### **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 2021

Open to Public Inspection

Department of the Treasury

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

Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. For the 2021 calendar year, or tax year beginning 01/01/2021 and ending 12/31/2021 C Name of organization SMITH SHAVER LAW SCHOOL SCHOLARSHIP FUND INC D Employer identification number Check if applicable: R Doing business as 20-2749954 Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Room/suite 4440 BENT TREE FARM RD 336-413-0695 Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code WINSTON SALEM, NC 27106 G Gross receipts \$ 1,403,607 Amended return **H(a)** Is this a group return for subordinates? ☐ **Yes** ✓ **No** Application pending F Name and address of principal officer: KEITH W VAUGHAN 4440 BENT TREE FARM RD, WINSTON SALEM, NC 27106 **H(b)** Are all subordinates included? Yes No Tax-exempt status: 501(c)(3) 4947(a)(1) or 501(c) ( ) ◀ (insert no.) If "No." attach a list. See instructions. Website: ► www.smithshaverscholarship.org **H(c)** Group exemption number ▶ Form of organization: 🗸 Corporation Trust Association L Year of formation: 2005 M State of legal domicile: NC Part I Summary 1 Briefly describe the organization's mission or most significant activities: TO PROMOTE AND ENCOURAGE EDUCATIONAL OPPORTUNITY AND EXCELLENCE THROUGH SCHOLARSHIPS, BASED PRIMARILY ON NEED, FOR NORTH CAROLINA Activities & Governance RESIDENTS ATTENDING SUPPORTED NORTH CAROLINA LAW SCHOOLS 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 7 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 0 6 6 Total number of volunteers (estimate if necessary) . . . . . . . . . . . . 7 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . . . . 0 0 Revenue 9 Program service revenue (Part VIII, line 2g) 0 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . 86,392 561.053 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 0 0 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 86,392 561.053 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 300,000 300,000 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 Professional fundraising fees (Part IX, column (A), line 11e) 16a 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 34,002 31,310 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 331,310 334,002 Revenue less expenses. Subtract line 18 from line 12 . . . . . 19 -244,918 227,051 Assets or designation of designation of the designa **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 7,017,678 7,448,879 21 Total liabilities (Part X, line 26) . 300,000 300,000 22 Net assets or fund balances. Subtract line 21 from line 20 6,717,678 7,148,879 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here William Edwards, Director, Secretary, Treasurer Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | if **Paid** self-employed **Preparer** Firm's name Firm's EIN ▶

May the IRS discuss this return with the preparer shown above? See instructions

Firm's address ▶

Use Only

Phone no.

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	TO PROMOTE AND ENCOURAGE EDUCATIONAL OPPORTUNITY AND EXCELLENCE THROUGH SCHOLARSHIPS, BASED
	PRIMARILY ON NEED, TO NORTH CAROLINA RESIDENTS ATTENDING THE LAW SCHOOLS AT CAMPBELL UNIVERSITY,
	DUKE UNIVERSITY, NORTH CAROLINA CENTRAL UNIVERSITY, THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL,
	AND WAKE FOREST UNIVERSITY.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$300,000 including grants of \$300,000 ) (Revenue \$0)
	THE SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC., THROUGH ITS SUPPORTED ORGANIZATIONS, AWARDED
	NEW SCHOLARSHIPS TO NORTH CAROLINA RESIDENTS IN THE AMOUNT OF \$300,000.00, PAYABLE OVER THREE (3)
	YEARS OF LAW SCHOOL (\$100,000.00 PER ACADEMIC YEAR). DURING 2021, THE SCHOLARSHIP FUND PAID \$300,000.00
	FOR OVER FIFTY (50) STUDENTS ATTENDING THE SUPPORTED LAW SCHOOLS. FOR THE PERIOD 2006-2021, THE
	SCHOLARSHIP FUND PAID \$4,500,000.00 FOR SCHOLARSHIPS TO THE SUPPORTED LAW SCHOOLS.
4b	(Code: \/Evpansos \\ including greats of \\ \/Pavenue \\
40	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )
4e	Total program service expenses ► 300,000

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

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	,	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		,
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	20		
	\$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		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	051-		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		~
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		~
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		_
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			<u> </u>
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		·
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	V	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	_	
Part		, ,,,		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on 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?			
	reconacie camino (cambino) withings to Drize Winners (	1 1 4	1	i .

Form 99	00 (2021)		F	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
<b>2</b> a	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 0			
b	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. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>&gt;</b>
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		>
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		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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		~
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		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		\ \
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note: See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which			
С	the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		<b>&gt;</b>
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 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. Enter the number of voting members included on line 1a, above, who are independent . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 1 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official . . . . . . . . 15a Other officers or key employees of the organization . . . . . . . . . . . . 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a v 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ✓ Upon request Other (explain on Schedule O) Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ W DAVID EDWARDS, (336)391-5264

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

See the 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.

				(6	C)					
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and title	Average					e tnan d is both		Reportable	Reportable	Estimated amount
	hours	office	officer and a director/trustee)					compensation from the	compensation from related	of other
	per week (list any	Individual trustee or director	Ins	Officer	<u>6</u>	Hig em	Former		organizations (W-2/	compensation from the
	hours for	direc	titut	icer	Key employee	hes	mer	1099-MISC/	1099-MISC/	organization and
	related organizations	ot a	ione		oldı	9 t co	'	1099-NEC)	1099-NEC)	related organizations
	below	rust	1		yee	npe				
	dotted line)	ee	Institutional trustee			Highest compensated employee				
						ed				
KEITH W VAUGHAN	0.50									
DIRECTOR, VICE PRESIDENT, VICE CHAIR	0.00	~		~				0	0	0
G EUGENE BOYCE	1.20									
DIRECTOR, PRESIDENT, BOARD CHAIR	0.00	~		~				0	0	0
W DAVID EDWARDS	2.50									
DIRECTOR, SECRETARY, TREASURER	0.00	~		~				0	0	0
ARCH T ALLEN	0.50									
DIRECTOR	0.00	~						0	0	0
WANDA G BRYANT	0.50									
DIRECTOR	0.00	~						0	0	0
C COLON WILLOUGHBY JR	0.50									
DIRECTOR	0.00	~						0	0	0
JOHN C MARTIN	0.50									
DIRECTOR	0.00	~						0	0	0
		_								

Part	VII Section A. Officers, Directors, 7	Trustees,	Key l	Em	plo	yee	s, an	d F	lighest Compe	nsated Emplo	yees (continued)
					(0	C)					
	(A)	(B)	(-1	4 1		ition	. 41		(D)	(E)	(F)
	Name and title	Average	,				e than o is both		Reportable	Reportable	Estimated amount
		hours per week	officer and a director/t						compensation from the	compensation from related	of other compensation
		(list any	or c	Ins	Officer	<u>\$</u>	Hig em	ο̈́		organizations (W-2/	
		hours for	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former	1099-MISC/	1099-MISC/	organization and
		related organizations	tor la	ona		plo	e cor		1099-NEC)	1099-NEC)	related organizations
		below	ruste	tru		/ee	nper				
		dotted line)	) e	stee			nsati				
							ed				
			-								
			-								
			-								
			-								
			1								
			1								
1b	Subtotal							<b>&gt;</b>	0	0	0
С	Total from continuation sheets to Part	VII, Section	n A					▶			
d								<b></b>	0	0	0
2	Total number of individuals (including but		d to th	nose	e list	ted	above	e) w	ho received mor	e than \$100,000	of
	reportable compensation from the organi	ization ►							0		
											Yes No
3	Did the organization list any former								-	=	
_	employee on line 1a? If "Yes," complete							-			3 /
4	For any individual listed on line 1a, is the										
	organization and related organizations individual	greater th	an Þ	150	,UUC	) ( ]	i re	S,	complete Sched	dule J for Such	
E					+:					· · · · ·	4
5	Did any person listed on line 1a receive of for services rendered to the organization									lion or individua	
Socti	on B. Independent Contractors	. 11 100, 0	Jonnpi	010		7000	110 0 1	-			5 /
1	Complete this table for your five high	nest comp	ensat	ed	inde	anei	ndent		ontractors that r	eceived more	than \$100,000 of
•	compensation from the organization. Rep										
								. <i>,</i> .			
	<b>(A)</b> Name and business add	Iress							(B) Description of serv	vices	(C) Compensation
None									•		<u> </u>
140116											
2	Total number of independent contractor	ors (includi	ng bu	ut n	ot	limit	ed to	th	ose listed abov	e) who	
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion	<b>&gt;</b>		0		

Page 8

### Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a res	spon	se or note to ar	ny line in this Pa	urt VIII		🗌
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaig	ns .		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b					
عَ وَ	С	Fundraising events		[	1c					
fts,	d	Related organizatio	ns .		1d					
اَعَ ق	е	Government grants			1e					
ns, Sin	f	All other contribution								
tio er.		and similar amounts no	ot incl	uded above	1f					
흱된	g	Noncash contribution								
t g		lines 1a-1f			1g	\$				
a C	h	Total. Add lines 1a-	-1f .			🕨	0			
						Business Code				
<u>ice</u>	2a									
e ⊊	b									
Su	С									
yram Ser Revenue	d									
Program Service Revenue	е									
<u>,</u>	f	All other program se								
	g	Total. Add lines 2a-					0			
	3	Investment income								
		other similar amoun	,				275,450	0	0	275,450
	4	Income from investr	ment (	of tax-exem	pt bo	nd proceeds ►	0	0	0	0
	5	Royalties					0	0	0	0
				(i) Real		(ii) Personal				
	6a	Gross rents	6a		0	0				
	b	Less: rental expenses	6b		0	0				
	С	Rental income or (loss)			0	0				
	d	Net rental income o	r (los	T <sup>'</sup>			0	0	0	0
	7a	Gross amount from		(i) Securiti	es 	(ii) Other				
		sales of assets	_	1,128	3.157	0				
		other than inventory	7a	,						
Revenue	b	Less: cost or other basis								
/eu		and sales expenses .	7b		2,554	0				
Be		Gain or (loss)	7c	285	,603	0				
ē	1	Net gain or (loss)			•	<u>P</u>	285,603	0	0	285,603
Other	8a	Gross income fro		ndraising						
		events (not including of contributions re		0 d on line						
		1c). See Part IV, line			8a					
	<u> </u>	Less: direct expens		+	8b	0				
		Net income or (loss)				_	0		0	0
	с 9а	Gross income			j eve	nts ▶	U		0	0
	ou	activities. See Part			9a	0				
	b	Less: direct expens		+	9b	0				
		Net income or (loss)				-	0	0	0	0
		Gross sales of in			tivitio					
		returns and allowan	ces		10a	0				
	b	Less: cost of goods		1	10b	0				
	C	Net income or (loss)		L			0	0	0	0
S			,			Business Code				
Miscellaneous Revenue	11a									
scellaneo Revenue	b									
elle ye	C									
Se B	d	All other revenue								
Σ	e	Total. Add lines 11a			-	▶	0			
	12	Total revenue. See					561,053	0	0	561,053
										<del></del>

# Part IX Statement of Functional Expenses

Section 50	1(c)(3)	) and 5	501(c)(4,	) orga	nizations	must complet	e all col	lumns. i	4II oti	her o	rganiza	ations m	ust compl	lete colui	mn (A)	L.
		1 100	· · ·								<u> </u>					

	Check if Schedule O contains a response		ein inis Pari IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	0	0		
	individuals. See Part IV, line 22	300,000	300,000		
3	Grants and other assistance to foreign organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6	Compensation not included above to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ .	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (nonemployees):				
a	Management	0	0	0	0
b	Legal	0	0	0	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0			0
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column	34,002		34,002	
9	(A), amount, list line 11g expenses on Schedule O.)	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	0	0	0	0
14	Information technology	0	0	0	0
15 16	Royalties	0	0	0	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials  Conferences, conventions, and meetings.	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23 24	Insurance	0	0	0	0
24	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.)				
a b					
C					
d					
e	All other expenses	0	0	0	0
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	334,002	300,000	34,002	0
-₹	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 this Par	tX		
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	529	1	1,029
	2	Savings and temporary cash investments	56,236	2	230,141
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		_	
"	7	Notes and loans receivable, net	0	6 7	0
šets	8	Inventories for sale or use	0	8	0
Assets	9	Prepaid expenses and deferred charges	0	9	
•	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   10a   0	0		0
	b	Less: accumulated depreciation	0	10c	0
	11	Investments—publicly traded securities	6,960,913		7,217,709
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	7,017,678	16	7,448,879
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	300,000	18	300,000
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
pi		controlled entity or family member of any of these persons	0	22	0
Ë	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	300,000	26	300,000
ses		Organizations that follow FASB ASC 958, check here ► □ and complete lines 27, 28, 32, and 33.			
an	27	Net assets without donor restrictions		27	
Bal	28	Net assets with donor restrictions		28	
þ	20	Organizations that do not follow FASB ASC 958, check here ▶ ✓		20	
Net Assets or Fund Balances		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds	0	29	0
ets	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
SS	31	Retained earnings, endowment, accumulated income, or other funds	6,717,678		7,148,879
∍t A	32	Total net assets or fund balances	6,717,678		7,148,879
ž	33	Total liabilities and net assets/fund balances	7,017,678		7,448,879

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					V
1	Total revenue (must equal Part VIII, column (A), line 12)	1			561	1,053
2	Total expenses (must equal Part IX, column (A), line 25)	2			334	4,002
3	Revenue less expenses. Subtract line 2 from line 1	3			227	7,051
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			6,717	7,678
5	Net unrealized gains (losses) on investments	5			204	4,150
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			7,148	8,879
Part	Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			_		
				_	Yes	No
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other  If the organization changed its method of accounting from a prior year or checked "Other," e.	منمامنہ				
	Schedule O.	кріаін	OII			
•						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_
	If "Yes," check a box below to indicate whether the financial statements for the year were correviewed on a separate basis, consolidated basis, or both:	прпес	or			
	•					
<b>L</b>	Separate basis Consolidated basis Both consolidated and separate basis			2b		~
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were aud	 tod o		20		
	separate basis, consolidated basis, or both:	teu o	II a			
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ereiah	t of			
·	the audit, review, or compilation of its financial statements and selection of an independent accounts			2c		
	If the organization changed either its oversight process or selection process during the tax year, e			-0		
	Schedule O.	, tp				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in	the			
	Single Audit Act and OMB Circular A-133?			3a		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	dergo	1 - 1			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			3b		
						(0004)

Form **990** (2021)

#### SCHEDULE A (Form 990 or 990-EZ)

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

OMB No. 1545-0047

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

Name of the organization Employer identification number
SMITH SHAVER LAW SCHOOL SCHOLARSHIP FUND INC 20-2749954

Pai	Reason for Public Char	rity Status. (Al	l organizations mus	t comple	ete this p	oart.) See instruction	ons.	
The o	organization is not a private founda	tion because it	is: (For lines 1 through	12, chec	k only or	ne box.)		
1	☐ A church, convention of church					0(b)(1)(A)(i).		
2	A school described in <b>section</b>		,		•			
3	A hospital or a cooperative hos	•						
4	A medical research organization hospital's name, city, and state	•	onjunction with a hosp	oital desc	ribed in <b>s</b>	section 170(b)(1)(A)(	iii). Enter the	
5	An organization operated for section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit describ	oed ir
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)	receives a subs	stantial part of its sup				n the general	public
8	☐ A community trust described in	n section 170(b	<b>)(1)(A)(vi).</b> (Complete I	Part II.)				
9	An agricultural research organi or university or a non-land-grauniversity:							
10	An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt fu t income and un	nctions, subject to ce related business taxal	rtain exce ole incom	eptions; a ne (less se	and (2) no more than ection 511 tax) from	fees, and gro 33 <sup>1</sup> /3% of its businesses	iss
11	☐ An organization organized and		•		•	•		
12	An organization organized and	operated exclus	ively for the benefit of,	to perfor	m the fun	ctions of, or to carry	out the purpo	ses o
	one or more publicly supported the box on lines 12a through 12							Check
а	Type I. A supporting organ the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	lect a ma	jority of t			ving
b	Type II. A supporting organ control or management of organization(s). You must o	the supporting o	organization vested in	the same				
С	Type III functionally integ						ally integrated	with,
d	Type III non-functionally i that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ıtion requirement an		
е	Check this box if the organ functionally integrated, or T						e II, Type III	
f	Enter the number of supported of	organizations .						5
g	Provide the following information	about the supp	oorted organization(s).				1	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount other support instructions	(see
				Yes	No			
(A)	CAMPBELL UNIVERSITY INC							
(A)		56-0529940	2	~		60,000		0
(B)	DUKE UNIVERSITY							
		56-0532129	2	~		60,000		0
(C) ·	NORTH CAROLINA CENTRAL JNIVERSITY							
		56-6000730	2	~		60,000		0
(D) L	JNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL	56-6001393	2	~		60,000		0
(E) V	VAKE FOREST UNIVERSITY	56-0532138	2	~		60,000		0
Toto						200,000		

	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support	, ,		/ 1	'	,	
	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	, ,					,,
2	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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support	( ) 0047	(1) 0040	( ) 0040	/ N 0000	( ) 0004	(O.T.)
	dar year (or fiscal year beginning in)  Amounts from line 4	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
7							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.  First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth,	or fifth tax ye	12 ear as a section	n 501(c)(3)
Casti	organization, check this box and stop her	re	<u></u>				▶ 📙
<b>Secti</b>	on C. Computation of Public Suppor Public support percentage for 2021 (line 6			11 column (f)		14	<u></u> %
15 16a	Public support percentage from 2020 Sch 33 <sup>1</sup> / <sub>3</sub> % support test—2021. If the organi box and stop here. The organization qual	nedule A, Part zation did not	II, line 14 . check the box		 nd line 14 is 30	15	check this
b	33 <sup>1</sup> / <sub>3</sub> % support test—2020. If the organization this box and stop here. The organization	zation did not	check a box c	n line 13 or 16	Sa, and line 15	is 33 <sup>1</sup> /3% or m	ore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization m Part VI how the organization meets the organization	eets the facts	-and-circumst	ances test, ch	eck this box a	and <b>stop here.</b>	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the fa e facts-and-cir	acts-and-circu	mstances test, est. The organ	check this bo	x and <b>stop he</b>	re. Explain
18	Private foundation. If the organization of				, 17a, or 17b,	check this bo	x and see

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

	if the organization falls to quality	under the te	ists listed bei	ow, piease co	implete rait	II. <i>)</i>	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ū	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	<del> </del>		1				
ı a	received from disqualified persons .						
	· · · · · ·		-				
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	· · · · · · · · · · · · · · ·						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
01:	line 6.)						
	on B. Total Support	/ ) 0047	# N 0040	( ) 0040	/ IN 0000	( ) 0004	(n =
	dar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth,	or fifth tax ye	ar as a sectio	n 501(c)(3)
	organization, check this box and stop her	·е					🕨 🗆
Secti	on C. Computation of Public Suppor	t Percentag	ie				
15	Public support percentage for 2021 (line 8	B, column (f), c	divided by line	13, column (f))		15	%
16	Public support percentage from 2020 Sch		•			16	%
Secti	on D. Computation of Investment Inc					-	
17	Investment income percentage for 2021 (I	ine 10c, colur	nn (f), divided l	oy line 13, colu	mn (f))	17	%
18	Investment income percentage from 2020			-		18	%
19a	331/3% support tests-2021. If the organi					ore than 331/39	
	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box a						
b	331/3% support tests-2020. If the organize	_	_	-		=	
-	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this b						
20	Private foundation If the organization did	_	=	•	-		_

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

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

#### Section A. All Supporting Organizations

organization was described in section 509(a)(1) or (2).

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

	Yes	NO
1	~	
2	_ 🗸	
32		~
Ja		
3b		
3c		
4a		
4b		
4c		
5a		~
5h		
5C		
6		~
3		-
7		~
8		~
9a		
9b		~
0-		
ЭC		~
10a		~
. Ju		
401		
990 or	990-EZ	2) 2021
	3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b	1

"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.

have engaged in these activities but for the organization's involvement.

Parent of Supported Organizations. Answer lines 3a and 3b below.

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. Schedule A (Form 990 or 990-EZ) 2021

2b

3a

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional		ntegrated Type III suppo	orting organization
,	(see instructions).	any I	megrated Type III suppo	nung organization

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continue	d)	
Sect	ion D-Distributions				Current Year
1 2	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	orted	2		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	-provide details in <b>Part</b>	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive		
				8	
9	Distributable amount for 2021 from Section C, line 6			9 10	
10 Line 8 amount divided by line 9 amount  Section E—Distribution Allocations (see instructions)  (i)  Excess Distributions  (ii)  Underdistribution  Pre-2021			(iii) Distributable Amount for 2021		
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
a	Applied to underdistributions of prior years			_	
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
6	Excess from 2021				

Schedule A (Form 990 or 990-EZ) 2021

Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Internal Reserven (7) B	, Part I, Line 12a - The June 3, 2004, IRS Letter Ruling provides the Scholarship Fund with Public Charity status pursuant to wenue Code Section 509(a)(3) but does not specify the type. The Scholarship Fund's Form 1023 specified that five (5) of the oard members would be appointed by the Deans of the supported Law Schools. The Scholarship Fund's Form 1023 and the IRS are posted on the Scholarship Fund's website at www.smithshaverscholarship.org.
	, Part IV, Section A, Line 2 - The Supported Organizations are Educational Institutions. Three (3) of the Universities are Section 501(c)(3) educational organizations classified by the IRS as public charities. All three (3) are Section 170(b)(1)(A)(ii)
organizatio although a Sections 50	ns. The remaining Supported Organizations are State Universities. It is noted that the University of North Carolina at Chapel Hill, Government entity, has an IRS Letter stating that IRS records indicate that it is not a private foundation because it is described in 19(a)(1) and 170(b)(1)(A)(ii). The IRS, however, does not list the fifth Supported Organization, North Carolina Central University, charity. Irrespective of whether the IRS Letter applicable to the University of North Carolina at Chapel Hill includes other
	f the University of North Carolina System, North Carolina Central University itself is a State University.

# 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	f the orga	anization		Employer identification number
SMITH	SHAVE	R LAW SCHOOL SCHOLARSHIP FUND INC		20-2749954
Par	t I	Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	ls 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 n	umber at end of year		
2	Aggreg	gate value of contributions to (during year) .		
3	Aggreg	gate value of grants from (during year)		
4		gate value at end of year		
5		e organization inform all donors and donor a are the organization's property, subject to the	<u> </u>	
6	Did the	e organization inform all grantees, donors, ar or charitable purposes and not for the benefi ring impermissible private benefit?	nd donor advisors in writing that grant tof the donor or donor advisor, or for	funds can be used rany other purpose
Part		Conservation Easements.		
		Complete if the organization answered "		
1		se(s) of conservation easements held by the o		
		servation of land for public use (for example, recre	•	
		tection of natural habitat	☐ Preservation of	f a certified historic structure
2		servation of open space	d a qualified concernation contribution	in the form of a concernation
2		ete lines 2a through 2d if the organization hel ent on the last day of the tax year.	d a qualified conservation contribution	
				Held at the End of the Tax Year
a		umber of conservation easements creage restricted by conservation easements		. 2a . 2b
b		er of conservation easements on a certified hi		<del> </del>
c d		er of conservation easements included in (		
-				·   2d
3	Numbe	er of conservation easements modified, trans	ferred, released, extinguished, or term	
	tax yea		<b>3</b> ,	
4 5	Does t	er of states where property subject to conservathe organization have a written policy regons, and enforcement of the conservation eas	arding the periodic monitoring, insp	
6		nd volunteer hours devoted to monitoring, inspec		<del>-</del> -
7	Amoun ►\$	t of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing o	conservation easements during the year
8		each conservation easement reported on line 2 ction 170(h)(4)(B)(ii)?		
9	In Part balanc	XIII, describe how the organization reports of e sheet, and include, if applicable, the text of zation's accounting for conservation easement	onservation easements in its revenue at the footnote to the organization's fina	and expense statement and
Part		Organizations Maintaining Collections Complete if the organization answered "		Other Similar Assets.
1a	If the o	organization elected, as permitted under FAS	B ASC 958, not to report in its revenu	e statement and balance sheet works
		historical treasures, or other similar assets e, provide in Part XIII the text of the footnote t	•	•
b	If the cart, his	organization elected, as permitted under FAS torical treasures, or other similar assets held to the following amounts relating to these item	B ASC 958, to report in its revenue s for public exhibition, education, or res	tatement and balance sheet works of
	(i) Rev	renue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Ass	renue included on Form 990, Part VIII, line 1 ets included in Form 990, Part X		<b>&gt;</b> \$
2	If the of	organization received or held works of art, ng amounts required to be reported under FA	historical treasures, or other similar a ASB ASC 958 relating to these items:	assets for financial gain, provide the
a b	Revenu	ue included on Form 990, Part VIII, line 1 . included in Form 990, Part X		<b>▶</b> \$

Schedu	le D (Form 990) 2021					Page 2
Part	III Organizations Maintaining (	Collections of A	rt, Historical T	reasures, or	Other Similar A	ssets (continued)
3	Using the organization's acquisition, accollection items (check all that apply):	ccession, and oth	er records, chec	k any of the foll	owing that make	significant use of its
а	☐ Public exhibition		d ☐ Loan	or exchange pro	aram	
b	☐ Scholarly research		e 🗌 Other	= :		
С	☐ Preservation for future generations					
4	Provide a description of the organization XIII.	on's collections a	nd explain how t	ney further the o	organization's exe	empt purpose in Par
5	During the year, did the organization s assets to be sold to raise funds rather t					
Part	IV Escrow and Custodial Arrar	ngements.				
	Complete if the organization a				·	
1a	Is the organization an agent, trustee, included on Form 990, Part X?		-			not ·         Yes         No
b	If "Yes," explain the arrangement in Pai	rt XIII and complet	te the following ta	able:		
					,	Amount
С	Beginning balance			[	1c	
d	Additions during the year			[	1d	
е	Distributions during the year			🗀	1e	
f	Ending balance			🗀	1f	
2a	Did the organization include an amount				lial account liabilit	ty? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Par					<u> </u>
Par	·			•		
	Complete if the organization a	answered "Yes"	on Form 990, F	Part IV, line 10.		
		(a) Current year	(b) Prior year	(c) Two years back		ck (e) Four years back
1a	Beginning of year balance	7,017,678	6,614,493	5,907,04	9 6,548,2	05 6,175,793
b	Contributions	0	0		0	0 0
C	Net investment earnings, gains, and					
	losses	765,203	734,495	1,038,53	3 -309,8	75 703,755
d	Grants or scholarships	300,000	300,000	300,00		
е	Other expenditures for facilities and	000/000	555/555	000700	000,0	000,000
	programs	0	0		0	0 0
f	Administrative expenses	34,002	31,310	31,08		
g	End of year balance	7,448,879	7,017,678	6,614,49		·
2	Provide the estimated percentage of th					47 0,540,205
<b>–</b> а	Board designated or quasi-endowment	-		, 001011111 (0)) 1101	a ao.	
b	- · · · · · · · · · · · · · · · · · · ·	0 %	. 70			
c	Term endowment ► 0 %	/0				
·	The percentages on lines 2a, 2b, and 2	c should equal 10	<b>n</b> %			
3a	Are there endowment funds not in the organization by:			at are held and	administered for t	the Yes No
	-					. 3a(i)
	(i) Unrelated organizations					
	.,					. 52()
_	If "Yes" on line 3a(ii), are the related org		•			.   3b
4 Par	Describe in Part XIII the intended uses		i s endowment fl	ırıus.		
Part			on Forms 000 F	Oout IV/ 1: 4 4 :	. Coo Farra 000	) Doub V 11: 10
	Complete if the organization a					
	Description of property	(a) Cost or oth (investme	' '	r other basis (o	c) Accumulated depreciation	(d) Book value
	Land	(iiivosiiiie	,		aspirolation	
1a	Land					
b	Buildings					
С	Leasehold improvements	1	1			

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

d Equipmente Other . .

Part VII	Investments – Other Securities.	V 5 11- C E		Doub V. line 10
	Complete if the organization answered "Yes" on Form 990, Part I  (a) Description of security or category	(b) Book value		ethod of valuation:
	(including name of security)	(b) Book value		nd-of-year market value
(1) Financial				
	eld equity interests			
(3) Other				
(B)				
(C)				
(D)				
(E) (F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11c. See Fo	orm 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) M	ethod of valuation:
			Cost or en	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶			
Part IX	Other Assets.			
T GIT IX	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11d. See F	orm 990.	Part X. line 15.
	(a) Description	.,		(b) Book value
(1)				.,,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	was the mount against Farma 000. Bort V. and t. (D.) line 15.)			
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
PartA	Complete if the organization answered "Yes" on Form 990, Part I	V line 11e or 11f	See For	m 990 Part X
	line 25.	v, iiilo i io oi i ii.	000 1 011	11 550, 1 411 7,
1.	(a) Description of liability			(b) Book value
(1) Federal ir				(4) = 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		<b>&gt;</b>	
	r uncertain tax positions. In Part XIII, provide the text of the footnote to the organ			
organization	s liability for uncertain tax positions under FASB ASC 740. Check here if the text	or the loothote has b	een provid	eu III Parl XIII .

Schedule D (Form 990) 2021 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: Donated services and use of facilities h Recoveries of prior year grants . . . . Other (Describe in Part XIII.) . . . . . . . . . . . . Add lines **2a** through **2d** . . . . . . . . . . . 2e Subtract line **2e** from line **1** . . . . . . . . 3 3 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines 4a and 4b . . . 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: Donated services and use of facilities 2a . . . . . . . . . . Prior year adjustments 2b Other losses . . . . . . . . . . . . 2c Other (Describe in Part XIII.) . . . . . . . Add lines 2a through 2d . . . . 2e 3 Subtract line **2e** from line **1** . . . . . . . . 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines **4a** and **4b** . . . . . . . . . . . . 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). 5 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part V, Line 4 - The Scholarship Fund was established, and has been used exclusively, to support the Law Schools at Campbell University, Duke University, North Carolina Central University, the University of North Carolina at Chapel Hill, and Wake Forest University, pursuant to the June 3, 2004 Order of the Honorable Howard E. Manning, Jr., North Carolina Superior Court Judge, in the consolidated class action known as Donald L. Smith v. State of North Carolina and Manila G. Shaver v. State of North Carolina. The primary intended use of the endowment is to provide scholarships, based primarily on need, to North Carolina residents who attend the supported Law Schools.

# SCHEDULE I (Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

Name of the organization **Employer identification number** SMITH SHAVER LAW SCHOOL SCHOLARSHIP FUND INC 20-2749954 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (9) (10)(11)(12)

Schedule I (Form 990) 2021					Page <b>2</b>
Part III Grants and Other Assistance to De Part III can be duplicated if additional			organization answ	ered "Yes" on Form 990	, Part IV, line 22.
(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 Scholarships to Supported Law Schools	55	300,000	0	Not Applicable	Not Applicable (Cash Payments Only)
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide	the information i	required in Part I, lin	e 2; Part III, columr	h (b); and any other addi	tional information.
Schedule I, Part I, Line 2 - The Scholarship Fund mainta	ins records of trans	fers of funds as directe	ed by the five (5) suppo	orted Law Schools, including	wire and automated clearing house
transfers. The Fund also maintains financial records as	well as the Fund's f	inancial institution's m	onthly and annual stat	ements. All statements and i	ecords are available to Board
Members. The Fund works with the admissions office of	f each supported La	w School, which recom	nmends scholarship ca	andidates based on the criter	ia provided by the Fund in accordance
with the Order of North Carolina Superior Court Judge	Howard E. Manning,	Jr. The financial inform	nation provided by sch	olar candidates is maintaine	d by the Law Schools. Board Members
correspond or meet with Smith/Shaver Scholars from ti	me to time and in m	ost cases are provided	updates regarding sch	nolars through the Law Scho	ols. Each Law School receives the
same amount of scholarship funds. Individual scholars	hips have ranged fro	om \$5,000.00 per year to	o \$20,000.00 per year.	Awards are based primarily o	on need. There are no restrictions or
limitations based upon race or employment status. Eac status change. Individual scholarships are provided thr			ecipient at that Law Sc	hool and updates the Schola	rship Fund with respect to a recipient's
Schedule I, Part III - There were over 50 Smith/Shaver S	cholars in 2021. Son	ne Scholars graduated	during 2021 and some	became students during 202	21.

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

#### 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.

202

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** SMITH SHAVER LAW SCHOOL SCHOLARSHIP FUND INC 20-2749954 Form 990, Part III, Line 1 - The Smith/Shaver Law School Scholarship Fund, Inc., was established by Order of the Honorable Howard E. Manning, Jr., through a grant from the settlement fund created in the class actions known as Donald L. Smith v. State of North Carolina and Manila G. Shaver v. State of North Carolina. The initial Scholarship Fund consisted of the \$6,000,000,00 remaining in the class actions settlement fund after payments to class members in full and for the costs of settlement administration. The Court directed that the Scholarship Fund be used to provide scholarships to North Carolina residents who attend the Law School at one of the following Universities: Campbell University, Duke University, North Carolina Central University, the University of North Carolina at Chapel Hill, and Wake Forest University. Smith/Shaver scholarships are based primarily on need. Form 990, Part VI, Section A, Line 1b - Five (5) Board members are appointed by the Deans of the supported Law Schools to represent their respective Law School. The remaining two (2) Board members serve on the Board as directed by the North Carolina Superior Court Order noted in Schedule O with respect to Form 990, Part III, Line 1. Form 990, Part VI, Section A, Line 7a - Five (5) Board members are appointed by the Deans of the supported Law Schools to represent their respective Law School. The remaining two (2) Board members serve on the Board as directed by the North Carolina Superior Court Order noted in Schedule O with respect to Form 990, Part III, Line 1. Form 990, Part VI, Section B, Line 11b - Each Scholarship Fund Board member received a copy of Form 990 and related Schedules prior to filing and was provided an opportunity to comment. Each Board member received financial updates, including an annual income statement, for the year 2021 prior to the 2022 annual Board meeting. The Fund's investment manager bank appeared at the Board meeting and was consulted as needed during 2021. Form 990, Part VI, Section B, Line 12c - Board members abide by the Conflicts Policy set out in the by-laws, which requires a Board member, among other things, to disclose a direct or indirect material financial interest concerning any transaction. During 2021 the Scholarship Fund engaged in no financial transactions other than choosing an investment advisor, setting investment policy, and making tuition payments as directed by the Law Schools. Names of scholarship candidates are submitted by the Law Schools for Board consideration and circulated among Board members to ensure no awards are made to potentially excluded relatives and to minimize the possibility of conflicts arising in the selection process. Any Board discussion regarding a potential conflict is memorialized. Form 990, Part VI, Section B, Line 13 - The Scholarship Fund has no employees. All officers are also Board members. For this reason, the Scholarship Fund does not need a formal whistleblower policy. Form 990, Part VI, Section B, Line 15 - No Board member or officer receives compensation. The Scholarship Fund has no paid employees. As no compensation is paid, no process by which compensation is to be determined is needed. Form 990, Part VI, Section C, Line 19 - The Scholarship Fund's website www.smithshaverscholarship.org sets out the Fund's articles of incorporation, by-laws, Form 1023, and the Fund's IRS and State of North Carolina Exemption Letters. The website contains Form 990s and related schedules for all tax years of the Fund's existence. The website provides a history of the Fund. The Fund's by-laws, including the conflict of interest policy and governance provisions, were adopted by the Board at its initial meeting. Form 990, Part XI, Line 5 - The unrealized gain/loss is based on running totals. The figure provided matches the accurate balance sheet figures set out in Part X.

#### **SCHEDULE R** (Form 990)

Part I

**Related Organizations and Unrelated Partnerships** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ 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.

(b)

(c)

(d)

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

**Open to Public** Inspection

SMITH SHAVER LAW SCHOOL SCHOLARSHIP FUND INC

(a)

**Employer identification number** 20-2749954

(f) ....

(e)

name, address, and Em (ii applicable) or disregarded emity		Pilli	lary activity	or foreign country)	Total income	ind-oi-year assets	entit	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
Part II Identification of Related Tax-Exempt Organizations done or more related tax-exempt organizations d	ations. Co	omplete if t ax year.	he organization a	answered "Yes" o	n Form 990, Part	IV, line 34, bed	ause it h	ad
(a) Name, address, and EIN of related organization		<b>(b)</b> ry activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section conf	(g) 512(b)(13) trolled tity?
							Yes	No
(1) CAMPBELL UNIVERSITY INC (56-0529940)  143 MAIN ST, BUIES CREEK, NC 27506	EDUCATIO	ON	NC	501(c)(3)	2	N/A		~
(2) DUKE UNIVERSITY (56-0532129) 324 BLACKWELL ST, DURHAM, NC 27701	EDUCATIO	ON	NC	501(c)(3)	2	N/A		~
(3) NORTH CAROLINA CENTRAL UNIVERSITY (56-6000730) 1801 FAYETTEVILLE ST, DURHAM, NC 27707	EDUCATIO	ON	NC	GOVERNMENT		N/A		~
(4) UNIVERSITY OF NORTH CAROLINA CHAPEL HILL (56-6001393) 103 SOUTH BUILDING BOX 9100, CHAPEL HILL, NC 27599-9100	EDUCATIO	ON	NC	GOVERNMENT		N/A		~
(5) WAKE FOREST UNIVERSITY (56-0532138)	EDUCATIO	ON	NC	501(c)(3)	2	N/A		·
1834 WAKE FOREST RD BOX 7201, WINSTON SALEM, NC 27109			1					

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets	Dispropalloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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) Name, address, and EIN of related organization	(b)	(c) Legal domicile (state or foreign country)	(d)	(e)	(f)	(g) Share of end-of-year assets	(h) Percentage ownership	section 512(b)( controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Yes No

1a

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

b	Gift, grant, or capital contribution to related organization(s)			1	lb 🗸
С	Gift, grant, or capital contribution from related organization(s)			1	Ic 🗸
d	Loans or loan guarantees to or for related organization(s)			1	ld 🗸
е	Loans or loan guarantees by related organization(s)				le 🗸
f	Dividends from related organization(s)				1f 🗸
g	Sale of assets to related organization(s)				lg 🗸
h	Purchase of assets from related organization(s)				lh 🗸
i	Exchange of assets with related organization(s)				1i 🗸
j	Lease of facilities, equipment, or other assets to related organization(s)				1j 🗸
-					
k	Lease of facilities, equipment, or other assets from related organization(s)				lk 🗸
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	)			11 /
m	Performance of services or membership or fundraising solicitations by related organization(s)	)		1	m v
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				In 🗸
0	Sharing of paid employees with related organization(s)				lo 🗸
р	Reimbursement paid to related organization(s) for expenses				lp 🗸
q	Reimbursement paid by related organization(s) for expenses				lq 🗸
r	Other transfer of cash or property to related organization(s)				1r 🗸
s	Other transfer of cash or property from related organization(s)				Is 🗸
2	If the answer to any of the above is "Yes," see the instructions for information on who must c				thresholds.
	(a)	(b)	(c)	(d)	
	Name of related organization	Transaction	Amount involved	Method of determining a	mount involved
		type (a-s)			
S	ee Schedule R, Part VII, Statement 1				
(1)					
(2)					
(3)					
(4)					
(5)					
				l .	
(6)					Form 990) 2021

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) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	unrelated, excluded	avaani-atiana?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				sections 512—514)	Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Schedule R (Form 990) 2021 Page 5 **Supplemental Information** Provide additional information for responses to questions on Schedule R. See instructions. Schedule R, Part V, Line 2 - Tuition payments are made at the direction of the supported Law Schools. In 2021, transfers relating to scholarship awards were made to each Law School in the amount of \$60,000.00 for a total of \$300,000.00 to all five (5) Law Schools. The Scholarship Fund Board of Directors determines the total amount of new scholarship money each year at its annual meeting. The total amount is divided evenly among the Law Schools so that each Law School is allocated one-fifth of the new award. This amount, combined with amounts previously committed by the Board from earlier years, is transferred at the direction of the Law Schools. Allocations to the Law Schools are equal in amount with the number of Smith/Shaver Scholars at each Law School, and the amounts of individual scholarships, varying by Law School. Payments are made twice a year, one transfer for the Fall Semester and one transfer for the Spring semester. Each Law School allocates the transfer it receives with respect to the Smith/Shaver Scholars attending that Law School. Because transfers are made for the payment of Smith/Shaver Scholar tuition only, Part V, Line 1r, is checked in order that the procedure for paying the individual scholarships may be explained here.

#### Schedule R, Part VII, Statement 1

#### SMITH SHAVER LAW SCHOOL SCHOLARSHIP FUND INC

Form: **Schedule R (2021)** EIN: **20-2749954** 

Page: 3

Part V, Line 2

#### **Description of Covered Relationships and Transaction Thresholds**

		Amt. involved
Name	CAMPBELL UNIVERSITY INC	60,000
Transaction type	r	
Method of determining amt. involved	See Part VII Supplemental Information	
Name	DUKE UNIVERSITY	60,000
Transaction type	r	
Method of determining amt. involved	See Part VII Supplemental Information	
Name	NORTH CAROLINA CENTRAL UNIVERSITY	60,000
Transaction type	r	
Method of determining amt. involved	See Part VII Supplemental Information	
Name	UNIVERSITY OF NORTH CAROLINA CHAPEL HILL	60,000
Transaction type	r	
Method of determining amt. involved	See Part VII Supplemental Information	
Name	WAKE FOREST UNIVERSITY	60,000
Transaction type	r	
Method of determining amt. involved	See Part VII Supplemental Information	