESOURCES:**

TCL Financial Transparency: <a href="https://www.tcl.edu/about-tcl/consumer-information/transparency/">https://www.tcl.edu/about-tcl/consumer-information/transparency/</a>

TCL Strategic Plan: <a href="https://www.tcl.edu/strategic-plan/">https://www.tcl.edu/strategic-plan/</a>

2024 State of the College report: <a href="https://www.tcl.edu/about-tcl/2024-state-of-the-college/">https://www.tcl.edu/about-tcl/2024-state-of-the-college/</a>

**Arthur E. Brown Regional Workforce Training Center:** 

https://www.tcl.edu/about-tcl/campuses-maps/new-river-campus/regional-workforce-training-center/

#### President's contact information:

Dr. Richard Gough

E: rgough@tcl.edu

P: 843-525-8247



#### **ITEM TITLE:**

RECOMMEND APPROVAL TO COUNCIL OF AN ORDINANCE TO ACCEPT AND TO APPROPRIATE FUNDS FROM THE SOUTH CAROLINA OPIOID SETTLEMENT FUNDS

#### **MEETING NAME AND DATE:**

Finance, Administration, and Economic Development Committee

April 15, 2024

#### PRESENTER INFORMATION:

Audra Antonacci - Ogden, ACA

Rebecca Whitt Burgess, Director, Alcohol and Drug Abuse Department

10 Minutes

#### **ITEM BACKGROUND:**

Beaufort County is party to a national opioid lawsuit settlement. As the South Carolina Opioid Relief Funds (SCORF) Board provides opportunities for Beaufort County to apply for funds allocated to Beaufort County, Beaufort County applies for funds to enhance capacity or new initiatives towards opiate abatement strategies. Beaufort County applied in February of 2024 and was approved.

#### **PROJECT / ITEM NARRATIVE:**

Allocation of award funds shall be given to opiate issues from prevention to recovery, and to equip those impacted with the necessary resources to provide innovative interventions to reduce opiate issues, address unmet needs and to reduce the opioid-related overdoses death across Beaufort County.

#### **FISCAL IMPACT:**

The South Carolina Opioid Relief Fund (SCORF) award is \$582,606 for one year. No matching funds.

#### STAFF RECOMMENDATIONS TO COUNCIL:

Staff recommends approval of an Ordinance to accept and appropriate funds for the South Carolina Opioid Settlement Funds

#### **OPTIONS FOR COUNCIL MOTION:**

Motion to approve an Ordinance to accept and appropriate funds from the South Carolina Opioid Settlement Funds or motion to deny an Ordinance to accept and appropriate funds from the South Carolina Opioid Settlement Funds.

#### Ordinance 2024/

## AN ORDINANCE TO ACCEPT AND TO APPROPRIATE FUNDS FROM THE SOUTH CAROLINA OPIOID SETTLEMENT

**Whereas**, the process for obtaining Beaufort County's South Carolina Opioid Settlement Funds for allocation are at least annually applied for to the South Carolina Opiate Relief Fund Board with opiate abatement core strategies and uses found in South Carolina's Guide to Approved Uses for Investing Opioid Settlement Funds.

**Whereas,** once the applications are approved by the South Carolina Opiate Relief Fund Board and the funds are obtained, Beaufort County Council will allocate those funds consistent with the core strategies and uses approved if they are found to create or supplement existing projects and not supplant; and

Whereas, funds will only be provided for approved uses to county departments or other Beaufort County entities providing for opiate abatement uses. All Beaufort County's South Carolina Opioid Settlement Funds will have the final approval of the Beaufort County Administrator after assurances are made that the projects to be funded are found in South Carolina's Guide to Approved Uses for Investing Opioid Settlement funds.

Whereas, the Beaufort County Council finds it appropriate to allocate \$582,606 to extend the treatment for the incarcerated population, medication assisted treatment programming, and to expand warm handoff programs, and then enhance Naloxone or other approved drug to reduce opioid overdoses by providing medications for opioid use disorders, education, and awareness to first responders and citizens through community partners, continue community drug disposal programs, for prevention opioid response to link community members to needed serves, media campaigns, and for leadership, planning, and coordination.

**NOW, THEREFORE, BE IT ORDAINED,** that Beaufort County Council, in a meeting duly assembled, hereby accepts, and appropriates, funds in the amount of \$582,606 from the South Carolina Opioid Settlement Funds as set forth in Exhibit "A".

Adopted this day o	f, 2024.	
	COUNTY COUNCIL OF BEAUFORT COUNTY	
	₽V·	

Joseph Pa	assiment,	Chairman
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ATTEST:	
	_
Sarah W. Brock, Clerk to Council	



#### **BOARD MEMBERS**

Eric Bedingfield, Chair

Aditi Bussells, Ph.D. *Vice Chair* 

**Toby Chappell** 

Steven Donaldson

Mayes DuBose, MD

Martine Helou-Allen

Gary Mixon

Lisa Montgomery

Chief Judge H. Bruce Williams March 21, 2024

The South Carolina Opioid Recovery Fund Board has reviewed your request for South Carolina Opioid Recovery Funds and approved your request as set forth below.

As a condition of receiving South Carolina Opioid Recovery Funds, implementation of the approved abatement strategies should start within 120 days from disbursement of the funds.

Please complete and return the attached Point of Contact form within 5 days upon receipt of this notice. In addition, you are required to report to the Board periodically to confirm how the requested funds were used and to provide information regarding the impact of the funds. Please note that GPS Subfund recipients should provide attached program and fiscal reports. Annual reports will be due on or before March 31, 2025. Additional information regarding the format and content of the annual report can be found on the website <a href="mailto:scorf.sc.gov">scorf.sc.gov</a> or by contacting program staff.

We look forward to learning the results of how the requested funds were used for approved abatement strategies to help combat the opioid crisis in the State of South Carolina. If you have any questions, please feel free to email <a href="mailto:contact@scorf.sc.gov">contact@scorf.sc.gov</a>.

Sincerely,

Eric M. Bedingfield, Chair

Disburse Funds to:

Payee: <u>Beaufort County</u>
Address: 1905 Duke Street
PO Drawer 1228

Beaufort, South Carolina 29901

SCEIS Vendor No.: \_\_\_\_\_**700017466** Amount: \$582,606

Approval No.: BEA2e5909

SubFund: ⊠GPS □ DFS

\*All approvals of SC Opioid Recovery Funds are for one year only on the calendar year. All projects are to be completed by 12/31. Recipients can reapply for funds for subsequent years.

SCORF Finance Use (please do not stamp in this area):

GPS E600010000 E600\_UNBD 41220030 5170750000 DFS E600010000 E600 UNBD 41220020 5170750000

South Carolina Opioid Recovery Fund Board 1201 Main Street, Suite 420 Columbia, SC 29201 contact@scorf.sc.gov



#### **Beaufort County Opioid Settlement Funding Technical Proposal**

Please see Beaufort County Government's funding request addressing core opioid reduction strategies within the community. This continues to be a collaborative process and will require continued collaboration to reach the desired impact in our community.

1. Core Abatement Strategy: Naloxone or Other FDA Approved Drug to Reverse Opioid Overdoses (Continuation and Expansion): (New):Approved Use: Increased availability and distribution of naloxone and other drugs that treat overdoses for first responders, overdose patients, individuals with OUD and their friends and family members, schools, community navigators and outreach workers, persons being released from jail or prison, or other members of the general public.

Issue: Per the DAODAS Just Plain Killers website (Most current data), Beaufort County saw a 25% increase in opioid deaths, a 31.47% increase in fentanyl-related deaths, a 5% increase in opioid prescriptions prescribed, but no increase in the amount of emergency medical services use of Naloxone in 2021 compared to 2020. Per medical contract staff at the Beaufort County Detention Center, approximately 80-120 detainees have opioid or other substance misuse issues—the detention center as a whole houses about 2,000 detainees annually. Therefore, nearly 50% of those incarcerated have opioid or substance misuse issues. Upon discharge, those with opioid issues have a reduced tolerance for opioid use, thus making them more susceptible to opioid overdoses.

Beaufort County is currently working with DAODAS on a Narcan Saturation Plan for Beaufort but is limited to distributing 300 units. DAODAS only allows their Naloxone to be distributed to disadvantaged citizens. Beaufort County sought funds in the first SCORF application to conduct county staff training through a training film deployed through the Human Resources Training Portal so high-traffic offices could have Naloxone as part of their first-aid kits. Over 100 Beaufort County employees have been trained, and Naloxone is embedded in first aid fits throughout high-traffic citizen areas, including libraries, the airport, and social service settings. The training will be ongoing and self-sustaining. Estimates while making purchases did not account for the amount needed before the 12/31/2023 deadline for purchase. Therefore, more will be required.

Additionally, the Coroner indicates that having Narcan to do training and distribution when responding to fatalities where other suspected opioid users are living. To that end, the coroner is a first responder in need of life-saving medication to prevent other fatalities.

*Implementation:* by Increasing the availability of Naloxone (Narcan) to citizens, especially vulnerable populations leaving detention, to supply Beaufort County offices with high citizen traffic, and the coroner's staff who is a vital first responder.

#### **Output Target:**

- Distribute at least 300 naloxone kits to Beaufort Couty Citizens leaving detention.
- Distribute 36 Narcan kits to Beaufort County offices and the Coroner's staff.

#### Funding Request to Expand Capacity:

NV54 Naloxone Vending Machine for the Detention Center \$ 4,500

Naloxone for county offices and Coroner @60 \$ 1,296
Naloxone for Vending Machine (500 kits) @\$60 \$ 31,800

Total Cost: \$37,596 Carryover: \$601 Admin Costs: \$1,850 Total Requests: \$38,845

2. <u>Core Abatement Strategy: Medication Assisted Treatment (MAT) and Other Opioid-Related Treatment (Continuation):</u> Strategy (Continuation): Increase MAT distribution to uninsured individuals or those whose insurance does not cover the needed Service.

Issue: Per the DAODAS Just Plain Killers website (Most current data), Beaufort County saw a 25% increase in opioid deaths, a 31.47% increase in fentanyl-related deaths, a 5% increase in opioid prescriptions prescribed, but no increase in the amount of emergency medical services use of Naloxone in 2021 compared to 2020. In 2021, Medicaid data indicates that 176 of their beneficiaries in Beaufort County have an opioid use disorder. Yet, the alcohol and drug authority in Beaufort County has only engaged 11 total opioid use disorder patients in the past 12 months. To that end, a service gap exists, and people are overdosing and dying. Therefore, we will need to enhance engagement protocols to be able to treat more citizens with opioid use disorders with medication-assisted treatment as part of the strategy.

Concurrently, through the second funded SCORF application, Beaufort County contracted with community partners to provide indigent medication-assisted treatment services through Beaufort Memorial Hospital's Addiction Services and to support a MAT provider. The BMH program expanded the census by serving an additional forty-three (43) patients, or a **32.86 increase**. Beaufort sought and received a No Cost Extension, given the short funding period (7 months). Beaufort, per the SCORF Award, provided \$125,000 to that entity. Per preliminary reports, all funds will be exhausted. The indigent medication fund is already depleted, and the program is on target to contribute \$15,000 towards the salaries of the staff brought on board to expand access.

Given that the Alcohol and Drug Abuse Department has indigent funding available and BMH does not, it is anticipated that with embedded the staff at BMH will result in capacity building to serve more unfunded or underinsured patients with opioid use issues.

Implementation: Beaufort County will continue to employ a SCORF-funded MAT Coordinator/Counselor. The MAT Coordinator will become community-based and work within Beaufort Memorial Hospital (BMH), in addition to working within the Beaufort County Alcohol and Drug Abuse Departments locations (Beaufort and Bluffton) to provide information and coordinate treatment and medication services to those identified with an opioid use disorder moderate to severe. Additionally, continuation of contractual arrangements with Beaufort Memorial Hospital to provide medical and medication services to eligible Beaufort citizens with moderate or severe opioid use disorders will be continued.

#### Output:

- a. Provide up to 40 additional OUD patient services at the local alcohol and drug abuse authority.
- b. Provide medication services to up to 25 patients without insurance or those underinsured at Beaufort Memorial Hospital.
- c. Engage at least 40 new patients with OUD-related medical services.

#### Funding Request:

•	MAT Coordinator/Counselor Salary	\$	69,955
•	3% Cola	\$	2,098
•	Fringe (36%)	\$	25,939
•	Advertising	\$	500
•	Training and Travel	\$	1,000
•	Certification Fees	\$	250
•	Office Supplies	\$	500
•	Telephone & Service	\$	3,600
•	Liability Insurance	\$	1,000
•	<b>Electronic Medical Record Fees</b>	\$	2,000
•	Workforce Development/Supervision	on	

Workforce Development/Supervision
 For All counselors, administrators, and
 Peers working with OUD patients \$28,600

 Medical and medication contractual Services with BMH \$125,000

Total Cost: \$270,442 Admin Cost: \$13,522 \*Carryover: \$ 98,864 Total Requests:\$ 185,100

\*Carryover is complicated. Beaufort has had two applications approved by SCORF. The second approved application funding cycle ENDs before the first funding cycle with Beaufort believing it would be later (no dates were known from SCORF), and a candidate

was not immediately engaged to draw down funds from the first application, so the carryover is excessive. Further, cycle two funding in operating on a No-Cost extension to continue those programs expanded through SCORF awards. However, applying now is necessary so new programs can start, and this government entity can continue other programs with an aligned funding cycle.

3. <u>Naloxone or Other Approved Drug to Reduce Opioid Overdoses by providing Medications for Opioid Use Disorders (MOUD) education and awareness to first responders and citizens/Provide Targeted Naloxone Distribution (Continuation):</u>

Strategy: Expand training for first responders, schools, community support groups, and families

Issue: An increasing number of citizens in Beaufort County interface with first responders, given overdoses. Per the DAODAS Just Plain Killers website (Most current data), Beaufort County saw a 25% increase in opioid deaths, a 31.47% increase in fentanyl-related deaths, and a 5% increase in opioid prescriptions prescribed but no increase in the amount of emergency medical services use of Naloxone in 2021 compared to 2020. The ODMAP data shows that more than 50% of the opioid hot spots are in the Northern section of Beaufort County, despite having a first responder team to reduce the opioid misuse impact on Beaufort County. Given that fire districts are often the first line of defense to fatalities from overdoses when 911 dispatch is called, preparation is necessary to respond appropriately and without the impact of any stigmatizing response to care and the chain of survival.

Beaufort County partnered with the City of Beaufort and the Town of Port Royal Fire Department to employ a medical educator to provide first responder training for firefighters, law enforcement, and citizens. Part of the education to first responders is antistigma, the good Samaritan laws, creating awareness of community resources, and teaching how to use Naloxone. On an in-kind basis, the fire department also distributes Narcan. At the mid-point of their funding cycle, training materials have been developed, and sixty-nine (69) first responders and 20 citizens have been trained and educated as applicable. Further, Naloxone has been distributed as needed.

*Implementation:* The strategy is to continue the community partnership with the City of Beaufort and the Town of Port Royal Fire Department to provide education and awareness to first responders and citizens on opioid issues, naloxone use, to combat stigma, and to deliver targeted Naloxone distribution to citizens in Beaufort and Port Royal.

#### Output:

- a. Train a minimum of 100 first responders and 100 citizens with education and antistigma awareness and the use of Naloxone.
- b. On an in-kind basis, distribute Naloxone, as appropriate, and report those numbers to the funder.

#### **Funding Request:**

Medical Education Officer (\$100,000, salary and Fringe included)

• Education supplies and Naloxone were provided in kind.

Total Cost: \$100,000 Admin Cost: \$5,000 \*Carryover: \$0

Total Requests: \$ 105,000

\*Carryover is complicated: Although there is a current carryover, given that the project is working on a no-cost extension and the subsequent funds are available, there is no anticipated carryover to occur.

## 4. <u>Expansion of Warm Hand-Off Programs and Recovery Services (Continuation):</u> Strategy: Provide comprehensive wrap-around services to individuals in recovery, including housing, transportation, job placement/training, and childcare

Issue: Beaufort County has four recovery residences, but until the SCORF assisted in opening a men's house, no program allowed residents on MAT. Medication-assisted treatment is evidence-based, and the county believed that safe, sober housing for OUD users on MAT was needed. One house was opened, but it is limited to serving five residents. There is a need for another men's house to expand this option in Beaufort County.

Currently, Mercy Me is operational. It opened on July 1, 2023, in Port Royal, SC. They have served 25 men to date. Some alumni stay engaged with the house after transitioning into the community to share their strengths, experiences, and hopes with new residents. Beaufort County provided technical assistance and the requirement to become accredited by SCARR. Mercy Me is currently "In-process." Mercy Me is now nearly self-sufficient. The \$25,000 provided through SCORF funds enabled them to operationalize this endeavor. The faith community and other volunteers offer their time to provide administrative and operational oversight. Therefore, rents by residents are sustaining operations.

Implementation: Provide comprehensive wrap-around services to individuals in recovery, including housing and transportation. Furthermore, the strategy is to open a second sober living facility for men in Beaufort County.

#### Output

• Increase capacity by 5 beds for men in Beaufort County and serve at least 10men during funding period.

#### **Funding Request:**

- \$25,000 for deposit and rent for the first three months, utilities, furnishings, transportation costs, and other wrap-around services needed to start and operate a second recovery residence.
- Staff will be provided "in-kind" by the board, the fiscal authority, and volunteers.

Total Cost: \$25,000 Admin Costs: \$1,250 \*Carryover: \$0

#### **Total Requests: \$26,250**

## 5. <u>Treatment of the Incarcerated Population (Continuation)</u>: *Strategy:* Increase funding for jails to provide treatment to inmates with OUD

Issue: Based on post-Covid data, Beaufort County detains approximately 200 individuals annually. This is a reduction from previous numbers. During COVID-19, the contracted medical staff reported that between 40-60% of detainees per month reported having substance or opioid misuse issues. Despite the problems identified, there was no substance misuse intervention occurring while those individuals were in a controlled environment. Therefore, Beaufort County leadership applied for SCORF funds to start easing some of those issues, and funding was awarded to hire a counselor and to fund associated expenses to provide substance misuse interventions in the detention center. Funds were awarded in both Beaufort's first application and the second to continue supporting the initiative.

After SCORF funding was awarded, Beaufort County's Alcohol and Drug Abuse Department worked with the leadership of the detention center to design the program and work out safety protocols. It took several months before a counselor was engaged, resulting in a significant delay in moving forward with offering treatment to the incarcerated population. Therefore, no meaningful outcome data is yet available.

The program's first funding cycle ends on 1/31/2024, and the second with continuation funds ends on 12/31/2024. When completing the second application, no guidance was available to define the funding period. Therefore, given the time it took to engage a counselor, there is a carryover from the first fund. The second cycle funding was approved for a No-Cost Extension to operate until 6/30/2024. Carryover funds will reflect annualized costs until the second funding cycle period ends. The program's goal is to obtain year three funding and request a No Cost Extension to align the funding cycles to the county fiscal year. Then, apply once annually in the future.

*Implementation:* A counselor will work with inmates identified by medical personnel and cleared through the multi-disciplinary team. The counselor will do screenings, provide substance use education, train detainees on the use of Naloxone, and make warm hand-offs to other treatment providers as part of the community transition.

#### Output:

- Screen at least 50 detainees annually.
- Provide didactic services to at least 24 detainees per month.
- Refer at least 25 detainees to further services to continue treatment and recovery services to either MAT programming, the local alcohol and drug abuse department, or mutual help.

#### **Funding Request:**

• Counselor salary \$56,555

Cola @ 3% \$ 1,697
Fringe \$20,388
Security for Program \$25,000
Educational Materials \$ 1,500
Training and Travel \$ 1,000
Certification Fees \$ 250
Office Supplies \$ 500
Telephone & Service \$ 3,600
Liability Insurance \$ 1,000

Total Cost: \$111,490 Admin Costs: \$5,575 Carryover: \$100,681 Total Requests: \$16,384

# 6. a <u>Prevention- Prevent of Overdose Deaths and Other Harms- (New):</u> Strategy: Funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or strategies that connect at-risk individuals to behavioral health services and supports

*Issue:* Per the DAODAS Just Plain Killers website (Most current data), Beaufort County saw a 25% increase in opioid deaths, a 31.47% increase in fentanyl-related deaths, a 5% increase in opioid prescriptions prescribed, but no increase in the amount of emergency medical services use of Naloxone in 2021 compared to 2020. The 2021 SEOW report indicated fewer Beaufort County 11<sup>th</sup> graders than previous studies would be objectionable to peers' using substances or unlawfully obtaining or using prescription drugs. Therefore, it is logical to be concerned about a heightened risk for opioid misuse by adolescents into adulthood.

The previous Beaufort County Administrator believed enhancing prevention in the Beaufort Community was necessary to ward off opiate misuse by adolescents and young adults. Beaufort County applied for \$150,000 in funding in the second cycle of GPS applications and was awarded. However, given some administrative issues with the plans for using the funds, the fiscal agents of the funds determined the funds would not be used. Therefore, they are all carried over, and a new strategy is submitted.

Implementation: The local alcohol and drug abuse department will expand the Prevention Department by hiring a new FTE (Opioid Prevention Coordinator) to provide evidence-based program guidance for substance use prevention education in schools, public education, and social media campaigns. The prevention staff will also monitor ODMAP, partner with the coroner's office, use real-time data from overdose fatalities, and provide prevention education, including how to use Naloxone in overdose "hot spots" throughout Beaufort County.

Materials needed for this preventionist will include using a harm reduction mobile van. Then, prevention and harm reduction outreach into the community will occur. The funding for the van will cover the Cost of the vehicle, supplies, vehicle retrofitting (slide-out table, vehicle wrap), safety materials, prevention materials, and signage. The vehicle is estimated to cost \$70,000 from the SC Preferred Vendor's List. The additional supplies and retrofitting will cost an estimated \$30,000.

#### Output:

- 48 outreach events annually
- 20 school events
- Map Beaufort County Opioid Abatement Strategies and share with leadership and community partners
- 24 Social Media Advertisements Annually

#### **Funding Request:**

•	Prevention salary	\$	60,000
•	Cola @ 3%	\$	1,800
•	Fringe	\$	21,630
•	Van & Supplies	\$	100,000
•	Educational Materia	ls	\$ 5,000
•	Social Media Fees: \$		350
•	Training and Travel	\$	1,000
•	<b>Prevention Fees</b>	\$	250
•	Office Supplies	\$	500
•	Liability Insurance	\$	1,000

Total Cost: \$191,530 Admin Costs: \$ 9,577 Carryover: \$150,000 Total Requests:\$ 51,107

## 6. b <u>Strategy: Prevention of overdose deaths and other harms (New): </u>Strategy: Supporting screening for fentanyl in routine clinical toxicology testing.

Issue: In 2021, the Beaufort County Coroner's Office reported 1,820 deaths. The population of Beaufort County increased by 21% since that time, according to US Census data. An increase in population also increases productivity in the coroner's office. 2400 deaths in Beaufort County is estimated for 2024. The increasing demand for coroner services also means an increase in costs for toxicology, when deemed appropriate. A RANDOX Toxicology analyzer is used by Beaufort County to obtain toxicology results. Like urine drug screens, the more specificity desired, the higher the costs. Beaufort County is using a more inexpensive reagent (MultiStat), which does not yield the desired results in the opioid overdose era. The desired reagent to use is TopPlex. Also, the coroner sometimes runs out of the reagent and relies on sending off labs to NMS for both preliminary and confirmation.

This can 6-8 weeks. Therefore, the current capacity to have reliable toxicology data on demand for opioid abatement purposes is sub-par. Having the financial resources for more test kits (TopPlex) on hand and the more expensive test kits is desired to have the best available rapid test information to make community interventions.

*Implementation:* Improve the integrity and reliability of real-time data through TopPlex reagent testing, so targeted outreach, education, and naloxone distribution to reverse opioid overdoses for family members and other community members in Beaufort by the Prevention Outreach Coordinator.

#### Output:

- All suspected overdoses have TopPlex testing.
- Coroner sharing <u>all</u> rapid-testing data associated with the Prevention Outreach
  Coordinator, according to a Business Associate Agreement executed between the
  Beaufort County Coroner's Office and the Beaufort County Alcohol and Drug Abuse
  Department.
- Prevention outreach is conducted either with decedent survivors or in the vicinity of opioid overdose locations ("hotspots") within 72 hours of rapid test results detecting opioid or Xylazine agents.

#### Funding requested:

• Budget \$1,242 per month vs \$315 or an increase of \$11,124 annually to the coroner's budget.

Total Cost: \$11,124 Admin Costs: \$ 556 Carryover: NA Total Requests: \$11,680

#### 7. <u>Prevention: Strategy: Funding for Community Drug Disposal Programs- (New)</u>

Issue: Beaufort County's Prevention Department has been distributing Deterra Bags at community events to promote the safe disposal of unused and expired medications for years. The bags are given away at the two National Prescription Take Back Events, to patients at the local alcohol and drug abuse authority, and the community at other prevention events. The SC DAODAS paid for the items. However, DAODAS's next budget eliminates the expenditure and places it on the prevention departments at the local alcohol and drug abuse authority. Without the use of SCORF funds, this initiative will end.

*Implementation:* Beaufort County will equip the mobile vehicle with Deterra Bags to do giveaways at community events. The rest of the Prevention Department will give these items away at National DEA Prescription Drug Take Back Days and naloxone training events.

#### Output:

• 1,400 Medium- or Extra-Large Deterra Bags will be distributed by the Prevention Department annually.

#### **Funding Request:**

- 8 Cases Medium Deterra Bags @ \$856 per case = \$6,848 (Free Shipping)
- 2 cases (40) Extra-Large Deterra Bags @\$549 per case = \$1,098
- Tax= \$557

Total Cost: \$8,503 Admin Costs: \$425 Carryover: NA Total Request: \$8,928

8. <u>Provide Funding for Media Campaigns to Prevent Opioid Use(New)</u> Strategy: Funding for media campaigns to prevent opioid use (similar to the FDA's Real Cost" campaign to prevent youth from misusing tobacco)

*Issue:* Beaufort County has no advertising resources to fund media campaigns to prevent opioid misuse, corrective advertising, or affirmative public education campaigns based on evidence to support anti-stigma.

Implementation: Beaufort County Alcohol and Drug Abuse Department will develop a media campaign and create higher visibility with "Google Click." The platform will have resource information and evidence-based information. Advertisements will be created for cineplexes and the drive-in theater to raise awareness of opioid dangers and community resources.

#### Output:

- Develop and deploy ads in at least two publications, the drive-in movie theater, and the Bluffton Cinema, to run quarterly.
- Analytics to exceed 10,000 impressions from aggregated advertising.

#### **Funding Request:**

- Drive-in and Movie Ads @ \$6,000 x4= \$24,000
- Google Click Campaign \$1,000 per month x12 months = 12,000

Total Cost: \$36,000 Admin Costs: \$1,800 Carryover: NA Total Request: \$37,800

9. <u>Leadership, Planning, and Coordination</u> *Strategy*: Evidence-based collection and research analyzing the effectiveness of the abatement strategies within Beaufort County

*Issue:* There is no funding source for managing SCORF funds and projects. Applications, community partnership funding requests, and other evaluation and deliverables require contracting for assistance.

*Implementation:* Invest in the infrastructure of staffing at government or not-for-profit agencies to support collaborative, cross-system coordination to prevent overprescribing, opioid misuse, or overdoses, treating those with opioid use disorders, and supporting efforts to build systems to alleviate other problems in Beaufort County associated with substance misuse.

#### Output:

- Manage data points and costs associated with opioid abatement strategies.
- Complete comprehensive community reports for SCORF and the county to analyze practical outputs and outcomes associated with new and existing programs involved in opioid abatement strategies.

#### **Funding Request:**

• Contracted Consultant @ \$80 per hour x 30 hours monthly or \$28,800 annually.

#### **Total Cost**

Total Cost: \$28,800 Admin Costs: \$1,440 Carryover: NA Total Request: \$30,240

## 10. Expansion of Warm Hand-off Program and Recovery Services (Continuation) Strategy: Broaden the scope of recovery services to include co-occurring SUD or mental health conditions

Issue: Beaufort County's Good Neighbor Free Medical Clinic operates because there are pockets of extreme poverty despite the county's wealth. In Beaufort, where the clinic works, 21% of the citizens live below the federally established poverty guideline standards. Poverty enhances health disparities, and a startling number of individuals served at the clinic present with addiction and opiate issues, as well as co-occurring mental health issues.

During the last funding cycle, adding personnel, SBIRT Training, and developing warm hand-off protocols enabled the clinic to focus on addiction, mental health issues, and other wrap-around services. The clinic was able to have 38 staff trained in SBIRT, 17 medical staff with prescription authority was trained in opioid prescription best practices, and 60 staff were all trained on the use of Naloxone and how to respond to an overdose. After the training, 365 SBIRT screenings occurred, which resulted in 21 patients connected to addiction counseling (may have resulted in MAT, but unknown), 14 patients related to mental health counseling, and two patients connected to safe, sober housing.

*Implementation:* The Free Clinic wants to continue employing personnel charged with this initiative to make funds available for MAT and provide necessary transport to where warm hand-offs were made to increase the likelihood of a linkage. Furthermore, there is a fee for Service to do screenings and to have Alan Lyme return to do a refresher SBIRT training for existing and new staff to ensure SBIRT screenings are evidence-based.

#### **Funding Requests:**

Salaries & Fringe \$22,941 SBIRT Training \$5,000 Program Implementation \$44,470

(Includes medical screenings, drug screens,

MAT for 20 patients, transportation, and SBIRT)

#### Output:

- 20 patients provided MAT Services
- 25 patients were provided with transportation
- 240 patients provided SBIRT
- All staff are provided with SBIRT Training/Refresher

Total Cost \$72,411
Admin Costs \$3,621
Carryover NA
Total Request \$76,032

#### **Total Budget:**

Strategy 1. \$ 38,845 \$185,100 Strategy 2. \$105,000 Strategy 3. \$ 26,250 Strategy 4. \$ 16,384 Strategy 5. Strategy 6. a \$ 51,107 Strategy 6. b \$ 11,680 8,928 Strategy 7. \$ 37,800 Strategy 8. \$ 30,240 Strategy 9. Strategy 10. \$ 76,032

SubtotalTotal \$587,366

Minus Interest 4,760 (Interest was accrued on carryover. The application system would not let me reflect this. Therefore, the amount below is the actual request.)
Total Requested: \$582,606

Respectfully Submitted: SWD

#### **ITEM TITLE:**

APPROVAL TO DISPERSE ALLOCATED ARPA-GOOD NEIGHBOR FUNDS TO THE TOWN OF BLUFFTON

#### **MEETING NAME AND DATE:**

Finance, Economic Development, and Administration Committee Meeting April 15, 2024

#### PRESENTER INFORMATION:

Jared Fralix – Assistant County Administrator

5 Minutes

#### **ITEM BACKGROUND:**

ARPA funds were accepted and budgeted by Beaufort earlier in 2022. One program is named the "Good Neighbor Program". It is an allocation of \$500,000 per municipality within Beaufort County.

#### **PROJECT / ITEM NARRATIVE:**

The Good Neighbor Program was an approved use of the ARPA funds as accepted by County Council in early 2022. The Good Neighbor Program was established in an effort by the County to support the municipalities' recovery efforts with supplemental ARPA funds.

Requests for these funds must be made by the Municipalities to ensure that the initiatives/programs funded in the municipalities conform with ARPA guidelines. County staff will be tasked with reviewing requests prior to submission and monitoring uses and expenditures after disbursement, as required by the Federal reporting requirements.

The Town of Bluffton has requested their \$500,000 in order to support their share of the Stoney Creek Sewer project with BJWSA and the County. Request letter is attached. The use of ARPA funds for sewer infrastructure is expressly allowable.

#### **FISCAL IMPACT:**

ARPA funds have been allocated.

This request is for \$500,000 and constitutes their full allocation.

Funds remaining in the Good Neighbor Fund after this dispbursement are: \$566,000. Remaining funds are allocated to Hardeeville and Yemassee.

#### STAFF RECOMMENDATIONS TO COUNCIL:

Staff recommends approval of these requests.

#### **OPTIONS FOR COUNCIL MOTION:**

Motion to approve or deny staff recommendation move this request forward to full council on April 22, 2024.

Next Step — Move forward to County Council for a motion to approve or deny staff recommendation to disperse and monitor ARPA GOOD NEIGHBOR PROGRAM funds.

Larry Toomer

Mayor

Dan Wood

Mayor Pro Tempore

Stephen Steese

Town Manager



Fred Hamilton
Bridgette Frazier
Emily Burden
Marcia Hunter

Town Clerk

March 21, 2024

John Robinson Interim Beaufort County Administrator 100 Ribaut Road Beaufort, SC 29902

John,

I would like to thank Beaufort County for setting aside a portion of your ARPA funding allocation for each municipality in the County as part of your "Good Neighbor" program. I understand that other municipalities have requested some or all of their portion of funds; however, the Town of Bluffton has held off on our request until we had a better understanding of what projects the funds would best support.

I would like to officially request the \$500,000 set aside for the Town of Bluffton under the Good Neighbor funds. These funds would go to assist with the completion of Stoney Creek Sewer Project. This project is a partnership between Beaufort County, Beaufort Jasper Water and Sewer Authority (BJWSA), and the Town of Bluffton to install sewer lines to allow failing septic systems in the Stoney Creek area to be decommissioned. These failing septic systems sit at the head of the May River and are affecting the overall health of this portion of the May River. This project would qualify under the ARPA rules by expanding and providing water and sewer service to over 100 properties within the project area.

The total estimated cost for the project is approximately \$7,900,000, with \$5,925,000 coming from a South Carolina Infrastructure Investment Program (SCIIP) grant. The Town of Bluffton's remaining contribution is estimated to be just under \$1,000,000.

I have attached the Intergovernmental Agreement (IGA) between all parties for your reference. The IGA outlines the partnership, grant, budget, schedule, map, and other details of the overall project. Let me know if you would like anything additional for this request.

Sincerely,

Stephen Steese Town Manager



## BEAUFORT COUNTY COUNCIL AGENDA ITEM SUMMARY

#### **ITEM TITLE:**

RECOMMEND APPROVAL TO COUNCIL OF A REQUEST TO PURCHASE (1) NEW 36 PASSENGER BUS MODEL: STARCRAFT ALLSTAR XL (\$188,760)

#### **MEETING NAME AND DATE:**

Finance, Admin and Economic Development Committee Meeting 04/15/2024

#### PRESENTER INFORMATION:

Dale Butts - Assistant County Administrator: Finance

Eric Brown- Director of Parks and Recreation

(10 Minutes)

#### **ITEM BACKGROUND:**

This new bus will replace Asset #22916, a 2004 Chevy Express 3500 (15 Passenger) Van, with 64,298 miles. This van was taken out of service in 2022. However, it was repurposed for spare parts to ensure the continued functionality of other buses that have not yet been replaced. It needs various major repairs that are not cost-effective due to its age and the cost of those repairs. Despite its condition, it has exceeded its recommended replacement schedule.

#### **PROJECT / ITEM NARRATIVE:**

Purchase of One (1) New 36 passenger bus: Star Craft All Star XL to replace Asset 22916

#### **FISCAL IMPACT:**

A quote has been provided from Model 1 in the amount of \$188,760. The funding source is Parks and Recreation Capital Fund 2662 in line item: 2662-60-0000-54200. The balance in this line item currently is \$442,000.

#### STAFF RECOMMENDATIONS TO COUNCIL:

Based on the age, cost, mold, and additional needs of Parks and Recreation, the Beaufort County Fleet Manager recommends approving the purchase of a new 36-passenger bus. The selected replacement bus will serve multiple functions within Parks and Recreation. Our aim is to provide an updated and safe transportation option for citizens, while also enhancing its appearance to make it visually appealing to the community. By investing in an updated and visually appealing bus, we strive to offer a positive and enjoyable transportation experience for citizens, prioritizing their safety, satisfaction, and minimizing downtime.

#### **OPTIONS FOR COUNCIL MOTION:**

Motion to either approve/deny the recommendation to purchase a 36 Passenger Bus.

Next Steps - A Majority Vote for Acceptance by Committee would move item forward to Council for purchase.





#### VEHICLE/EQUIPMENT EVALUATION SUMMARY REPORT

DESCRIPTION				
/ehicle /Equipment S/N <u>1</u>	IGBJG31U541206275	Asset: 22916		
Department: Park and F	Recreation	Make:Chevy	Model:Express3500	
'ear: <u>2004</u>	Mileage/Hours:64,298			
JTILIZATION .				
ears of Service20	Useful Life <u>5</u>	Over/L	Jnder Threshold: <u>15</u>	
//lileage/Hours <u>64,298</u>	Mileage/Hour Threshold	100,000	Over/Under Threshold: -35,702	
Purchase Cost: \$37,907	Repair Cost: EST.18	3,500 Replacem	nent Cost: 190,000	
Date of Evaluation:04/04	/2024 Evaluator: Gre	g Patterson		
	Dia	!-	Fatimental Danain Coat	

System	Diagnosis	Estimated Repair Cost
Engine	Misfires runs rough	\$4,000
Transmission	Bad needs a tranmission	est. \$7,000
Drive Line	Rear end locked up	\$2,500
Differential		
Exhaust	Rusted off	\$2,000
Pumping System Hydraulic System	Bakes lines leaking	\$1,800
Electrical System	Missing Fuse Box	Unknown
Brakes	Siezed brake system	\$2,000
Tires	Need to Replaced	\$1,000
Body	Missing parts	Unknown
Interior/Exterior	Interior full of mold	Unsafe
Front End/Suspension Air Conditioning	Rusted/Inoperable	
Other		
Total Estimated Repair Cost		

#### **Evaluators Comments/Recommendations:**

Asset 22916 has fulfilled it purposed during its use for Parks and Recreation programs. It would be more cost-effective and time efficient to replace the bus with a new model rather than repairing it. The bus has been used for spare part to maintain other busses.

189,437.00



Date: 4/4/2024

### **GEORGIA DOAS**

99999 - SPD - SPD0000212 - 0005 FY 2023

	Preparer:	Karla Lynch
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**Base Model** 

Startrans

Options: \$ -

**Unpublished Options:** \$ (677.00)

**Base Model Price:** \$

		wc	Total #	CDL
Vehicle Length	Lift Position	Positions	Passengers	Required
40	Rear	2	36	Yes

QTY Vehices: 1

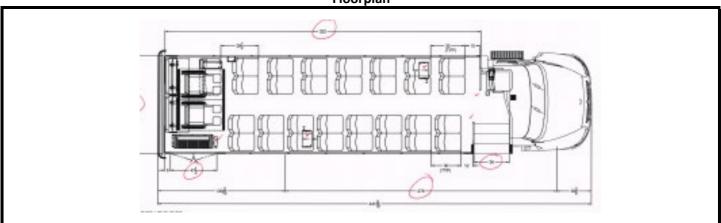
Total Contract Price: \$

188,760.00

	Per Vehicle Price: \$	188,760.00
Customer Info		

Customer:	Beaufort County
Address:	120 Shanklin Rd. Beaufort, SC 29906
Contact:	Todd Davis
Office Phone:	843-812-7572
Mobile Phone:	
E-Mail:	todd.davis@bcgov.net





#### Chassis

Ford F650

6.7 V8 Diesel

10-Speed Automatic Transmission

300 HP

Power-assisted hydraulic front & rear disc brakes

4-wheel anti-lock brake system

200 Amp Alternator

Dual, maintenance-free batteries

55 Gallon Fuel Tank

Power steering with tilt wheel

HD gas shock absorbers

Front & rear stabilizer bars

LT225/75Rx22.5 All Season Tires

Dual rear wheels

OEM chassis dash heater, A/C, and defroster

Chrome front bumper

#### **Body**

Forest River body

Pre-painted white galvanized steel sidewalls and skirts

Fiberglass front and rear caps

One-piece seamless FRP roof

120K BTU rear A/C system

Gerflor Sirius Graphite flooring

Yellow step nosing

Rear mud flaps

65K BTU rear heater

Electrically actuated passenger entry door with full length glass

Mid High rigid passenger seats

#### **ADA**

Rear wheelchair lift (aft of rear axle)

Braun NL-919-2 wheelchair lift (800# capacity)

ADA interlock/fast idle

Two (2) Q'Straint QRT-MAX Slide 'N Click wheelchair securements with combo lap/shoulder belt

#### Safety

5 lb. fire extinguisher

First aid kit

Emergency triangle kit

Backup alarm

Backup camera system with 7" monitor

Item 11.

#### **OPTIONS**

Qty	Description	FY 2023 List Price	QTY Total
	Delivery Charge Per Mile	\$ 2.50	\$ -
	Starcraft Allstar Body	-\$1,000.00	\$ -
	Install Front Destination Sign Window and Overhead Access Door for Customer Instal	\$762.50	\$ -
	Install Side Destination Sign Window w/Structure for Customer Installed Sign	\$431.25	\$ -
	Door Activated Interior Lights	\$62.50	\$ -
	Jensen JHD36AB AM/FM/CD/Clock Blue Tooth/USB Enabled PA Ready 4 Spkrs	\$731.25	\$ -
	Exterior Passenger Entrance Door Key	\$118.75	\$ -
	Double W/C Doors w/ Windows, LED Interior Lights, Leaf Spring, LED Exterior Lighting	\$ 1,562.50	\$ -
	Stanchion and Modesty Panel Behind Driver	\$ 218.75	\$ -
	Driver Seat Cover - Level 3 Regions or any Level 3 Combo	\$ 125.00	\$ -
	Seat Cover - Level 3 Regions or any Level 3 Combination (Sherpa/Shire N/A)	\$ 56.25	\$ -
	Anti-Vandal Grab Handle, Black Ea on:	\$ 81.25	\$ -

Item 11.

#### **CBS UNPUBLISHED OPTIONS**

Qty	Description	FY 2023 List Price	QTY Total	
	PDI/Make Ready/Vehicle Detail	\$ 1,500.00	\$	-
1	In Stock IC Chassis Cummins 6.7 L Diesel	\$ (677.00)	\$	(677.00)
-	Subtotal CBS Unpublished Options		\$	(677.00)







2023

## **STARCRAFT**

### Allstar XL 36'

Prepared for

#### **Beaufort County**

#### **CONTACT**

Date Issued: 4/4/2024 Name: Karla Lynch Phone: 470-373-7479 Email: klynch@model1.com



Whether you need to fill a spot in your fleet or create an entirely new vehicle, your Model 1 experts have a single top priority: you. With a clear understanding of your needs, we find ways to deliver — starting with deep relationships all the way back at the manufacturer level. And with the nation's largest inventory of commercial vehicles, you'll never be short on the best choices to make for your business.

#### SALES EXPERIENCE

550+ Years of Collective Bus Sales Experience Servicing Over 1,500 Customers Annually

#### **COMPETITIVE PRICING**

Volume Discounts Fixed Contract Pricing

#### **IN-HOUSE FINANCING**

Seamless Transactions Flexible Solutions

#### **NATIONWIDE NETWORK**

21 Full-Service Locations Nationwide Partners with 25+ Top Manufacturers



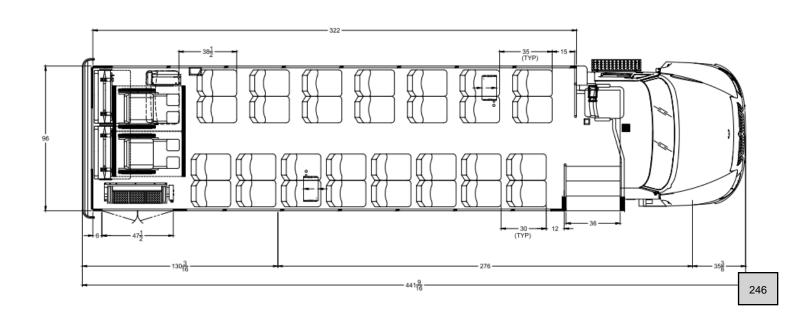
## **IMAGES & FLOORPLAN**













## **SPECIFICATIONS**

#### **CHASSIS**

- · 2023 International T/C Cummins ISB 240 HP
- · Hydraulic Brakes Air Suspension
- · Engine: 7.3 L
- · Fuel Type: Diesel
- · GVWR: 23,500

#### **EXTERIOR**

- · Exterior Color: White
- Wheelbase: 276"
- · Front Destination Sign Window and Overhead Access Door
- · Side Destination Sign Window w/ Structure
- Passenger Door 36" Electric
- · Double W.C. Doors w/ Windows

#### **INTERIOR**

- · 96" Wide Exterior Body
- · Yellow step nosing per step (4)
- · Driver Area: Grey padded vinyl
- · Walls and Ceiling: Grey FRP
- · Flooring: Gerflor Sirius Anthracite Grey
- Ceiling Grab Rail on Both Sides
- · 1 ¼" Dual Entry Grab Rails Parallel to Entrance Steps (Both Sides)
- · Left Hand Entry Vertical Grab Rail 1 1/4"
- Stanchion and Modesty Panel at Entry Door & Behind Driver

#### A/C & HEAT

- A/C System: TA77R90 Super 13 125K BTU, TA77 EVAP, R90 RM COND,
   (2) 13 CID COMP
- · Heater: SMART Heater, 70K BTU Floor Mounted

#### LIGHTING

- · Door activated Interior Lights
- · Surface Mount LED Entry Door Exterior Light
- · LED Mid-Ship Turn / Marker Lights
- · 4" Grommet Mount LED Exterior Lighting

#### **ELECTRICAL**

· Intermotive Flex Tech Electrical System

#### **AUDIO / VISUAL**

- Jensen AM/FM/MP3/USB/Sirius XM with clock & 4 speakers PA ready
- · Handheld Mic & Clip Added to PA Ready Radio
- · Additional Speakers, Each (2)
- · Rosco back-up camera system w/ 7" rearview monitor/mirror combo

#### WHEELCHAIR ACCESSIBILITY

- · 34" x 54" Braun Century NCL 1000 wheelchair lift located in the rear of the unit
- Intermotive Gateway Transit Fast Idle with lift interlock
- Max Retractor Tie Down, Combo Lap/Shoulder (2)
- Q-Straint Storage Pouch (2)

#### **ACCESSORIES**

- · Priority seating sign \*\*Required for ADA Compliance\*\*
- · Wheelchair Decal

#### SAFETY

- Back-up alarm SAE type C 97 db(A)
- Fire Extinguisher, First Aid Kit, Reflective Triangles

#### **PASSENGER SEATING OPTIONS**

- · 36 Ambulatory, 0 Wheelchair
- · 28 Ambulatory, 2 Wheelchair

#### **SEATING**

Passenger Seating:

- · Seat Fabric: Level 6 Duratex Jordan Blue
- · Mid high, Double Seat (15)
- · Econo Flip, Double (2)
- · Foldaway Seat, Double AM Benchback (1)
- Seat Belt, Non-Retractable (36)
- · Seat belt loop Each (34)
- Anti-vandal grab handle on aisle seats (15)

Driver Seating: OEM Seating





## WARRANTY

Manufacturer Warranty	Starcraft 5-year / 100,000 miles
Chassis Warranty	See Attached

All vehicles come with warranty, but Model 1 offers more value without the added cost.

Our coverage and support come with each of our new vehicles — *standard*.

#### WE PROCESS ALL THE WARRANTY REGISTRATIONS

We register all of your bus parts for you, no more pesky warranty cards to fill out. This includes *all* parts, wheelchair lift, electronics, HVAC, etc.

#### WE HANDLE ALL THE PAPERWORK

We administer and coordinate any warranty work. You make one call to our warranty department, and they take it from there.

#### REPAIR FACILITIES NEAR YOU

When warranty work is needed, we use service repair facilities near the bus location. We have over 3200 authorized centers and growing. You will never have to drive far to get repairs completed.

#### NO MORE CLAIM FORMS

Model 1 handles all parts of the claim process, you will have no out of pocket expenses, no reimbursements, and the service facility will be paid directly by us.

#### LONGER WARRANTY PERIOD

We have negotiated extended periods for the units we sell. Unprecedented 60 month/100,000 mile bumper-to-bumper warranty on the Starcraft bus upfit.



## **PRICING**

DESCRIPTION	AMOUNT
Bus Cost	\$188,760.00
FOB Beaufort, SC	Included
Total	\$188,760.00

 $<sup>\</sup>hbox{*Pricing does not include DMV, title, or licensing. This quote is valid for 30 days from date is sued.}$