



### State of South Carolina Contribution Expenditure Report

This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2024.

#### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$200,000.00	L080 - Department of Children's Advocacy	

#### Organization Information

Entity Name	Children's Trust of South Carolina
Address	1330 Lady St. Ste. 310
City/State/Zip	Columbia, SC 29201
Website	SCChildren.org
Tax ID#	57-0785431
Entity Type	Nonprofit Organization

#### Organization Contact Information

Name	Andrea Tucker
Position/Title	Chief Financial Officer
Telephone	803-744-4030
Email	Atucker@SCChildren.org

#### Reporting Period

Reporting Period	Quarter 2: October 1, 2023 - December 30, 2023
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#### Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
Salaries and Benefits	\$40,000.00		\$10,000.00			\$10,000.00	\$30,000.00
Family Resource Centers	\$40,000.00					\$0.00	\$40,000.00
Parent Engagement	\$40,000.00		\$7,910.00			\$7,910.00	\$32,090.00
Thriving Families Safer Children Initiative	\$25,400.00					\$0.00	\$25,400.00
Administrative	\$54,600.00		\$13,650.00			\$13,650.00	\$40,950.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
<b>Grand Total</b>	<b>\$200,000.00</b>	<b>\$0.00</b>	<b>\$31,560.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$31,560.00</b>	<b>\$168,440.00</b>

#### Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year) :

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#### Expenditure Certification

The Organization certifies that the funds have been expended in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose.

Andrea Tucker  
 Signature  
 Andrea Tucker  
 Printed Name

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 CFO  
 Title  
 \_\_\_\_\_  
 Date