

Eustace Accountancy Group PA 605 Calhoun Avenue

Greenwood, SC 29649 leustace@cewcpas.com Phone: (864)388-9101 | Fax: (864)388-0781

May 06, 2022

The Lander Foundation
The Lander Foundation
C/O Lander Univ 320 Stanley Avenue
Greenwood, SC 29649

The Lander Foundation:

Enclosed is the 2020 federal return for a tax-exempt organization, prepared for The Lander Foundation from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-EO, IRS e-file Signature Authorization for an Exempt Organization.

The federal return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (864)388-9101.

Sincerely,

Caitlynn Packard Eustace Accountancy Group PA

Eustace Accountancy Group PA

605 Calhoun Avenue Greenwood, SC 29649 leustace@cewcpas.com Phone: (864)388-9101 | Fax: (864)388-0781

This letter serves to inform you of this firm's policies of disclosure and privacy with respect to tax return information in connection with the tax services engagement.

DISCLOSURE POLICIES

We shall not knowingly or recklessly disclose the information you furnish us except as provided by law. We may disclose tax return information to an officer or employee of the Internal Revenue Service.

If the firm provides software to you that is used in connection with the preparation or filing of your tax return, the tax return preparer may use your tax return information to update your software for the purpose of addressing changes in IRS forms, e-file specifications and administrative, regulatory and legislative guidance, or to test and ensure the software's technical capabilities without the taxpayer's consent. In addition, an officer, employee, or member of the firm may use the tax return information, or disclose the tax return information to another officer, employee, or member of the same firm, for the purpose of performing services that assist in the preparation of, or assist in providing auxiliary services in connection with the preparation of, the taxpayer's tax return, except with respect to such individuals who are located outside the United States or any territory or possession of the United States unless you give consent to such use or disclosure.

In general, an officer, employee, or member of the firm may disclose tax return information to another tax return preparer who is not an officer, employee, or member of the firm located in the United States (including any territory or possession of the United States) for the purpose of preparing or assisting in preparing a tax return, or obtaining or providing auxiliary services in connection with preparation of any tax return, so long as the services provided are not substantive determinations or advice affecting the tax liability reported by taxpayers. A substantive determination involves an analysis, interpretation, or application of the law. The authorized disclosures permitted include one tax return preparer disclosing tax return information to another tax return preparer for the purpose of having the second tax return preparer transfer that information to, and compute the tax liability on, your tax return by means of electronic, mechanical, or other form of tax return processing service. The authorized disclosures permitted also include disclosures by a tax return preparer to an authorized IRS e-file provider for the purpose of electronically filing the return with the IRS. Authorized disclosures also include disclosures to a second tax return preparer for the purpose of making information concerning the return available to the taxpayer. This would include, for example, whether the return has been accepted or rejected by the IRS, or the status of your refund. The firm may not disclose tax return information to a person under contract with the tax return preparer in connection to the programming, maintenance, repair, testing, or procurement of equipment or software used for the purposes of tax return preparation only to the extent necessary for the person to provide the contracted services, and only if the tax return preparer ensures that all individuals who are to receive the disclosures of tax return information receive a written notice that informs them of the applicability of §§6713 and 7216 to them and describes the requirements and penalties of such sections.

In preparing a tax return of a second taxpayer, the firm may use, and may disclose to the second taxpayer in the form in which it appears on the return, any tax return information that the tax return preparer obtained from you if the second taxpayer is related to you, and your tax interest in the information is not adverse to the second taxpayer's tax interest in the information. However, you may expressly prohibit such disclosure or use. For these purposes, a taxpayer is related to another taxpayer if they have any one of the following relationships: husband and wife, child and parent, grandchild and grandparent, partner and partnership, trust or estate and beneficiary.

The disclosure limitations do not apply to the order of any court of record, federal, state, or local; a subpoena issued by a grand jury, federal or state; a subpoena issued by the United States Congress; an administrative order, demand, summons, or subpoena that is issued in the performance of its duties by any federal agency, or a state agency, body, or commission charge under the laws of the state or a political subdivision of the state with the licensing, registration, or regulation of tax return preparers; a written request from a professional association ethics committee or board investigating the ethical conduct of the tax return preparer; or a written request from the Public Company Accounting Oversight Board in connection with an inspection under §105 of such Act, for use in accordance with such Act. The firm may disclose tax return information to an attorney for purposes of securing legal advice; to an employee of the Treasury Department for the use in connection with any investigation of the tax return preparer (including investigations relating to the tax return preparer in its capacity as a practitioner) conducted by the IRS or the Treasury Department; or to any officer of a court for use in connection with proceedings involving the tax return preparer (including proceedings involving the tax return preparer in its capacity as a practitioner), or the return preparer's client before the court or before any grand jury that may be convened by the court.

The firm may use your tax return information, or disclose the information to another officer, employee, or member of the firm, consistent with applicable legal and ethical responsibilities, who may use the tax return information for the purpose of providing other legal or accounting services to you. As an example, an accountant who prepares a tax return for you may use the tax return information, or disclose it to another officer, employee, or member of the firm, for use in connection with the preparation of books and records, working papers, or accounting statements or reports for you. In the normal course of rendering the accounting services to you, the accountant may make the tax return information available to third parties, including stockholders, management, suppliers, or lenders, consistent with the applicable legal and ethical responsibilities, unless you direct otherwise.

The firm may, consistent with the applicable legal and ethical responsibilities, take your tax return information into account, and may act upon it, in the course of performing accounting services for another client. This is permissible when the information is, or may be relevant to the subject matter of the accounting services for the other client, and consideration of the information by those performing the services is necessary for the proper performance of the services. In no event, however, may the tax return information be disclosed to a person who is not an officer, employee or member of the accounting firm, unless the disclosure is exempt from the disclosure provisions.

If, after furnishing tax return information to the firm, you die or become incompetent, insolvent, or bankrupt, or your assets are placed in conservatorship or receivership, the firm may disclose the information to your duly appointed fiduciary of your estate, or to the duly authorized agent of the fiduciary.

The uses and disclosures with respect to software preparation, other tax return preparers within the firm, and tax return preparers located outside the United States, as well as the disclosures to other tax return preparers within the United States and the disclosures to programming and maintenance contractors permitted above apply to the disclosure of any tax return information in the preparation of, or in connection with the preparation of, any tax return under the law of any state or political subdivision thereof, of the District of Columbia, of any territory or possession of the United States, or of a country other than the United States. The nondisclosure and non-use provisions do not apply to the use by the firm of any tax return information in the preparation of, or in connection with the preparation of any tax return of yours under the law of any state or political subdivision thereof, of the District of Columbia, of any territory or possession of the United States, or of a country other than the United States. They also do not apply to the disclosure or use by any tax return preparer of any tax return information in the audit or, or in connection with the audit of, any tax return of yours under the law of any state or political subdivision thereof, the District of Columbia, or any territory or possession of the United States.

The firm may use and disclose tax return information that you provide to us to pay for tax preparation services to the extent necessary to process or collect the payment. For example, if you give us a credit card to pay for tax preparation services, the firm may disclose your name, credit card number, credit card expiration date, and amount due for tax preparation services to the credit card company, as necessary, to process the payment. Any tax return information that you did not give us for the purpose of making payment for tax preparation services may not be used or disclosed by the firm without your prior written consent, unless otherwise permitted under another provision.

The firm may retain your tax return information, including copies of tax returns, in paper or electronic format, prepared on the basis of the tax return information, and may use the information in connection with the preparation of another of your tax returns or in connection with an examination by the Internal Revenue Service of any tax return or subsequent tax litigation relating to the tax return. The firm may compile and maintain a separate list containing solely the names, addresses, email addresses, and phone numbers of taxpayers whose tax returns the firm has prepared or processed. This list may be used by the compiler solely to contact the taxpayers on the list for the purpose of offering tax information or additional tax return preparation services to such taxpayers. The firm may not transfer the taxpayer list, or any part thereof, to any other person unless the transfer takes place in conjunction with the sale or other disposition of the firm's tax return preparation business. A person who acquires a taxpayer list, or part thereof, in conjunction with a sale of other disposition of a tax return preparation business is also subject to these provisions with respect to the list. The term list includes any record or system whereby the names and addresses of taxpayers are retained. These provisions also apply to the transfer of any records and related papers.

The firm may use, for the limited purpose specified, tax return information to produce a statistical compilation of data. The purpose and use of the statistical compilation must relate directly to the internal management or support of the firm's tax return preparation business. The firm may not disclose or use the tax return information in connection with, or in support of, businesses other than tax return preparation. The firm may not disclose the compilation, or any part thereof, to any other person unless disclosure of the statistical compilation is made in order to comply with financial accounting or regulatory reporting requirements, or occurs in conjunction with the sale or other disposition of the firm's tax return preparation business. A person who acquires a compilation, or a part thereof, in conjunction with a sale or other disposition of a tax return preparation business is subject to the same limitations with respect to the compilation as if the acquiring person has compiled it.

The firm may disclose your tax return information for the purpose of a quality or peer review to the extent necessary to accomplish the review. A quality or peer review that is undertaken to evaluate, monitor, and improve the quality and accuracy of a tax return preparer's tax preparation, accounting, or auditing services. A quality or peer review may be conducted only by attorneys, certified public accountants, enrolled agents, and enrolled actuaries who are eligible to practice before the Internal Revenue Service. Tax return information gathered in conducting a review may be used only for purposes of a review. No tax return information identifying a taxpayer will be disclosed in an evaluative reports or recommendations that may be accessible to any person other than the reviewer or the tax return preparer being reviewed.

The firm is not prohibited from the disclosure of any tax return information to the proper federal, state, or local official in order, and to the extent necessary, to inform the official of activities that may constitute, or may have constituted, a violation of any criminal law or to assist the official in investigating or prosecuting a violation of criminal law. A disclosure made in the bona fide but mistaken belief that the activities constituted a violation of criminal law is not subject to the nondisclosure and non-use rules.

In the event of incapacity or death of the tax return preparer, disclosure of the tax return information may be made for the purpose of assisting the tax return preparer or his legal representative (or the representative of a deceased tax return preparer's estate) in operating the tax return preparer's business.

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by the law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigtas.gov.

PRIVACY POLICY

CPAs, like all providers of personal financial services, are required by law to inform their clients of their policies regarding privacy of client information. CPAs have been and continue to be bound by professional standards of confidentiality that are even more stringent than those required by law. Therefore, we have always protected your right to privacy.

Types of Non-public Personal Information We Collect

We collect non-public personal information about you that is provided to us by you, or obtained by us with your authorization.

Parties to Whom We Disclose Information

For current and former clients, we do not disclose any non-public personal information obtained in the course of our practice except as required or permitted by law. Permitted disclosures include, for instance, providing information to our employees, and in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared.

Protecting the Confidentiality and Security of Current and Former Clients' Information

We retain records relating to professional services that we provide so that we are better able to assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your non-public personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

If you have any questions about our disclosure or privacy policies, please contact either of our offices and we will be happy to assist you.

Acknowledgement and General Information for 2020 **Entities That File Returns Electronically** Name(s) as shown on return Employer Identification Number THE LANDER FOUNDATION **-***7816 Entity address C/O LANDER UNIV 320 STANLEY AVENUE GREENWOOD, SC 29649 Thank you for participating in IRS e-file. 1. x 2020 8868-01 income tax return for Federal was filed electronically. The electronic filing services were provided by **Eustace Accountancy Group PA** 2. **x** income tax return was accepted on 11-15-2021 8868-01 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature. The submission ID assigned to this return is 5755502021319z123431 PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

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)

OMB No. 1545-0047 2020

Department of the Treasury

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

Open to Public

Intern	al Revenu	ue Service	► Go to w	/ww.irs.gov/Forn	n990 for instruction	ons and the lates	st inforn	nation.		inspection
A I	or the	2020 calendar y	ear, or tax year begin	ning	0	7-01 , 2020 , a	nd endii	ng	0 (5-30 , 20 21
B (check if a	pplicable:	C Name of organization TH	E LANDER FOU	JNDATION				D Empl	oyer identification number
	ddress c	hange	Doing business as TH	E LANDER FOU	UNDATION					57-0327816
1	lame cha	ange	Number and street (or P.0	O. box if mail is not deliv	vered to street address)		Room/sui	te	E Telep	hone number
$\overline{}$	nitial retu	rn	C/O LANDER UNI	V 320 STANL	EY AVENUE					(864)388-8350
$\overline{}$		n/terminated	City or town, state or prov			l			G Gros	s receipts
Η	mended				or foreign postar oode				0 0,00	9,691,187
∺			GREENWOOD, SC		LIODI BII			11/ 3	φ	
⊔ ′	ppiicatio	n pending	F Name and address of prir	·	WORLEY					for subordinates? Yes X No
			SAME AS C ABOV							es included? Yes No
		pt status: X 501) (insert no.)	4947(a)(1) or	527				st. See instructions
	Vebsite:		ANDER.EDU					H(c) Group 6		
		rganization: X Corp	poration Trust Asso	ociation Other	•	L Year of formation	on: 197	5 M S	State of leg	gal domicile: SC
Pa	rt I	Summary								
	1	Briefly describe t	the organization's missi	on or most signific	ant activities: <u>T</u>	O RECEIVE,	HOLD,	MANAGE	, INV	EST OR ARRANGE
•		FOR INVESTI	NG AND TO ACQU	IRE BY GIFT	, DEVISE, BE	QUEST, PURC	HASE,	OR OTH	ERWIS	E, AND USE
20		PROPERTY OF	ANY KIND AND	FUNDS IN FU	RTHERANCE OF	THE WELFAR	E OF 1	LANDER	UNIVE	RSITY.
rna										
Activities & Governance	2	Check this box ▶	if the organization	discontinued its o	perations or dispos	sed of more than 2	25% of it	ts net asse	ts.	1
Ğ	3	Number of voting	g members of the gove	rning body (Part V	'I, line 1a)				. 3	11
ο O	4	Number of indep	endent voting members	s of the governing	body (Part VI, line	1b)			. 4	11
itie	5	Total number of	individuals employed in	calendar year 20	20 (Part V, line 2a)				. 5	0
÷	6	Total number of	volunteers (estimate if r	necessary)					. 6	
ă	7a	Total unrelated b	ousiness revenue from I	Part VIII, column (C), line 12				. 7a	0
	ь		isiness taxable income							0
				<u> </u>				Prior Year		Current Year
	8	Contributions and	3,106	5 - 609	4,862,867					
ø	9		revenue (Part VIII, line					0,200	,,,,,,,	0
nu	10	-	ne (Part VIII, column (A	252	2,430	3,904,158				
Revenue	11		Part VIII, column (A), lin							
œ									2,766	924,162
	12		add lines 8 through 11 (I	•	` '	,		3,661		9,691,187
	13									1,338,946
	14					0				
S	15	•	ompensation, employee			0				
Jse			draising fees (Part IX, o		•		٠			0
Expenses	b	•	expenses (Part IX, col			533,044				
ш	17		(Part IX, column (A), lin			• • • • • • • •	٠	2,423	3,112	2,187,381
	18	•	Add lines 13-17 (must	•			٠ 📖	3,650	,689	3,526,327
	19	Revenue less ex	penses. Subtract line	18 from line 12 .				11	1,116	6,164,860
20							Begir	nning of Curre	ent Year	End of Year
sets	20	Total assets (Pa	rt X, line 16)				•	37,552	2,057	44,628,566
Net Assets or	21	Total liabilities (F	Part X, line 26)				٠ 📖	10,863	,930	10,324,614
_			nd balances. Subtract	line 21 from line 20	0			26,688	127	34,303,952
Pa	rt II	Signature I	Block							
			that I have examined this retur ion of preparer (other than offi				of my know	vledge and bel	lief, it is	
						,				
٥.		MIKE WO	RLEY							
Sig	n	Signature of o	officer						Da	ite
Her	е	MIKE WO	RLEY, EXECUTIVE	E DIRECTOR						
		Type or print i	name and title							
		Print/Type preparer	r's name	Preparer's signature		Date		Check	if	PTIN
Pai	t	Caitlynn 1	Packard					self-em	ployed	P01754958
Pre	parer	Firm's name	Eustace	Accountancy	Group PA		F	irm's EIN ▶		
	Only			oun Avenue	_		Р	hone no.		
	•			d sc 29649					864-	388-9101
May	the IRS	discuss this retu	m with the preparer sh		instructions)					X Yes No

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$

4e Total program service expenses ▶ 2,534,349

57-0327816

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 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		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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? 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			
	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		v
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		_ X
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,	10		
••	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i>			
	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		х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
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	· · ·			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
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		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	4-		
	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	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		
10	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		•
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_ X
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	19		v
20 a		20a		
zu a		20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_00		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
_	<u> </u>			

	990 (2020) THE LANDER FOUNDATION 57-03278	16	Р	age
Par	t IV Checklist of Required Schedules (continued)			ı
	Г		Yes	No
	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
	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		Х
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	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		Х
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
	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		х
	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		Х
	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		Х
	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		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		
L	"Yes," complete Schedule L, Part IV.	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	,	28c		3,7
20	"Yes," complete Schedule L, Part IV	29		X
	Did the organization receive more than \$25,000 in horizontal treasures, or other similar assets, or qualified	29		Х
	conservation contributions? If "Yes," complete Schedule M	30		•
	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	31		X
	Did the organization inquidate, terminate, or dissolve and cease operations: " res, complete scriedate N, rait1	31		Х
J <u>Z</u>	complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		Х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part L	33	x	
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		Λ	
	or IV, and Part V, line 1	34	x	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	-004		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	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		х
	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		х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	x	
Part				
. ui t	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			10	Y	

Part V 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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
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		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
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		Х
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?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	-		x
g 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	/ 11		
•	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 10b			
11	Section 501(c)(12) organizations. Enter:			
а	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			
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	-		
C	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 45	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		•
	excess parachute payment(s) during the year?	15		Х
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		v
10	If "Yes," complete Form 4720, Schedule O.	10		Х

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

. a.c v.	Covernation, management, and biologists to response to mice 2 among the bolow, and to a two
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
	Check if Schedule O contains a response or note to any line in this Part VI
Section A.	Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain 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		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
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		х
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	х	
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 Q	9		х
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		х
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	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
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 in Schedule O how this was done	12c	x	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		x
b	Other officers or key employees of the organization	15b		x
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► South Carolina			
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 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,			
	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			
	MIKE WORLEY (864)388-8350, C/O LANDER UNIV 320 STANLEY AVENUE, GREENWOOD, SC 29649			

Form 990 (2020)

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

E chock the bex in house the organization her any rota	10 a 0. ga <u>_</u>				<u> </u>	.,	•	ooo., aoo.o., o.		T
				(C	;)					
(A)	(B)	Position (do not check more than one				(D)	(E)	(F)		
Name and title	Average	١, ١				an one both an	1	Reportable	Reportable	Estimated amount
	hours	1	officer and a director/trustee)				compensation	compensation	of other	
	per week							from the organization	from related organizations	compensation from the
	(list any hours for	or d	Inst	Office	Key	emp	Forme	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	lirect	ittic	cer	em	hest oloye	mer			related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	e com				
	below	Istee	truste		ě	pens				
	dotted line)		96			Highest compensated employee				
						Ĭ				
(1) BOYD YARBROUGH	0.10									
DIRECTOR (NON-VOTING)		х						0	0	0
(2) JOHN CRAIG	0.10									
DIRECTOR		Х						0	0	0
(3) RICK_FLOWE	0.10									
DIRECTOR		Х						0	0	0
(4) HOLISA WHARTON	0.10									
DIRECTOR (NON-VOTING)		Х						0	0	0
(5) SANDY SINGLETARY	0.10									
DIRECTOR (NON-VOTING)		х						0	0	0
(6) RICHARD COSENTINO	0.10									
DIRECTOR (NON-VOTING)		х						0	0	0
(7) THEO LANE	0.10									
DIRECTOR		х						0	0	0
(8) TERRELL TURNER	0.10									
DIRECTOR		х						0	0	0
(9) HOLLY BRACKNELL	0.10									
DIRECTOR		х						0	0	0
(10)KATHERINE FINKBEINER	0.10									
DIRECTOR		х						0	0	0
(11)DOUG KAUFFMANN	0.10									
DIRECTOR		х						0	0	0
(12)STEPHAN MOYON	0.10									
VICE PRESIDENT				x				0	0	0
(13)STEVE WOHLWEND	0.10									
PRESIDENT				x				0	0	0
(14)STACIE BOWIE	0.10									
TREASURER				x				0	0	0
								· · · · · · · · · · · · · · · · · · ·		Form 990 (2020)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	loyee	s, an			est Co	mpe	ensated Employe	es (continu	ed)			
					(C)								
(A) Name and title	(B) Average hours per week (list any	box	unles er and	eck m ss per d a dir	son is	han one s both ar /trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		con	(F) ated am of other npensati rom the	•
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MI	'		nization I organiz	
(15)TERRY EVANS SECRETARY	0.10)		x				0		0			0
(16)MIKE WORLEY	40.00)											
EXECUTIVE DIRECTOR (17)				х				0		0			0
(18)													
(19)													
<u>(20)</u>													
<u>(21)</u>													
(22)													
(23)													
(24)													
(25)													
1b Subtotal							-						
d Total (add lines 1b and 1c)	mited to those I						. •	0 ore than \$100,000	of	0			0
reportable compensation from the organization												Yes	No No
3 Did the organization list any former officer, dir employee on line 1a? If "Yes," complete Sche						-					3		x
4 For any individual listed on line 1a, is the sum o	f reportable co	mpens	ation	and	oth	er com	pen	sation from the					
organization and related organizations greater					nplet	te Sch	edul				4		x
5 Did any person listed on line 1a receive or accr	ue compensatio	on from	any	unr		_		ation or individual					22
for services rendered to the organization? <i>If</i> "Section B. Independent Contractors	es," complete	Sched	lule J	J for	suc	h pers	on				5		Х
Complete this table for your five highest comper	sated independ	dent co	ntrac	ctors	that	t receiv	ved i	more than \$100,00	00 of				-
compensation from the organization. Report co										year.			
(A) Name and business add	Iress							(B) Description of service	es		(C) Compens	ation	
Total number of independent contractors (include)	-			e lis	ted a	above)	who	0					
received more than \$100,000 of compensation	from the organi	zation	>										

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Form 990 (2020)

Part VIII

Statement of Revenue

1 are	V	Check if Schedule O co	ontains a respons	se or n	ote to any line in thi	s Part VIII			
		0.0000.00000000000000000000000000000000	ae a respons			(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					
	b			1b					
Contributions, Gifts, Grants and Other Similar Amounts	С			1c					
يَ ق	d	Related organizations .		1d					
ifts Ir Au	е	Government grants (contr	ibutions)	1e					
s, Bis	f	All other contributions, gift	ts, grants,						
tion Si		and similar amounts not in	ncluded above	1f	4,862,867				
z per	g	Noncash contributions inc	luded in						
ng G		lines 1a-1f		1g	\$				
	h	Total. Add lines 1a-1f			▶	4,862,867			
					Business Code				
συ	2a	-							
Š	b								
Ser	С								
am	d	-							
Program Service Revenue	е	-							
ē		All other program service i							
		Total. Add lines 2a-2f .							
	3	Investment income (includi other similar amounts) .				226 679	1,924		224 754
	4	Income from investment of			+	336,678	1,924		334,754
	5	Royalties	•	•					
	"	rtoyanios	(i) Rea		(ii) Personal				
	6a	Gross rents	17	,280	(ii) i cisoriai				
		Less: rental expenses	6b	,200					
	1	Rental income or (loss)		,280					
		Net rental income or (loss)			'	912,280	912,280		
		Gross amount from	` ′				322,233		
	'a	sales of assets							
		other than inventory	7a 3,591	,480	(24,000)				
	b	Less: cost or other basis							
æ		and sales expenses	7b						
en ne	С	Gain or (loss)	7c 3,591	,480	(24,000)				
Re	d	Net gain or (loss)		. <u></u>	▶	3,567,480	3,567,480		
Other Re	8a	Gross income from fundrai	sing						
₹		events (not including \$		_					
		of contributions reported o	n line						
		1c). See Part IV, line 18		8a					
	1	Less: direct expenses .		8b					
		Net income or (loss) from f	_	ts	▶				
	9a	Gross income from gaming							
		activities, See Part IV, line		9a					
	1	Less: direct expenses .		9b					
	С	Net income or (loss) from (gaming activities		•				
	10a	Gross sales of inventory, le		40-					
		returns and allowances .		10a					
		Less: cost of goods sold		10b					
	C	Net income or (loss) from s	sales of inventor	y					
"	112	INT FROM CAPITAL	T. PACPC		Business Code 611710	11,882			11,882
ous le	TTa b				DII/IO	11,882			11,882
Miscellanous Revenue	C	-							
Sce Rev		All other revenue							
Ē		Total. Add lines 11a-11d				11,882			
	•	Total revenue See instru		· · ·			4 481 684	0	346 636

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	TT IX Statement of Functional Expenses				
Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns. All other organ	izations must complet	e column (A).	
	Check if Schedule O contains a response or note to a	•			
Do r	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
3b, 9	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	1,338,946	1,338,946		
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal	205		205	
С	Accounting	28,500		28,500	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees	73,576		73,576	
g	Other. (If line 11g amount exceeds 10% of line 25, column	737373		737373	
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	1,318		1,318	
17	_ `. `	1,316		1,310	
ı, 18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19					
20	Conferences, conventions, and meetings	200 624	200 624		
		389,634	389,634		
21	Payments to affiliates	370 063	250 062		
22	Depreciation, depletion, and amortization	378,863	378,863	T 204	
23	Insurance	7,384		7,384	
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	STAFF SUPPORT	1,259,941	423,404	345,147	491,390
b	SUPPORTING SERVICES	44,458		2,804	41,654
С	BANKING FEES	3,502	3,502		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,526,327	2,534,349	458,934	533,044
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)				

Part X **Balance Sheet**

		Check if Schedule O contains a response or note to any line in the	nis Part X			
				(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		1,150,718	2	2,711,366
	3	Pledges and grants receivable, net		1,699,134	3	2,957,180
	4	Accounts receivable, net	[15,932	4	54,986
	5	Loans and other receivables from any current or former officer, di	irector,			
		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 of	defined			
"		under section 4958(f)(1)), and persons described in section 4958	3(c)(3)(B)		6	
	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges		21,051	9	21,571
	10a	Land, buildings, and equipment cost or other				
		basis. Complete Part VI of Schedule D 10a	22,131,482			
	b	Less: accumulated depreciation 10b	3,801,691	18,225,033	10c	18,329,791
	11	Investments - publicly traded securities		15,435,661	11	19,606,363
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11	867,770	13	822,558	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	136,758	15	124,751	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		37,552,057	16	44,628,566
	17	Accounts payable and accrued expenses		197,571	17	289,845
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	9,425,000	20	9,055,000	
	21	Escrow or custodial account liability. Complete Part IV of Schedu	ıle D		21	
S	22	Loans and other payables to any current or former officer, director				
Liabilities		trustee, key employee, creator or founder, substantial contributor,	, or 35%			
lab		, , , , , , , , , , , , , , , , , , , ,			22	
_	23	Secured mortgages and notes payable to unrelated third parties		1,171,627	23	945,587
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related				
		parties, and other liabilities not included on lines 17-24). Complet				
		of Schedule D		69,732	25	34,182
	26	Total liabilities. Add lines 17 through 25		10,863,930	26	10,324,614
		Organizations that follow FASB ASC 958, check here	<u>X</u>			
es	07	and complete lines 27, 28, 32, and 33.		T 460 060	07	0.600.661
anc	27	Net assets without donor restrictions	F T	7,468,862	27	8,620,661
Bal	28	Net assets with donor restrictions		19,219,265	28	25,683,291
nd		Organizations that do not follow FASB ASC 958, check here	▶ ⊔			
린	20	and complete lines 29 through 33. Capital stock or trust principal, or current funds			29	
S O	29 30				30	
set	30 31	Retained earnings, endowment, accumulated income, or other fu	-		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	F	26 600 127	32	34 202 052
Š	33	Total liabilities and net assets/fund balances		26,688,127	33	34,303,952 44,628,566
		Total habilitios and not associs/fully palarioss		37,552,057	55	11,020,300

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Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)				1,187
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,52	26,327
3 F	Revenue less expenses. Subtract line 2 from line 1	3		6,16	4,860
4 1	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4		26,68	88,127
5 1	Net unrealized gains (losses) on investments	5		1,41	.5,415
6 [Donated services and use of facilities	6			
7 I	Investment expenses	7			
8 F	Prior period adjustments	8			
9 (Other changes in net assets or fund balances (explain on Schedule O)	9		3	35,550
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
3	32, column (B))	10	:	34,30	3,952
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				□
	,			Ye	
1 /	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a \	Were the organization's financial statements compiled or reviewed by an independent accountant?			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:				
Ī	Separate basis Consolidated basis Both consolidated and separate basis				
b \	Were the organization's financial statements audited by an independent accountant?			2b 2	r.
	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:				
Г	Separate basis Consolidated basis, or both. Both consolidated and separate basis				
ر ا	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 2	·

EEA Form **990** (2020)

3a

3b

х

If the organization changed either its oversight process or selection process during the tax year, explain on

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

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2020

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

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

<u>THE</u>	LA	NDER FOUNDATION					57-032781				
Pa	rt I	Reason for Public Charity	y Status. (All o	rganizations must o	complete	this par	t.) See instructions	3.			
The	orga	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check on	y one box.)					
1		A church, convention of churches, or	association of chu	rches described in sect	ion 170(b)	(1)(A)(i).					
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 o	or 990-EZ).	.)					
3		A hospital or a cooperative hospital s	service organization	n described in section 1	70(b)(1)(A	ı)(iii).					
4		A medical research organization ope	rated in conjunction	n with a hospital describ	ed in sect	ion 170(b)	(1)(A)(iii). Enter the				
		hospital's name, city, and state:									
5	X	An organization operated for the bene	efit of a college or u	iniversity owned or opera	ated by a g	jovernmen	tal unit described in				
		section 170(b)(1)(A)(iv). (Complete	Part II.)								
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)	(A)(v).					
7		An organization that normally receive	s a substantial part	of its support from a gov	vernmental	unit or from	n the general public				
		described in section 170(b)(1)(A)(vi). (Complete Part II	l.)							
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
9		An agricultural research organization	described in secti	ion 170(b)(1)(A)(ix) ope	rated in co	njunction	with a land-grant collec	је			
		or university or a non-land-grant colle	ge of agriculture (s	ee instructions). Enter th	e name, cit	ty, and stat	e of the college or				
		university:									
10		An organization that normally receive	s: (1) more than 33	1/3% of its support from	n contributi	ons, memb	ership fees, and gross				
		receipts from activities related to its e	xempt functions - s	subject to certain excepti	ons; and (2	2) no more	than 33 1/3% of its				
		support from gross investment income	e and unrelated bus	siness taxable income (le	ess sectior	1511 tax) f	rom businesses				
		acquired by the organization after Ju	ne 30, 1975. See s	section 509(a)(2). (Com	plete Part	III.)					
11		An organization organized and opera	ated exclusively to t	test for public safety. Se	e section	509(a)(4).					
12		An organization organized and operate	ted exclusively for t	he benefit of, to perform	the functio	ns of, or to	carry out the purposes	3			
		of one or more publicly supported org	ganizations describ	ed in section 509(a)(1)	or section	n 509(a)(2)	. See section 509(a)(3	3).			
		Check the box in lines 12a through 12	2d that describes th	e type of supporting org	anization a	nd comple	te lines 12e, 12f, and 12	2g.			
	а	Type I. A supporting organization	n operated, supervi	ised, or controlled by its	supported	organizat	ion(s), typically by givir	ng			
		the supported organization(s) the	power to regularly	appoint or elect a majo	rity of the c	lirectors or	trustees of the				
		supporting organization. You mu	ist complete Part	IV, Sections A and B.							
	b	Type II. A supporting organization	n supervised or co	ntrolled in connection w	ith its supp	orted orga	nization(s), by having				
		control or management of the sup	porting organization	on vested in the same pe	rsons that o	control or r	nanage the supported				
		organization(s). You must comp	olete Part IV, Secti	ions A and C.							
	С	Type III functionally integrated	 A supporting orga 	anization operated in co	nnection w	ith, and fu	nctionally integrated wi	th,			
		its supported organization(s) (see	e instructions). You	u must complete Part I	V, Section	ıs A, D, ar	d E.				
	d		rated. A supporting	organization operated	in connecti	on with its	supported organizatio	n(s)			
		that is not functionally integrated.	The organization g	enerally must satisfy a d	istribution i	equiremer	it and an attentiveness				
		requirement (see instructions). Y	ou must complete	e Part IV, Sections A a	nd D, and	Part V.					
	е	Check this box if the organization	received a written	determination from the II	RS that it is	a Type I,	Гуре II, Туре III				
		functionally integrated, or Type III	I non-functionally in	tegrated supporting org	anization.						
	f	Enter the number of supported organ									
	g	Provide the following information about	ut the supported or	ganization(s).							
	(i	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the o	Ü	(v) Amount of monetary support (see	(vi) Amount of other support (see			
				above (see instructions))	docum	-	instructions)	instructions)			
					Yes	No					
(A)											
(B)											
(C)											
(D)											
(E)											
Tota	l										

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2016 **(b)** 2017 (c) 2018 (d) 2019 **(e)** 2020 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1,960,966 1,729,893 3,597,187 3,106,609 4,862,867 15,257,522 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 Total.** Add lines 1 through 3 1,960,966 1,729,893 3,597,187 3,106,609 4,862,867 **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) 2,315,089 **Public support.** Subtract line 5 from line 4 12,942,433 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ **(b)** 2017 (c) 2018 (d) 2019 (f) Total (a) 2016 (e) 2020 1,960,966 1,729,893 **7** Amounts from line 4 3,597,187 3,106,609 4,862,867 15,257,522 **8** Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 412,452 421,206 350,699 364,547 346,636 1,895,540 **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... 17,153,062 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage **14** Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) 75.45 % 80.44 % 16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this x b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

THE LANDER FOUNDATION

Schedule of Contributors

20

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

2020

Employer identification number

57-0327816

OMB No. 1545-0047

	of:	Section:					
Form 9	90 or 990-EZ	▼ 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 990-PF		501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Check	if your organization is cov	ered by the General Rule or a Special Rule .					
Note: (instructi		8), or (10) organization can check boxes for both the General Rule and a Special Rule. See					
Genera	ıl Rule						
		g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 operty) from any one contributor. Complete Parts I and II. See instructions for determining a outions.					
Specia	I Rules						
x	regulations under section 13, 16a, or 16b, and the	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line at 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 "NIA" in column (b) instead of the contributor name and address). II and III.						
	For an organization descontributor, during the sliterary, or educational p	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,					

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

57-0327816

TUE PUM	DER FOUNDATION		37-0327616
Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ABNEY FOUNDATION 100 VINES STREET ANDERSON SC 29621	\$\$	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	LINDA DOLNY LISTER 704 S BROAD ST CLINTON SC 29325	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BRELAND EDUCATION TRUST PO BOX 1547 GREENWOOD SC 29648	\$605,980	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

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.

Department of the Treasury Internal Revenue Service Name of the organization

OMB No. 1545-0047

2020

Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Employer identification number

	LANDER FOUNDATION		57-	0327816
Pa	rt I Organizations Maintaining Donor Advised Fu	ınds or Other Similar Fund	s or Accounts.	
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 6.		
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in wi	riting that the assets held in dono	r advised	
	funds are the organization's property, subject to the organization	on's exclusive legal control? .		Yes No
6	Did the organization inform all grantees, donors, and donor adv	visors in writing that grant funds o	an be used	
	only for charitable purposes and not for the benefit of the donor	r or donor advisor, or for any othe	r purpose	
	conferring impermissible private benefit?			Yes No
Pa	t II Conservation Easements.			
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (e.g., recreation or edu	cation) Pre	servation of a historic	ally important land area
	Protection of natural habitat	Pre	servation of a certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the	form of a conservatio	n
	easement on the last day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	1
b	Total acreage restricted by conservation easements		2h	
С	Number of conservation easements on a certified historic struc	ture included in (a)	20	
d	Number of conservation easements included in (c) acquired af	ter 7/25/06, and not on a		
	historic structure listed in the National Register		20	I
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated	d by the organization	during the
	tax year ▶			
4	Number of states where property subject to conservation ease	ment is located ►		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handli	ng of	
	violations, and enforcement of the conservation easements it h	olds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, har	ndling of violations, and enforcing	g conservation easem	ents during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations, and enforcing con	nservation easements	during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of secti	ion 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservatio	n easements in its revenue and e	expense statement and	d
	balance sheet, and include, if applicable, the text of the footnote	e to the organization's financial st	tatements that describ	es the
	organization's accounting for conservation easements.			
Pa	t III Organizations Maintaining Collections	of Art, Historical Treasu	res, or Other Si	milar Assets.
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its revenue state	ement and balance sh	eet works
	of art, historical treasures, or other similar assets held for public	c exhibition, education, or resear	ch in furtherance of p	ublic
	service, provide, in Part XIII the text of the footnote to its finance	cial statements that describes the	se items.	
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue stateme	nt and balance sheet	works of
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research	in furtherance of publ	ic 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 treas			
	following amounts required to be reported under FASB ASC 9		- •	
а				. ▶\$
h	Assets included in Form 990 Part X			• \$

	rt III Organizations Maintaining		•					ssets	COIII	muea)		
3	Using the organization's acquisition, accession	n, and other records,	check an	ny of the follo	owing that mak	e signi	ficant use of its					
	collection items (check all that apply):											
а	X Public exhibition		d	Loan	or exchange pr	ogram	S					
b	Scholarly research		е	U Other								
С	c											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part											
	XIII.											
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar											
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection? 🗌 Yes 🗓 No											
Pai	rt IV Escrow and Custodial Arrai	ngements.										
	Complete if the organization a 990, Part X, line 21.	answered "Yes" (on Forr	m 990, Pa	art IV, line 9	, or re	eported an am	ount o	n Fori	m		
1a	a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not											
	included on Form 990, Part X?							🗌	Yes	☐ No		
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	wing tab	le:								
							Ar	nount				
С	Beginning balance					10	:					
d	Additions during the year					10	I					
е						1e						
f	Ending balance					1f						
2a	Did the organization include an amount on For	m 990. Part X. line 2	1. for esc	crow or cust	odial account li	abilitv?	,	. П	Yes	No		
b	•					•		_		Ī		
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII											
	Complete if the organization a	answered "Yes"	on Forr	m 990. Pa	art IV. line 1	0.						
	γ	(a) Current year		Prior year	(c) Two years b		(d) Three years back	(e) i	our year	rs back		
1a	Beginning of year balance	15,874,547	· · ·	56,491	13,378,8		12,523,320			27,553		
b	Contributions	2,242,867	-	26,236	1,759,		400,33			8,924		
	Net investment earnings, gains, and	2,242,007	1,0	20,230	1,739,	//-	400,33	,		,,,,,,		
С												
	losses	4,416,323		394,330	493,	960	1,089,678	נ	.,095	,013		
d	Grants or scholarships											
е	Other expenditures for facilities and		_									
	programs	571,146	'/	797,323	676,	074	634,51	ט	568	,164		
f	Administrative expenses											
g	End of year balance	21,962,591		79,734	14,956,4	491	13,378,833	L 12	,523	,326		
2	Provide the estimated percentage of the curre		(line 1g, c	column (a))	held as:							
а	Board designated or quasi-endowment	%										
b	Permanent endowment > %	6										
С	Term endowment ► %											
	The percentages on lines 2a, 2b, and 2c shoul											
3a	Are there endowment funds not in the posses	sion of the organizati	ion that a	ire held and	administered for	or the			_			
	organization by:								Ye	s No		
	(i) Unrelated organizations							. 3a	(i)	х		
	(ii) Related organizations							. 3a	(ii)	х		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Sch	nedule R?.				. 3	b			
4	Describe in Part XIII the intended uses of the	organization's endov	vment fur	nds.								
Pai	rt VI Land, Buildings, and Equip	ment.										
	Complete if the organization a	answered "Yes"	on Forr	m 990, Pa	art IV, line 1	<u>1a.</u> S	ee Form 990,	Part X	, line	10.		
	Description of property	(a) Cost or other	er basis	(b) Cost o	r other basis	(c)	Accumulated	(d)	Book valu	ue		
		(investme	ent)	(other)	de	epreciation					
1a	Land			6.3	326,630			6	,326	,630		
b	Buildings				070,637		3,762,876		,307			
С	Leasehold improvements						,					
d	Equipment											
e	Other STMD11	R .			734,215		38,815		605	,400		
_	I. Add lines 1a through 1e. (Column (d) must of		t X. colu					1 9	329			
	in a substantial for the s	,	, Joidi	,,,0	,				<u>, , , , , , , , , , , , , , , , , , , </u>	,		

(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).	
B (W Od 1119)	

Other Liabilities. Part X

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)ACTUARIAL LIABILITY OF ANNUITIES	
(3PAYABLE	34,182
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) . ▶	34,182

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.

EEA Schedule D (Form 990) 2020

02. Endowment funds intended uses (Part V, line 4)

THE ENDOWMENT FUNDS ARE INTENDED TO SUPPORT THE WELFARE OF THE LANDER FOUNDATION AND LANDER

UNIVERSITY. THE ENDOWMENT CONTRIBUTIONS AND EARNINGS ARE PRIMARILY USED TO PROVIDE SCHOLARSHIPS TO

UNIVERSITY STUDENTS, PROVIDE MONETARY SUPPORT FOR FACULTY RESEARCH AND STAFF DEVELOPMENT, AND TO

ACQUIRE PROPERTY USED BY AND FOR THE UNIVERSITY.

03. Other revenues not included on Form 990 (Part XI, line 2d)

THE OTHER REVENUES NOT INCLUDED ON FORM 990 PART VIII LINE 12 CONSIST OF CHANGES IN ACTUARIAL

LIABILITY OF ANNUITIES PAYABLE IN THE AMOUNT OF \$35,550.

04. Footnote for uncertain tax position under FIN 48 (Part X)

THE FOUNDATION HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICES AS A TAX-EXEMPT ORGANIZATION

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, INCOME EARNED IN FURTHERANCE OF

THE FOUNDATION'S TAX-EXEMPT PURPOSE IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES. ANY ACTIVITIES

NOT DIRECTLY RELATED TO THE FOUNDATION'S TAX-EXEMPT PURPOSE ARE SUBJECT TO TAXACTION AS UNRELATED

BUSINESS INCOME.

WHEN TAX RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN WOULD BE SUSTAINED UPON

EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF

THE POSITION TAKEN OR THE AMOUNT OF THE POSITION THAT WOULD BE ULTIMATELY SUSTAINED. MANAGEMENT IS

NOT AWARE OF ANY MATERIAL UNCERTAIN TAX POSITIONS AND NO LIABILITY HAS BEEN RECOGNIZED FOR THE YEAR

ENDING JUNE 30, 2021.

05. General Explanation Attachment

THE FOUNDATION REEXAMINED PRIOR YEAR TOTAL NET ASSETS AND DETERMINED THAT SOME FUNDS WERE NOT

APPROPRIATELY CATEGORIZED AS ENDOWMENT FUNDS. TO CORRECT THIS, THE BEGINNING BALANCE OF ENDOWMENT

FUNDS REPORTED ON SCHEDULE D HAS BEEN RESTATED TO THE APPROPRIATE AMOUNT. THIS RESTATEMENT IS ALSO

REFLECTED IN THE ANNUAL AUDIT REPORT FOR THE YEAR ENDED JUNE 30, 2021.

EEA Schedule D (Form 990) 2020

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

THE LANDER FOUNDATION						57-0327816	
Part I General Information or							
 Does the organization maintain records the selection criteria used to award the Describe in Part IV the organization's p 	grants or assistance?						. 🛚 Yes 🗌 N
Part II Grants and Other Assista				nts. Complete if the o	organization answered	"Yes" on Form 99	0,
Part IV, line 21, for any rec		•		•	•		•
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)LANDER UNIVERSITY							
320 STANLEY AVENUE							RESTRICTED
GREENWOOD SC 29646	57-0559320	501(C)(3)	633,863				SCOLARSHIPS
(2)LANDER UNIVERSITY							PROGRAMS FOR
320 STANLEY AVENUE							ACADEMICS ANI
GREENWOOD SC 29646	57-0559320	501(C)(3)	705,083				ADMIN
(3)							
(4)							
(4)							
(5)							
(6)							
(7)							
(7)							
(8)							
(4)							
(9)							
(10)							
2 Enter total number of section 501(c)(3)						_	
3 Enter total number of other organization	ns listed in the line 1 ta	ble					

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.									
	Part III can be duplicated if additional	space is needed	d.						
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
1									
2									
3									
4									
5									
6									
7									

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

01. Monitoring procedures (Part I, line 2)

THE FOUNDATION ACCOUNTANT PREPARES SCHOLARSHIP BUDGETS YEARLY FOR EACH ACADEMIC YEAR AND PROVIDES THESE BUDGET LISTS TO THE

APPROPRIATE DEPARMENT DEANS. A MEETING IS THEN SET WITH EACH DEAN, THE FINANCIAL AID DIRECTOR, THE FOUNDATION ACCOUNTANT, AND

THE VP FOR UNIVERSITY ADVANCEMENT. THE MEETINGS ARE HELD TO DISCUSS THE BUDGETS IN DETAIL, ANSWER ANY QUESTIONS THE DEANS MAY

HAVE, AND STRESS TO EACH DEAN THE IMPORTANCE OF FOLLOWING SCHOLARSHIP CRITERIA AND TO NOT GO OVER THEIR RESPECTIVE BUDGETS.

ONCE SCHOLARSHIPS ARE AWARDED, THE FINANCIAL AID DIRECTOR AND THE FOUNDATION ACCOUNTANT RESEARCH TO ENSURE THAT ALL CRITERIA

AND BUDGETS WERE MET. THE FOUNDATION ACCOUNTANT RECEIVES A BILL FROM THE UNIVERSITY EACH SEMESTER AND CHECKS EACH SCHOLARSHIP

ACCOUNT BUDGET TO ENSURE IT HAS NOT BEEN OVERSPENT. IN SOME CASES, STUDENTS DO NOT KEEP THEIR COMMITMENT TO ATTEND LANDER AND

DEANS ARE THEN ASKED TO AWARD THE SCHOLARSHIP TO ANOTHER STUDENT(S).

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

THE LANDER FOUNDATION

Employer identification number 57-0327816

Part I Bond Issues															
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issu	ssued (e) Issue pr		ate issued (e) Issue price		(f) Description of purpose		(f) Description of purpose		Defeased	(h) On behalf of issuer	(i) Poole financing	
						DEVELOP	MENT O	F SPORTS	Ye	s No	Yes No	Yes	No		
ASC JOBS- ECON DEV AUTH ECONOMI	57-0960018	00000000	10-18-20	19	9,330,000	COMPLEX				х	х		х		
						DEVELOP	MENT O	F SPORTS							
BSC JOBS- ECON DEV AUTH ECONOMI	57-0960018	00000000	10-18-20	19	95,000	COMPLEX				x	х		x		
С															
D															
Part II Proceeds	•														
					Α	В	•		С		D				
1 Amount of bonds retired															
2 Amount of bonds legally defeased															
3 Total proceeds of issue															
4 Gross proceeds in reserve funds															
5 Capitalized interest from proceeds															
6 Proceeds in refunding escrows															
7 Issuance costs from proceeds															
8 Credit enhancement from proceeds															
9 Working capital expenditures from proceeds															
10 Capital expenditures from proceeds															
11 Other spent proceeds															
12 Other unspent proceeds															
13 Year of substantial completion															
			,	es/	No	Yes	No	Yes	No	,	Yes	No)		
14 Were the bonds issued as part of a refunding issue	e of tax-exempt bonds	(or,													
if issued prior to 2018, a current refunding issue)?					Х		х								
15 Were the bonds issued as part of a refunding issue															
issued prior to 2018, an advance refunding issue)?					Х		Х								
16 Has the final allocation of proceeds been made?					Х		Х								
17 Does the organization maintain adequate books ar	• • •														
final allocation of proceeds?				x		Х									

Schedule K (Form 990) 2020 THE LANDER FOUNDATION 57-0327816 Page 2

Pa	rt III Private Business Use		_						
			A		3	(2)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		Х		Х				
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		х		Х				
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		х		х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?		х		х				
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		x		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?		х		x				
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government ▶		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a								
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government ▶		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		х		х				
8a	Has there been a sale or disposition of any of the bond-financed property to a								
	nongovernmental person other than a 501(c)(3) organization since the bonds were issued? .								
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all								
	nonqualified bonds of the issue are remediated in accordance with the								
	requirements under Regulations sections 1.141-12 and 1.145-2?		х		x				
Pa	rt IV Arbitrage								
			Α	E	3	(2)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		х		х				
2	If "No" to line 1, did the following apply?		·						•
а	Rebate not due yet?								
b	Exception to rebate?								
	No rebate due?								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		•		`				•
	performed	-	-	-	-				
_	la the hand issue a variable rate issue?		x		x				

EEA Schedule K (Form 990) 2020

 Schedule K (Form 990) 2020
 THE
 LANDER
 FOUNDATION

Part IV Arbitrage (continued)								
	Α			В	C			,
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?	Х		Х					
b Name of provider	REGIONS 1	BANK	REGIONS :	BANK				
c Term of hedge		3		2				
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		х		х				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		Х		х				
6 Were any gross proceeds invested beyond an available temporary period?		Х		х				
7 Has the organization established written procedures to monitor the								,
requirements of section 148?		x		x				
Part V Procedures To Undertake Corrective Action		1	1					
		A		В	(3)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?								
Part VI Supplemental Information. Provide additional information for res	ponses to	guestions	on Schedu	ıle K. See ir	structions			
								*
01. Bond purpose (Sch K, Part I, col f)								
PART I COLUMN A - FULL ISSUER NAME:								
SC JOBS-ECON DEV AUTH ECONOMIC DEVELOPMENT REVENUE BONDS SERIES	2019A							
PART I COLUMN F - DESCRIPTION OF PURPOSE:								
1.11.1 1 001011.1								
DEVELOPMENT OF SPORTS COMPLEX AND EQUESTRIAN CENTER								
PART I COLUMN A - FULL ISSUER NAME:								
1111 1 0010111 11 1011 100011 1111111								
SC JOBS-ECON DEV AUTH ECONOMIC DEVELOPMENT REVENUE BONDS SERIES	2019B							
50 0055 2001 527 110111 2001101120 521 220112111 127 22101 501155 521125	20232							
PART I COLUMN F - DESCRIPTION OF PURPOSE:								
IMI I COLOMY I BESCRIFTION OF TOXIOSE.								
DEVELOPMENT OF SPORTS COMPLEX AND EQUESTRIAN CENTER								
PANDOLIMINI OL PLONID COMIDIN IMP BEODELININ CINIIN								

Schedule K (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

THE LANDER FOUNDATION 57-0327816 01. Form 990 governing body review (Part VI, line 11) THE 990 WAS REVIEWED BY THE EXECUTIVE DIRECTOR OF LANDER FOUNDATION PRIOR TO FILING. 02. Conflict of interest policy compliance (Part VI, line 12c) EXECUTIVE DIRECTOR AND PRESIDENT OF THE LANDER FOUNDATION MEET TO DISCUSS BOARD MEMBERS CONFLICT OF INTEREST STATEMENTS. 03. Governing documents, etc, available to public (Part VI, line 19) THE ORGANIZATION'S 990 IS AVAILABLE UPON REQUEST. 04. Explanation of other changes in net assets or fund balances (Part XI, line 9) THE OTHER CHANGES IN NET ASSETS INCLUDED ON PART 11, LINE 9 CONSIST OF \$35,550 OF CHANGES IN ACTUARIAL LIABILITY OF ANNUITIES PAYABLE.

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

THE LANDER FOUNDATION 57-0327816 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (c) Legal domicile (state (d) (e) (f) Direct controlling Primary activity Name, address, and EIN (if applicable) of disregarded entity Total income End-of-year assets or foreign country) entity (1) LANDER RWS PROPERTIES LLC, 414 MAIN STREET GREENWOOD SC 29646 REAL ESTATE LEASING SC 912,343 17,059,756 N/A (2) LANDER FOUNDATION PROPERTIES LLC, 320 STANLEY AVENUE GREENWOOD SC 29646 SC 345,892 2,609,227 N/A REAL ESTATE LEASING (3) BEARCAT VILLAGE LLC, 320 STANLEY AVENUE GREENWOOD SC 29646 REAL ESTATE LEASING SC N/A (4) (5)

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Sec. 51	g) 2(b)(13) ed entity?
		or foreign country)		(, , , , , , , , , , , , , , , , , , ,		Yes	No
(1) LANDER UNIVERSITY, 57-0559320							
320 STANLEY AVENUE	COEDUCATIONAL						
GREENWOOD SC 29646	FOUR-YEAR	sc	501(C)(3)	2	N/A		x
(2) LANDER UNIVERSITY ALUMNI ASSOC., 57-6029107							
320 STANLEY AVENUE	ALUMNI SUPPORT						
GREENWOOD SC 29646	ACTIVITIES	sc	501(C)(3)	5	N/A		x
(3)							
(4)							
(5)							

Schedule R (Form 990) 2020 THE LANDER FOUNDATION 57-0327816 Page 2

Part III

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(h)		(i)	(j)		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of- year assets	Disprope alloca		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		eral or aging tner?	Percentage ownership		
		country)		sections 512-514)			Yes	No		Yes	No			
(1)														
(2)														
(3)														
(4)														
(5)														

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i)
Name, address, and El	N of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	contr	s12(b)(13) rolled ity?
-									Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										

Schedule R (Form 990) 2020 THE LANDER FOUNDATION 57-0327816 Page 3

Part V Trans

Transactions with Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

No	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Y	/es	No			
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1	а		х			
b	Gift, grant, or capital contribution to related organization(s)	1	b		х			
С	Gift, grant, or capital contribution from related organization(s)	1	С		х			
d	Loans or loan guarantees to or for related organization(s)	1	d		х			
е	Loans or loan guarantees by related organization(s)	1	е		х			
f	Dividends from related organization(s)	1	f		х			
g	Sale of assets to related organization(s)	1	g		х			
h Purchase of assets from related organization(s)								
i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)								
k	Lease of facilities, equipment, or other assets from related organization(s)	1	k		х			
Performance of services or membership or fundraising solicitations for related organization(s)								
m	Performance of services or membership or fundraising solicitations by related organization(s)	1	m		х			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
o Sharing of paid employees with related organization(s)								
р	Reimbursement paid to related organization(s) for expenses	1	р		х			
q	Reimbursement paid by related organization(s) for expenses	1	q		х			
r	Other transfer of cash or property to related organization(s)	1	r j	x				
s	Other transfer of cash or property from related organization(s)	1	s		х			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.							
	(a) (b) (c)	(d)						
	Name of related organization Transaction Amount involved Method of det	ermining amo	unt inv	volved				
	type (a-s)							
(1)								
(0)								
(2)								
(2)								
(3)								
(4)								
(-)								
(5)								
(-)								
(6)								
1.7								

EEA

Schedule R (Form 990) 2020 THE LANDER FOUNDATION 57-0327816 Page 4

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(е	e)	(f)	(g)	(h)	(i)	(j)		(k)		
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under	sect	partners Share of total income (c)(3) Share of end-of-year assets izations		end-of-year	Disproportionate allocations?						eral or aging tner?	Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No			
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
(11)															
(12)															

Part VII Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.
01. Explanation of information on Schedule R
PART V LINE 1J LEASE OF ASSETS TO RELATED ORGANIZATION INFORMATION:
RELATED ORGANIZATION - LANDER RWS PROPERTIES LLC
AMOUNT INVOLVED - \$1,409,533
METHOD OF DETERMINING VALUE - COST
PART V LINE 10 SHARING OF PAID EMPLOYEES WITH RELATED ORGANIZATION:
RELATED ORGANIZATION - LANDER UNIVERSITY
AMOUNT INVOLVED - \$1,086,044
METHOD OF DETERMINING VALUE - % OF TIME SPENT WORKING ON RELATED ORGANIZATION
PROGRAMS
PART V LINE 1R OTHER TRANSFER OF CASH TO RELATED ORGANIZATION:
RELATED ORGANIZATION - LANDER UNIVERSITY
AMOUNT INVOLVED - \$1,625,607
METHOD OF DETERMINING VALUE - COST/CASH PAID

(Rev. January 2020)

Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

OMB No. 1545-0047

Department of the Treasury ▶ Go to www.irs.gov/Form8868 for the latest information. Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print THE LANDER FOUNDATION 57-0327816 Number, street, and room or suite no. If a P.O. box, see instructions. File by the due date for C/O LANDER UNIV 320 STANLEY AVENUE filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. GREENWOOD SC 29649 0 Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720 (other than individual) Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of ➤ MIKE WORLEY, C/O LANDER UNIV 320 STANLEY AVENUE GREE SC 29649 Telephone No.► 864-388-8350 FAX No. ► • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is a list with the names and TINs of all members the extension is for. 1 I request an automatic 6-month extension of time until 05-16 , 20 22 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► ☐ calendar year 20 or 07-01 , 20 20 , and ending X tax year beginning 06-30 , 20 21 . 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

using EFTPS (Electronic Federal Tax Payment System). See instructions.

any nonrefundable credits. See instructions.

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

3a \$

3с

\$

Eorm 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2020, or fiscal year beginning 07-01-2020 , and ending 06-30-2021

Do not cond to the IPS. Keep for your records

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

New the letest information

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Taxpayer identification number Name of exempt organization or person subject to tax THE LANDER FOUNDATION 57-0327816 Name and title of officer or person subject to tax MIKE WORLEY, EXECUTIVE DIRECTOR Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here ► 🗵 b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 3a Form 1120-POL check here ► 4a Form 990-PF check here ► b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b 5a Form 8868 check here ► 6a Form 990-T check here► 7a Form 4720 check here ► Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that \quad \text{I am an officer of the above organization or \quad \text{I am a person subject to tax with respect to} (name of organization) , (EIN) . and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only lauthorize Eustace Accountancy Group P to enter my PIN as my signature 66548 **ERO firm name** Enter five numbers, but do not enter all zeros on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Signature of officer or person subject to tax Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 575550 37771 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. **ERO Must Retain This Form - See Instructions**

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

	FOR YOUR RECORDS ONLY Federal Supporting Statements	2020 PG01
Name(s) as shown on return		Tax ID Number
THE LANDER FOUNDATION		57-0327816

FORM 99	0 -	SCHEDULE	D	-	PART V	VΙ	-	LINE 3	1E	i	STATEMENT	#D1E
		INVESTMENT	'S	_	OTHER							

DESCRIPTION OF INVESTMENT	COST/BASIS (INVESTMENT)	COST/BASIS (OTHER)	DEPR	BOOK VALUE
FURNITURE AND FIXTURES	0	72,815	38,815	34,000
CONSTRUCTION IN PROGRESS	0	661,400	0	661,400
TOTAL	0	734,215	38,815	695,400

990 Overflow Statement	2020 Page 1
Name(s) as shown on return	FEIN
THE LANDER FOUNDATION	57-0327816

SCHEDULE D, PART V, LINE 1A - BEGINNING OF YEAR BALANCE

Description	Amount
INITIAL BEGINNING BALANCE	\$ 15,579,734
RESTATEMENT (SEE SCHEDULE D SUPPLEMENTAL INFORMATION)	294,813
Total:	\$ 15,874,547

Form 990 Worksheet

TOTAL

Schedule A, Line 5 - Excess 2% Limitation Contributors

(Keep for your records)

2020 Tax ID Number

Name(s) as shown on return

THE LANDER FOUNDATION

57-0327816

2% of the amount on Schedule A, Part II, line 11, column (f)

343,061

2,315,089

	(a)	(b)	(c)	(d)	(e)	(f)	(g)
Name	2016	2017	2018	2019	2020	Total	Excess contributions
							(col. (f) minus
							the 2% limitation)
SELF REGIONAL	100,000	50,000				150,000	
ABNEY FOUNDATION	100,000	100,000	100,000	100,000	950,000	1,350,000	1,006,939
DR. AND MRS. DOUGLAS MUFUKA	120,100	100,238	753,140			973,478	630,417
CLEMSON UNIVERSITY	100,000					100,000	
LUCILLE BARNETT	49,624					49,624	
DR.AND MRS. DEWITT B STONE JR	40,858					40,858	
ESTATE OF JAMES GREGG	49,775					49,775	
BRUCE WHITE			277,500			277,500	
WAYNE AND JUDY GANTT							
WOHLWEND FAMILY							
HINES FAMILY							
AMERICAN ENDOWMENT FOUNDATION				140,000		140,000	
KAUFFMANN FAMILY GIFT FUND				100,000		100,000	
LINDA DOLNY LISTER					757,875	757,875	414,814
BRELAND EDUCATION TRUST			·		605,980	605,980	262,919