EDISTOISLAN 06/10/2009 5 30 PM

Department of the Treasury

Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirement

OMB No. 1545-0047 2008 Open to Public

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A	For the 20	08 cal <u>enda</u> i	year, c	or tax year	beginnir	ng		, a	nd ending				_			
В	Check if applica	_{able} Pleas	e C N	Name of organi	nzation								loe	Emplo	yer identific	cation number
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J	Name change	print	" —	Doing Business							Τ		1			
	Initial return	type See			•	box if mail is	not deliver	ed to street add	ress)		Room/su	ute			one number	
╡		Specif		PO BO	<u>X 1</u>						<u> </u>			<u> 343</u>	<u>-869-9</u>	9004
_J	Termination	Instru		City or town,	, state or o	country, and	ZIP + 4						G Gro	ss rece	epts \$ 7	,290,535
	Amended retur			EDIST	O IS	LAND		9	SC 29438							
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	Application per	naing		aaa.000 0.	риновран										· -	7 🖼
														affiliate Are all	affiliates	4 · · · · H
													` ′	ınclude	id?	Yes No
													1	If "No,"	' attach a list. (se	æ ınstructions)
ı	Tax-exempt	t status	X 501	(c) (3) ◀	(insert no.	<u>.) </u>	4947(a)(1) o	r 527							
J	Website: I	► WWW.	EDI	STO.	ORG								H(c)	Group	exemption numb	ber 🕨
ĸ	Type of organi	zation X	Corporatio	on Trus	st A	ssociation	Other	•			Year of form	nation			M State of leg	al domicile
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∞5	3 Num	nber of voti	•		•	•	, ,						- ⊢	3		
<u></u>	4 Nun	nber of inde	epende	ent voting	member	s of the go	overning	g body (Par	t VI, line 1b)				<u>_</u>	4	15	
₹	5 Tota	al number o	of empl	loyees (Pa	art V, line	e 2a)							L	5	5	
ಶ	6 Tota	al number o	of volur	nteers (est	timate if	necessary	/)						1	6		
4	7a Tota			-		_	•	ne 12, colur	nn (C)	••	•	•		7a		
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9	8 Con	tributions a						• •								
Revenue	9 Prog	gram servi					7인						0,7			168,259
ð	10 Inve	stment inc	ome (E	<u>ça</u> it VIII,,ç	չջևրդյո <i>₄</i> ,∕	A), Jiggs 3.	, pspha	7d)				1	1,5	<u>66 </u>		18,177
œ	11 Othe	er revenue	(Part à	XII), colulm		res 5, 6d,	8c, AC.	10c, and 1°	1e)			4:	2,6	95		
									n (A), line 12)		21	,19	2.7	68	7.3	290,535
		nts and sin							<u> </u>							
		efits paid to								•						
		-			-			• • •			-		9,2	76		96,559
S88									A), lines 5–10)			- 0	9, 2	70		90,339
둤	1	essional fu								_ ·				_		
Expe	b Tota	al fundraisi	ng expe	enses (Pa	irt IX, col	umn (D), I	ine 25)	•	18,5	17						
Ш	17 Othe	er expense	s (Part	IX, colum	nn (A), Iir	nes 11a-1	1d, 11f-:	24f)					<u>6,5</u> :			108,682
<u></u>	18 Tota	al expenses	. Add	lines 13-1	7 (must	equal Par	t IX, col	umn (A), lir	ne 25)			17.	5,8	09		205,241
Net Assets on UU3	19 Rev	enue less			-	-		. ,,	<i>,</i>	••	21	,01				085,294
÷ 8	8		T			v nii	· · ·					ginning				of Year
\$ E	20 Tota	al assets (F	art X I	line 16)								5,53		07		429,729
A 25.	24 Tota	I liabilities		•		•	•	•	• •• ••••				0,0	_		302,928
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2		and belief,	IVIS ITU	Z.Correct.	and compl	ere Degrara	ation of p	reparer (othe	r than officer) is bas	sed on all in	formation of	of which	prepare	r nas	any knowledg	³⁹ /- ~
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_		Preparer's								Date	- 1	Check	ıf	_	Preparer's (dentifying number
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		address, a				SONVI			<u> 29681 </u>				no	. 🕨	864-9	62-1040
May	y the IRS d	scuss this	return	with the p	reparer :	shown abo	ove? (se	ee instruction	ons)						X	Yes No
	Eor Priv		10					-								900 (2000)

9/6.18

Form 990 (2008) ED					<u>57-1007</u>	436	Page 2
Part III . State			e Accomp	lishments (se	e instructions)	 	
1 Briefly describe the							
					PUBLIC ABOU		
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UNDER CONS	PEKANTI	ON EASEME	NT5	•••			
2 Did the consideration					shiph was not hated		
			ogram service	es during the year	which were not listed	on	Yes X No
the prior Form 99		·					. L Tes EN NO
				anges in how it cor	nducts, any program		
services?	ion cease coi	iducung, or make s	agnilicant cri	anges in now it cor	iducis, any program		Yes X No
•	these chang	 es on Schedule O.	•		• •	• • • • • • • • • • • • • • • • • • • •	163 EE 110
	_			oanization's three l	largest program servi	ces by expenses	
						amount of grants and	
		expenses, and rev				amount or granto and	
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4b (Code:) (Expenses	\$	ir	ncluding grants of S) (Revenue \$)
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4c (Code:) (Expenses	\$	ir	ncluding grants of \$	 B) (Revenue \$	<u> </u>
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4d Other program se	rvices. (Desc	ribe in Schedule O	.)				
(Expenses \$			ng grants of) (Revenu		
4e Total program se	rvice expen	ses ▶ \$	144,	380 (Must equa	il Part IX, Line 25, co	lumn (B).)	

Part IV . Checklist of Required Schedules Yes No_ Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? 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 X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete X Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes." complete Schedule C. Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete X 6 Schedule D, Part I 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." X complete Schedule D, Part III 8 9 Did the organization report an amount in Part X, line 21; 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 X 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D. X Parts VI, VII, VIII, IX, or X as applicable Did the organization receive an audited financial statement for the year for which it is completing this return 12 X that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X Did the organization maintain an office, employees, or agents outside of the U.S.? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 X organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III X 16 X 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 X Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 18 X 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete 23 X 23 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 questions X 24b-24d and complete Schedule K. If "No," go to question 25. 24a 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified X person from a pnor year? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.

Part IV . Checklist of Required Schedules (continued)

			Yes	No
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		_X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
)	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
	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	l i	х

Form **990** (2008)

Form 990 (2008) EDISTO ISLAND OPEN LAND TRUST 57-1007436 Page 5 Part V . Statements Regarding Other IRS Filings and Tax Compliance Yes No Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable X gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X this return? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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, secunties account, or other financial X If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Did the organization solicit any contributions that were not tax deductible? X 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6**b** Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of more than X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? X 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as X required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? X Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: Gross income from members or shareholders

Gross income from other sources (Do not net amounts due or paid to other sources against

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

amounts due or received from them)

11b

Part VI • Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u> </u>	tion A. Governing Body and Management		Tu	
	For each "Vee" response to lines 2. This leave and for a "Ne" response to lines 9 or 9h halour describe the		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
10	circumstances, processes, or changes in Schedule O See instructions. Enter the number of voting members of the governing body		l	
1a h	Enter the number of voting members of the governing body Enter the number of voting members that are independent 1b 15	┪		
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-	1	
2		2	Ť	x
•	any other officer, director, trustee, or key employee?	 	+	
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		x
	supervision of officers, directors or trustees, or key employees to a management company or other person?	4	x	<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	5	1	х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	6	<u> </u>	X
6 7-	Does the organization have members or stockholders?	 		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	- _		v
	of the governing body?	7a 7b	1	X
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	/6		_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
a	The governing body?	8a	X	├─-
b	Each committee with authority to act on behalf of the governing body?	8b	X	-
9a	Does the organization have local chapters, branches, or affiliates?	9a	-	X
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	1	1	
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	 —	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	Ι.		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	<u> </u>
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at		l	
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X	
Sec	tion B. Policies		_	_
		[45	Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		<u> </u>
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		<u> </u>	
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	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," has the organization adopted a written policy or procedure requiring the organization to evaluate		ł	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		İ	
	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 ▶ SC			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.			
	X Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: MARIAN BRAILSFORD PO BOX 1			
EI		<u>3-86</u>	9-9	<u>004</u>
_				

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100.000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest <u>compensated employees</u>; and former such persons.

(A) Name and Title	(B) Average	Posi	tion (C) k all t	hat ap	oply)	(D) Reportable	(E) Reportable	(F) Estimated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
ROBERT E. LEE PRESIDENT				x				o	0		
ALEX S CRAWFOR	D JR								-		
VICE PRES				X	ŀ			o	O	(
CHARLES CALLAH	AN										
TREASURER	_			X				0	0		
FISHER C. WALT SECRETARY	ER JR			x				o	0		
MARK CRAWFORD BOARD								o	0	(
DR. SIDNEY A.	CAUTHREAUX										
BOARD								0	0		
WALTER HUNDLEY BOARD	· !							o	o	(
PAMELA JACOBS BOARD								0	0		
JAMES O. KEMPS BOARD	ON							0	0	(
I. JENKINS MIK BOARD	ELL, JR							0	0		
CHALMERS W. PO BOARD								0	0		
NANCY M SANDEL BOARD	ı							o	0		
SUE THORNTON BOARD								o	o	C	
ELLEN E. UNGER BOARD								0	0	(
							_				

(A) Name and title	(B) Average	_		chec	Ţ-	that a		_ noportation	(E) Reportable	(F) Estimated				
·	hours per week	Highest compensated employee Key employee Officer Institutional trustee Individual trustee or director				Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations				
		:												
									_					
														
									,					
-														
1b Total .		<u> </u>					<u> </u>		· · · · · · · · · · · · · · · · · · ·			_		
	viduals (including those in	1a) v	who	rece	ived	more	e tha	an \$100,000 in reportable o	compensation from the					
organization P	······································					•						Yes N		
3 Did the organization I employee on line 1a?	list any former officer, dire? If "Yes," complete Scheo	ector dule :	or to	ruste sucl	e, k	ey er lividu	nplo al	yee, or highest compensat	ed		3	_ k		
4 For any individual list	ted on line 1a, is the sum	of re	porta	able	com	pens	atio	n and other compensation s," complete Schedule J for						
individual 5 Did any person listed	d on line 1a receive or acc	rue c	comp	ensa	ation	fron	n an		 r		4	X		
services rendered to Section B. Independent (the organization? If "Yes,	" con	nplet	te So	hed	ule J	for	such person			5	<u> </u>		
	or your five highest comp	ensa	ted II	ndep	end	ent c	ontr	actors that received more t	han \$100,000 of					
compensation with a	(A) Name and business address							Descript	(B) ion of services		Cor	(C) npensation		
											-			
			<u>-</u>	_					-		_			
										-				
			_							-	·			
2 Total number of indep	pendent contractors (inclu	dıng	thos	e in	1) w	ho re	ecei	ved more than \$100,000 in						
compensation from the	he organization 🕨								 		0	990 (200		

P	irt V	III . Statem	ent of Re	venue)					
	•						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
					·			revenue	10401100	512, 513, or 514
Program Service Revenue Contributions, gifts, grants and other similar amounts	1a	Federated cam		1a						
ge	Ь	Membership du		1b						
햜	C	Fundraising even	•	1c		6,345			_	1
يقتو	d	Related organiz	zations	1d						
S.E	е	Government grants (d	contributions)	1e	1	00,000	•			
ΞĒ	f	All other contributions	, gifts, grants,							
혈축		and similar amounts i		1f	6,9	97,754				
FP	a	Noncash contributions	s included in lines			60,000				
ပ္ပန	h	Total. Add lines			-,-	, .	7,104,099			
_	 -	_ rotal. Add lines	3 1a-11	-	-	Buen Code				<u> </u>
Ž						Busn. Code	***************************************			160 050
Š	2a	• •	IPS		• •		168,259			168,259
e E	b						<u></u>			
Š	С									
Se	d									
a	9									
ğ	f	All other progra	ım service re	venue						
<u>.</u>	g	Total. Add lines				>	168,259			
	3	Investment inco		a dıvide	nds. intere	est. and	,			
		other similar an	=	3		•	18,177	18,177		
	4	Income from in	•	 2v_oven	ant hand a	roceeds				-
			vesument or t	ax-cxcii	npt bond p	loceeds P				
	5	Royalties	() D							
	_		(ı) Rea		(11) P	ersonal				
	6a	Gross Rents			-					
	b	Less rental exps			ļ					
	С	Rental inc or (loss)			<u></u>		•			
	_d	Net rental incor	ne or (loss)			. ▶				l
	7a	Gross amount from sales of assets	(ı) Secuni	ies	(11)	Other				
		other than inventory								
	ь	. 'F			1		1			
	_	basis & sales exps					:		•	
	_	T			+					
	C		۵۱		٠		,			f
	d	Net gain or (los		4-						
	Ва	Gross income from	n tunaraising e	vents						
2		(not including \$		•			·			
8		of contributions re	-	Ic).						
8		See Part IV, line 1	8	. a	<u></u>					
Other Reven	b	Less: direct exp	enses	b	L					
ŏ	C	Net income or (loss) from fu	ndraisin	g events .	. 🕨				
	9a	Gross income from	n gaming activi	ties					•	
		See Part IV, line 1	9	а						
	ь	Less: direct exp		b					,	
		Net income or (•			•				
1		Gross sales of i		-	<u> </u>	· · · · ·				
		returns and allo	-						-	
				a						
		Less: cost of go		. b						
	С	Net income or (•		·····		
ļ		Miscel	laneous Reven	ue .		Busn. Code			<u> </u>	
	11a									
	b									
	c		- ••							
	d	All other revenu	 ie		•			-		
	6	Total. Add lines		•	• • !	─			····	
ļ	12	Total Revenue.		20.3	45647			······································		
l					¬, ט, טם, <i>ו</i>	u, oo,	7,290,535	18,177	0	168,259
		9c, 10c, and 11	<u> </u>				1,290,333			100,239

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must co	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
_	organizations in the U.S. See Part IV, line 21	-			······································
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the		į.		
	U.S 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 salanes and wages	96,559	57,935	28,968	9,656
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees): °				
а	Management				
ь	Legal				
С	Accounting				
d	Lobbying				
ө	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	8,748	5,249	2,624	875
17	Travel	5,723	3,434	1,717	572
18	Payments of travel or entertainment expenses				<u> </u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			"	
20	Interest	9,443	9,443		
21	Payments to affiliates		5,755		
22	Depreciation, depletion, and amortization	933	933		
23	Insurance				
23	insurance				
24	Other expenses. Itemize expenses not		1		
24	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
_	ACQUISITION FEES	18,052	18,052		
a	· · · · · · · · · · · · - · · · ·	12,157	12,157	<u> </u>	
b	CORRIDOR MANAGEMENT FEE	9,924	5,979	2,959	986
C	PROFESSIONAL FEES	7,853	3,927	2,333	3,926
d	PUBLICIATIONS	5,760	3,456	1,728	576
8	SUPPLIES				1,926
f	All other expenses	30,089	23,815	4,348	
25	Total functional expenses. Add lines 1 through 24f	205,241	144,380	42,344	18,517
26	Joint Costs. Check here If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
				<u>L</u>	Form QQ (2008)

<u>E</u> :	<u> </u>	<u>Dalance Sheet</u>						_			
		•				(A) Beginning of year			(B End of		
	1	Cash—non-interest bearing				91,224	1	·		<u>, 00</u>	784
	2	Savings and temporary cash investments			· ·	392,341				70,	
	3	Pledges and grants receivable, net	• • •		· · ·		3	_		,	
	4	Accounts receivable, net	•••		•		4		1	12,	488
	5	Receivables from current and former officers, directors, t	trustees			-	1				
	ľ	employees, or other related parties Complete Part II of S		•			5				
	6	Receivables from other disqualified persons (as defined		••	·		-				
	ľ	4958(f)(1)) and persons described in section 4958(c)(3)(l									
		Part II of Schedule L	B). COII	iipiete	İ	:	6				
m	7	Notes and loans receivable, net	•	•	· -		7				
		Inventories for sale or use	•		·		8				
Assets	8	••••	•		· -	 -	 				
⋖	40-	Prepaid expenses and deferred charges	1 40-1	31,947	367		9				
	10a	Land, buildings, and equipment: cost basis	10a	31,341	,201						
	D	Less: accumulated depreciation. Complete			933	25 047 042	1 1	2	1 0	16	224
	۱.,	Part VI of Schedule D	10b		333	25,047,942			1,9	<u> </u>	<u> </u>
	11	Investments—publicly traded securities					11				
	12	Investments—other securities. See Part IV, line 11			· · -		12				
	13	Investments—program-related. See Part IV, line 11	•		-		13				
	14	Intangible assets			· · · - }-		14				
	15	Other assets. See Part IV, line 11				05 501 505	15		<u> </u>		
	16	Total assets. Add lines 1 through 15 (must equal line 34	1)			25,531,507	16		2,4:		
	17	Accounts payable and accrued expenses			· -		17			<u> </u>	186
	18	Grants payable			-		18				
	19	Deferred revenue			F		19				
S	20	Tax-exempt bond liabilities			. -		20				
Ë	21	Escrow account liability. Complete Part IV of Schedule D			-		21				
Liabilities	22	Payables to current and former officers, directors, trustee	-								
ia		employees, highest compensated employees, and disqu	alified								
_		persons. Complete Part II of Schedule L	•		-		22				
	23	Secured mortgages and notes payable to unrelated third	parties		-		23				
	24	Unsecured notes and loans payable					24				
	25	Other liabilities. Complete Part X of Schedule D			. L	380,000				99,	
_	26	Total liabilities. Add lines 17 through 25			<u> </u>	380,000	26		30	02,	928
nces		Organizations that follow SFAS 117, check here ▶ 🔀	and								
Ĕ	1	complete lines 27 through 29, and lines 33 and 34.									
ala	27	Unrestricted net assets				391,420	27			38,:	
or Fund Bala	28	Temporanly restricted net assets			L	237,087	28			65,	
밀	29	Permanently restricted net assets		.	. -	24,523,000	29	3	1,5	23,	<u>000</u>
교		Organizations that do not follow SFAS 117, check here	e▶ L								
ō		and complete lines 30 through 34.				•				-	
ţ	30	Capital stock or trust principal, or current funds			L		30				
Assets	31	Paid-in or capital surplus, or land, building, or equipment	fund		L		31				
As.	32	Retained earnings, endowment, accumulated income, or	other f	unds	L	 	32				
Net	33	Total net assets or fund balances			L	25,151,507	33		2,12		
Z	34	Total liabilities and net assets/fund balances		<u> </u>		25,531,507	34	3	2,42	<u> 29, '</u>	<u>729</u>
P	art X	Financial Statements and Reporting									
		_		_	_					Yes	No
1	Acc	counting method used to prepare the Form 990: 🔲 Ca	ash [X Accrual	Oth	ner					İ
28	We	ere the organization's financial statements compiled or revi	iewed b	y an independer	t account	ant?			2a	X	<u> </u>
b	We	ere the organization's financial statements audited by an in	ndepend	dent accountant?					2b	X	
c	: If "	Yes" to lines 2a or 2b, does the organization have a comm	nittee th	at assumes resp	onsibility	for oversight of					l
	the	e audit, review, or compilation of its financial statements a	nd sele	ction of an indep	endent ac	countant?			2c	X	<u> </u>
3a	As	a result of a federal award, was the organization required	to unde	ergo an audit or a	udits as s	et forth in					l
	the	Single Audit Act and OMB Circular A-133?		•••					3a		<u> </u>
b	lf "	Yes," did the organization undergo the required audit or au	udits?						3ь		ĺ

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EDISTO ISLAND OPEN LAND TRUST

Employer identification number 57-1007436

P	art I	Reas	on for Public Charity	Status (All organizations	s must o	complet	te this	part.)	(see i	nstruc	tions	5)	_		
The	orga	nization is not	a private foundation because	se it is: (Please check only one	organizat	ion.)									
1		A church, co	nvention of churches, or ass	ociation of churches described	in section	n 170(b)(1)(A)(i).								
2	П		scribed in section 170(b)(1)(
3	П			ce organization described in se	ction 170	(b)(1)(A)(iii). (Atta	ach Sch	edule H	.)					
4	П			d in conjunction with a hospital							ospital	's name),		
	_	city, and stat	· · · · · · · · · · · · · · · · · · ·	,			•	~ ~ ~	•		•		•		
5		-		of a college or university owned	or operat	ed by a q	ovemme	ental uni	t descri	bed in	• • •	•••	•••	•	
			(b)(1)(A)(iv). (Complete Part			, 3									
6	П			overnmental unit described in s	ection 17	70(b)(1)(A)(v).								
7	$\overline{\mathbf{x}}$			substantial part of its support fr				from the	genera	al public					
-			section 170(b)(1)(A)(vi). (C		om a go				90	pub	•				
8				170(b)(1)(A)(vi). (Complete Part	: 11.3										
9	Н	-		1) more than 33 1/3 % of its sur	•	contribut	ions me	embersh	in fees	and or	าดรร				
•	ш	_		npt functions—subject to certain					-	_					
		-		nd unrelated business taxable in	•	•	•								
	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)														
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)														
11	Н	•	•	exclusively for the benefit of, to	•			•		•					
•	ш	_	•	ed organizations described in s	•						1				
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III–Functionally Integrated d Type III–Other														
8	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified														
-	_	persons other than foundation managers and other than one or more publicly supported organizations described in section													
		509(a)(1) or section 509(a)(2).													
f				ermination from the IRS that it is	a Type I.	Type II.	or Type	III suppo	ortına						
			check this box				٠,	• •	Ū					П	
g		Since Augus	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution fron	any of th	 ne	•	•					_	
•		following per	-	. , , ,		•									
				ontrols, either alone or together	with perso	ons descr	ibed ın (ıi)					Yes	No	
				f the supported organization?	•		`	•				11g(i)			
			member of a person describ	• • •	•		•	•	••	•	••	11g(ii)			
			•	described in (i) or (ii) above?		• •			•		• •	11g(iii)			
h				he organizations the organization	on suppor	ts.			•		• • • •				
m	Name	of supported	(ii) EIN	(iii) Type of organization	(lv) is the	organization	(v) Did v	ou notify	/vi\	s the		(vii) Am	ount of		
١٠,		anızatıon	(,	(described on lines 1–9	1	sted in your		nization in	organizat			supp			
				above or IRC section	governing	document?	١,,	of your		zed in the					
				(see instructions))	Yes	No	Yes	nort?	Yes	S?	l				
					103	- 110	100				<u> </u>				
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					<u> </u>										
					İ										
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		-					·								
Γota	ı														

10%-facts-and-circumstances test—2007. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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 A (Form 990 or 990-EZ) 2008

Page 3

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (d) 2007 (c) 2006 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on ıts behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1-5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 17 % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

	om 990 or 990-E							57-100743		Page 4
Part IV .								red by Part II, ion. (see instr		
•								(
	-	•					 			• ••
				-			 			
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization EDISTO ISLAND OPEN LAND TRUST 57-1007436 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 21 2a Total number of conservation easements 1,161.50 Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _ _ _ _ Number of states where property subject to conservation easement is located > 1 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? . . . Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section l No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche		LAND OPEN L			007436	Page 2
Pa	rt 掛 Organizations Maintaining	Collections of A	rt, Historical Trea	sures, or Other	Similar Ass	ets (continued)
3	Using the organization's accession and other items (check all that apply):	records, check any of	the following that are a	significant use of its	collection	
а	Public exhibition	d \prod Lo	an or exchange progra	ms		
b	Scholarly research	e Cott				
c	Preservation for future generations	7 🗀 3 .	···		. – – – -	_
4	Provide a description of the organization's co	llections and explain ho	ow they further the orga	anization's exempt po	urpose in	
5	During the year, did the organization solicit or	receive donations of a	irt, historical treasures,	or other similar		
	assets to be sold to raise funds rather than to				"Voo" to	Yes No
Pa	Trust, Escrow and Custod Part IV, line 9, or reported a				ed Yes to	Form 990,
1a	Is the organization an agent, trustee, custodia	an or other intermedian	y for contributions or of	ther assets not		
	ıncluded on Form 990, Part X?		•			∐ Yes ∐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the follow	wng table:			
						Amount
c	Beginning balance				1c	
	Additions during the year			••	1d	
8	Distributions during the year	•		•	10	
•	Ending balance	-	•		1f	,
2-	Did the organization include an amount on Fo	 orm 000 Part Y line 21				Yes No
	If "Yes," explain the arrangement in Part XIV.		• • •			☐ 162 ☐ 140
	Endowment Funds. Complete V		answered "Ves"	to Form 990 Pa	rt IV line 10	<u> </u>
F 4	Lindowinient i dilds. Compi	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	
4	B	(a) Current year	(b) Filor year	(C) TWO years back	(u) Three years	Dack (6) Four years back
	Beginning of year balance			ļ	<u></u>	
	Contributions					
С	Investment earnings or losses				ļ	
d	Grants or scholarships				ļ	
е	Other expenditures for facilities		ŀ			
	and programs					
f	Administrative expenses					
g	End of year balance		-			
2	Provide the estimated percentage of the year	end balance held as:				
а	Board designated or quasi-endowment	%				
	Permanent endowment ▶ %	'				
	Term endowment ▶ %					
	Are there endowment funds not in the posses	ssion of the organization	n that are held and ad-	ninistered for the		
Ja		Sion of the organization	ii ulat ale lielu allu dul	innatered for the		Yes No
	organization by: (i) unrelated organizations					
	•	••				3a(i)
	(ii) related organizations					3a(ii)
	If "Yes" to 3a(ii), are the related organizations		• • •			[3b]
4	Describe in Part XIV the intended uses of the			O Dart V Pros 4		
۲a	rt VI Investments—Land, Buildi					(4) P · ·
	Description of investment	(a) Cost or other bas	' '	1	preciation	(d) Book value
		(investment)	basis (othe	<u> </u>		
1a	Land		31,937	,942		31,937,942
b	Buildings					
С	Leasehold improvements					
d	Equipment					
	Other		9	, 325	933	8,392
	Add lines 1a_1e (Column (d) should equal E	orm 990 Part Y colum		•		31 946 334

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 EDISTO ISLAND OPEN LA		57-1007436	Page 3
Part VII Investments—Other Securities. See Form 990), Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of	
(including name of security)		Cost or end-of-year	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			. =
-			
			
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments—Program Related. See Form 99			-
(a) Description of investment type	(b) Book value	(c) Method of	
- ·- ·- ·		Cost or end-of-yea	ar market value
		 	
			
	 		
	<u>"</u>	·	·
			
<u> </u>			-
			
Total. (Column (b) should equal Form 990. Part X. col. (B) line 13.)		······································	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.) Part X Other Assets. See Form 990, Part X, line 15.			
(a) Description		I	(b) Book value
(a) Description	- 		(b) book value
	·		
			
	_		
	 		
······································			
		<u>.</u>	
			-
	-		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)	-		
Part X Other Liabilities. See Form 990, Part X, line 25	<u> </u>		_
(a) Description of liability	(b) Amount		
Federal income taxes			
NOTE PAYABLE	295,000		
CAPITAL LEASE PAYABLE	4,742		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)	299,742		
In Part XIV, provide the text of the footnote to the organization's financial stat	ements that reports the org	anization's liability for	
uncertain tax positions under FIN 48.			

Sche	Edule D (Form 990) 2008 EDISTO ISLAND OPEN LAND TRUST 57-10074	<u> 36 </u>	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,290,535
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	205,241
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	7,085,294
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior penod adjustments	7	
8	Other (Describe in Part XIV)	8	-110,000
9	Total adjustments (net). Add lines 4-8	9	-110,000
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	6,975,294
Pa	at XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	•
1	Total revenue, gains, and other support per audited financial statements	1	7,290,535
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	_	
b	Donated services and use of facilities 2b		
С	Recoveries of pnor year grants 2c		
d	Other (Describe in Part XIV)		
0	Add lines 2a through 2d	2е	
3	Subtract line 2e from line 1	3	7,290,535
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	_	
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)	5	7,290,535
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	
1	Total expenses and losses per audited financial statements	1	315,241
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a	_	
b	Prior year adjustments 2b	4	
C	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)	의	
8	Add lines 2a through 2d	2e	110,000
3	Subtract line 2e from line 1	3	205,241
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	」	
b	Other (Describe in Part XIV)	_	
C	Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	205,241
	rt XIV Supplemental Information		<u>,</u>
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
	tb, Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.		
_1	PART II, LINE 9 - ACCOUNTING FOR CONSERVATION EASEMENTS		- -
_2	A_CONSERVATION EASEMENT IS AN AGREEMENT BETWEEN A LANDOWNE	R AN	D_THE
(DRGANIZATION IN WHICH THE LANDOWNER RELINQUISHES SOME OR A	LL O	F THE RIGHTS
_			- -
'	O DEVELOP THE PROPERTY. THE EASEMENT IS PUBLICLY RECORDED	_AND_	<u> IS BINDING </u>
_(ON ALL FUTURE OWNERS OF THE PROPERTY. THE ORGANIZATION'S P	RINC:	IPAL
_1	RESPONSIBILITY IS TO ENSURE COMPLIANCE WITH THE TERMS OF T	HE_E	ASEMENT. IT _
1	ÆETS THIS RESPONSIBILITY BY PERIODICALLY INSPECTING THE P	ROPE	RTY AND, IF

933

SCHEDULE M (Form 990)

NonCash Contributions

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

EDISTO ISLAND OPEN LAND TRUST

Employer identification number 57-1007436

Pa	ert I Types of Property							
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determinin revenues	9		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications	_						
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Secunties—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	SecuritiesMiscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation	[
	contribution (other)	X	3	3,360,000				
15	Real estate—Residential							
16	Real estate—Commercial				4			
17	Real estate—Other							
18	Collectibles .							
19	Food inventory						_	
20	Drugs and medical supplies						_	
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	Other ►()							
26	Other ►(
27	Other ▶()							
28	Other ►(
29	Number of Forms 8283 received by	•	•					
	which the organization completed Fo	orm 8283,	Part IV, Donee Acknowl	edgement	29		Yes	No
30a	During the year, did the organization					П	162	-140
	it must hold for at least three years f			on, and which is not require	ed to de	20-		x
1.	used for exempt purposes for the en		g penod?			30a		
b	If "Yes," describe the arrangement in							ĺ
31	Does the organization have a gift ac	ceptance p	policy that requires the re	eview of any non-standard] ,,]	x	İ
22-	contributions?	ed poet-or	or rolated arganizations	to collect process as sall a	on-each	31_	Δ.	
32a	Does the organization hire or use the	ru parties (or related organizations	to solicit, process, or sell fi	ui-casii	32a		x
	contributions? If "Yes," describe in Part II.	•				320		<u></u>
ь 33	If the organization did not report reve	anue in a	hlumn (c) for a type of pr	operty for which column (a)) is checked			į
J J	describe in Part II.	onuco III C	nami (c) for a type of pr	operty for winds column (a	, is dicored,			
	rivacy Act and Panerwork Reduction A	ct Notice s	on the Instructions for E		Schedule	M (Fo	m 990	1 2008

Part II . Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
· · · · · · · · · · · · · · · · · · ·

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047
2008
Open to Public

Inspection

EDISTO ISLAND OPEN LAND TRUST

Employer identification number 57-1007436

FORM 990, PART VI, LINE 4 - SIGNIFICAL	NT CHANGES TO ORGANIZATIONAL DOCUMENTS
ON AUGUST 25, 2008, THE BY-LAWS AND A	RTICLES OF INCORPORATION OF THE
ORGANIZATION WERE CHANGED TO FORMALIZE	E THE DELEGATION OF RESPONSIBILITY FOR
NEGOTIATION OF THE FINAL TERMS AND CO	NDITIONS OF THE EASEMENT TO THE
EXECUTIVE DIRECTOR AND/OR ONE OR MORE	DIRECTORS WITH THE EXECUTIVE
DIRECTOR.	
	TION'S PROCESS USED TO REVIEW FORM 990
A COPY OF THE FORM 990 WAS PROVIDED TO	O EACH BOARD MEMBER. THE BOARD WAS
GIVEN ONE WEEK TO REVIEW THE TAX RETU	RN AND RAISE ANY ISSUES. THIS REVIEW
OCCURRED AFTER THE OFFICERS THOROUGHL	Y REVIEWED FORM 990 WITH THE PREPARER.
FORM 990, PART VI, LINE 11 - OFFICERS	
SUE THORNTON	
1/2 COTTMU DAMMEDY	
CHARLESTON, SC 29401	
ALEX S. CRAWFORD JR	
169 BROAD ST	
CHARLESTON, SC 29401	
MARK CRAWFORD	
PO BOX 597	
CHARLESTON, SC 29403	

Schedule O (Form 990) 2008 Page 2 **Employer identification number** Name of the organization EDISTO ISLAND OPEN LAND TRUST 57-1007436 CHALMERS POSTON JR 557 SAVANNAH HWY CHARLESTON, SC 29407 WALTER HUNDLEY PO BOX 31189 CHARLESTON, SC 29417 DR. SIDNEY A. GAUTHREAUX PO BOX 9 EDISTO ISLAND, SC 29438 PAMELA G. JACOBS 2012 BAILEY ISLAND LANE EDISTO ISLAND, SC 29438 JAMES O. KEMPSON PO BOX 127 EDISTO ISLAND, SC 29438 DAVID LYBRAND 1405 PALMETTO BLVD EDISTO ISLAND, SC 29438 I. JENKINS MIKELL JR PO BOX 486 EDISTO ISLAND, SC 29438

Employer identification number Name of the organization 57-1007436 EDISTO ISLAND OPEN LAND TRUST NANCY M SANDEL 3917 LYBRAND STREET EDISTO BEACH, SC 29438 ELLEN E. UNGER PO BOX 549 EDISTO ISLAND, SC 29438 ROBERT E. LEE 8449 PALMETTO POINT RD EDISTO ISLAND, SC 29438 CHUCK CALLAHAN 2034 BAILEY ISLAND LANE EDISTO ISLAND, SC 29438 FISHER C. WALTER JR PO BOX 3310 EDISTO ISLAND, SC 29438 FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY THE ORGANIZATION REQUIRES THAT IF ANY BOARD MEMBER (OR MEMBER OF ANY BOARD MEMBER'S FAMILY) IS INVOLVED IN AN EASEMENT THAT THE BOARD MEMBER BE RECUSED FROM THE DISCUSSION OF AND VOTE ON SUCH EASEMENT. AFTER THE EASEMENT IN QUESTION IS RESOLVED, THE BOARD MEMBER MAY RETURN TO ADDRESS OTHER BOARD BUSINESS ON THE AGENDA.

AREA ON THEIR WEBSITE.

Schedule O (Form 990) 2008 Name of the organization **Employer identification number** 57-1007436 EDISTO ISLAND OPEN LAND TRUST FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL YES, DATA FROM THE LAND TRUST ALLIANCE WAS USED. FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS THE ORGANIZATION DOES NOT HAVE ANY KEY EMPLOYEES AND NONE OF THE OFFICERS OR BOARD MEMBERS RECEIVES COMPENSATION. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE FORM 990 IS AVAILABLE ON DUN & BRADSTREET'S WEBSITE AS WELL AS GUIDESTAR.COM. FURTHERMORE, THE ORGANIZATION HAS ASKED THE PREPARING CPA FIRM TO PLACE THE FINANCIAL STATEMENTS, FORM 990 AND VARIOUS GOVERNING DOCUMENTS ON THE FIRM'S WEBSITE. THE ORGANIZATION WILL PLACE A LINK TO THIS

Form 990	1		Spec	ial Event	s Schedu	ule			1 2000
Form 990	For calenda	For calendar year 2008, or tax year beginning , and end					2008		
ame '		,,	,			,		Employer lo	lentification Number
EDISTO ISLA	ND OPEN	LAND	TRUST					57-100	7436
Gross receipts Less contributions Gross revenue Less direct expense Net income (loss)	s	0 0 0 0	(B)	0 0 0 0 0	(C)	0 0 0 0 0	Others	0 0 0 0 0	Total 0 0 0 0 0 0 0 0
Description: (A) (B) (C) Other		IAL EV	ENTS						