

## State of South Carolina Contribution Expenditure Report

This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act of 2022 and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2023.

		Contribution Information			
Amount	State Agency Providing the Contribution				

P280 - Department of Parks, Recreation, and Tourism				
	Organization Information			
ity Name	Friends of the Greenville Zoo, Inc.			
dress	150 Cleveland Park Drive			

Entity Name	Friends of the Greenville Zoo, Inc.	
Address	150 Cleveland Park Drive	
City/State/Zip	Greenville, SC 29601	
Website	greenvillezoofoundation.org	
Tax ID#	57-0654589	
Entity Type	Nonprofit Organization	

Organization Contact Information			
Name	Lydia Thomas		
Position/Title	Executive Director		
Telephone	864-627-4200		
Email	lthomas@greenvillezoofoundation.org		

Purpose

Reporting Period				
Reporting Period	Quarter 3: January 1, 2023 - March 31, 2023			

Accounting of how the funds have been spent:							
	Expenditures						
Description	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
New Africa Plaza and ADA Compliant Pathway	\$100,000.00					\$0.00	\$100,000.00
Giraffe Feeding Platform	\$200,000.00			\$104,342.74		\$104,342.74	\$95,657.26
Siamang Exhibit Renovation and Orangutan Habitat Design Documents	\$50,000.00					\$0.00	\$50,000.00
Farmyard Renovation and Expansion	\$650,000.00			\$19,700.00		\$19,700.00	\$630,300.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Total	al \$1,000,000.00	\$0.00	\$0.00	\$124,042.74	\$0.00	\$124,042.74	\$875,957.26

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

**Expenditure Certification** 

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

Signature

Printed Name

Title

3/30/23

Date