



# 2022 Laurens County

## American rescue plan

## Act Grant Application

**Applications must be received by 4/1/2022**

“Late Applications shall not be considered.”

**Return applications to:** Laurens County  
Attn: Administration  
100 Hillcrest Square  
Laurens, SC 29360

**Or email to:** [ARPA@co.laurens.sc.us](mailto:ARPA@co.laurens.sc.us)

Amount you are requesting:	\$ 70,000
----------------------------	-----------

### SECTION I: ORGANIZATION INFORMATION

Name of Organization:	Laurens County Trails Association
Contact Name and Title:	T. Eston Marchant, Director
Mailing Address:	PO Box 1492
Street Address (if different)	
Phone Number:	864-923-1231
City, State and Zip Code	Laurens SC 29360
Fax Number:	
Email Address:	Bmarchant72@gmail.com
Website:	www.lctrails.org
How long has your organization been in existence?	Since 2015

**NOTE: Attach a list of your organization's governance body: Board of Directors, Chief Officers and Executive Director.**

**Tax Status (check one)**

- Tax-exempt charitable organization (501(c)(3))  
 Other Tax-exempt (specify status) \_\_\_\_\_  
 Local  
 Church/Religious organization  
 Other (specify) \_\_\_\_\_
- Governmental unit  
 Federal State  
 Unincorporated

association

**Please attach a copy of your organization's IRS tax status determination letter (not applicable to government agencies or religious congregations). A tax exempt identification number is not sufficient.**

Federal Employer Identification Number:	47-2902007
---	------------

**FOCUS AREA: (check one)**

- Arts  
 Education  
 Health and Wellness  
 Human Needs  
 Community Development  
 Environment  
 Public Safety  
 Youth Development

**PROGRAM SERVICES (check one)**

- Children Families Youth Senior Citizens  
 Other (Specify) All ages

<b>Geographic area served:</b>	Laurens County
--------------------------------	----------------

<b>Percentage of service delivered to the Citizens of Laurens County</b>	90 %
--	------

**SECTION II FINANCIAL INFORMATION**

Applicant's overall operating budget: \$ 7,000 Fiscal Year 7/01/22 to 6/30/23  
 M/D/YY M/D/YY

**Please list the history of funding to your agency from the Laurens County:**

<u>Year</u>	<u>Amount</u>
2018	\$ 0
2019	\$ 0

2020	\$ 0
------	------

**GIVE A BRIEF STATEMENT OF NEED FOR AMERICAN RESCUE PLAN ACT (ARPA) FUNDS.**

This section is limited to 2900 characters including spaces, which is approximately 400 words

NONE

In partnership with the Rosemont Preservation Society, we would like to develop and open to the public approximately three (3) miles of dirt trails located on the historic site of Rosemont Plantation. Several studies have concluded that there are not enough outside recreation and exercise areas for the citizens of Laurens County. The opening of these trails would not only provide a new recreation area in an underserved part of the county, but would help enhance and promote one of the most historic sites in Laurens County. Rosemont Plantation is associated with the restoration of Mount Vernon the home of George Washington.

**PLEASE LIST OTHER CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT (CARES ACT) / PAYCHECK PROTECTION PROGRAM (PPP) AND OR AMERICAN RESCUE PLAN ACT (ARPA) FUNDING YOUR ORGANIZATION RECEIVED (INCLUDING FROM OTHER GOVERNMENTS), THE AMOUNTS AND WHAT IT IS WAS USED FOR:**

TYPE OF FUNDS RECEIVED CARES ACT/PPP AND OR ARPA	YEAR RECEIVED	DESCRIPTION OF WHAT FUNDS WERE USED FOR	AMOUNT
NONE			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

PLEASE COMPLETE THE FOLLOWING BUDGET BREAKDOWN SECTIONS ON THESE PAGES (NO ATTACHMENTS.) You may get these figures from your most recently submitted IRS Form 990, or you may simply use your overall operating budget.

**1. CONTRIBUTIONS, GIFTS, GRANTS & OTHER SIMILAR AMOUNTS**

SOURCE	FY 2019	FY 2020	FY 2021
<b>Government Grants</b>			
Municipal	\$	\$	\$
County	\$	\$	\$
State	\$	\$	\$
Federal other than COVID-19 Funds	\$	\$	\$
<b>Foundation Grants</b>	\$ 40,000	\$ 40,000	\$ 4,200
<b>Contributions/Federated Campaigns</b>	\$ 1,200	\$ 1,000	\$ 2,000
<b>Membership dues</b>	\$	\$	\$
<b>Fundraising events</b>	\$	\$	\$
<b>TOTAL CONTRIBUTED INCOME</b>	\$ 41,200	\$ 41,000	\$ 6,200

**2. PROGRAM SERVICE REVENUE**

SOURCE	FY 2019	FY 2020	FY 2021
<b>Fees / Sold Services</b>			
Services	\$	\$	\$
Tuition / Fees	\$	\$	\$
Workshops, Seminars, Lectures, etc.	\$	\$	\$
Other (specify)	\$	\$	\$
Other (specify)	\$	\$	\$
<b>TOTAL PROGRAM SERVICES REVENUE</b>	\$	\$	\$

**3. OTHER REVENUE**

SOURCE	FY 2019	FY 2020	FY 2021
<b>Publications (Newsletters, etc.)</b>	\$	\$	\$
<b>Concessions and/or Merchandise</b>	\$	\$	\$
<b>Advertising</b>	\$	\$	\$
<b>Space Rental Fees</b>	\$	\$	\$
Other (specify)	\$	\$	\$
Other (specify)	\$	\$	\$
<b>TOTAL EARNED INCOME</b>	\$	\$	\$

<b>TOTAL COMBINED INCOME (1+2+3)</b>	\$ 41,200	\$ 42,000	\$ 6,200
--------------------------------------	-----------	-----------	----------

**4. EXPENSES**

	<b>FY 2019</b>	<b>FY 2020</b>	<b>FY 2021</b>
Program Services	\$ 7,500	\$ 7,000	\$ 2,500
Fundraising	\$	\$	\$
Administration, Management, General	\$ 2,000	\$ 2,000	\$ 2,000
Other (Specify)	\$	\$	\$
<b>TOTAL EXPENSES</b>	<b>\$ 9,500</b>	<b>\$ 9,000</b>	<b>\$ 4,500</b>

If your organization receives "in-kind" support, please list below:

<b>SOURCE</b>	<b>TYPE OF IN-KIND SUPPORT</b>

List funds already committed for the project for FY 2022 and the sources of these funds.

<b>SOURCE</b>	<b>AMOUNT</b>
	\$
	\$
	\$
	\$
<b>TOTAL</b>	<b>\$</b>

Who in your organization is responsible for fundraising?

- Staff       Board of Directors       Consultants       Members/Volunteers

**5. Will your organization's 2022 budget be significantly different than 2021 and prior years?**

- Yes (if yes, explain in the box below)       No

This box is limited to 880 characters including spaces, which is approximately 125 words

While the funds will not run through the Association's bank account, the amount of \$300,000 will be used to construct the Loop Trail around the Laurens County Hospital.

These funds were part of the county sales tax referendum

**6. FUNDING REQUEST FOR BUDGET YEAR 2022**

**6. FUNDING REQUEST FOR BUDGET YEAR 2022**

Please provide breakdown by categories:

CATEGORY	PROGRAM SERVICES	ADMINISTRATIVE/ FY
	2022	GENERAL FY 2022
Supplies	\$ 10,000	\$
Equipment (specify)	\$	\$
Travel/Training	\$	\$
Personnel	\$	\$
Marketing / Promotions	\$	\$
Other (specify) Construction	\$ 60,000	\$
<b>TOTAL REQUESTED</b>	<b>\$ 70,000</b>	<b>\$</b>

**SECTION III: ORGANIZATIONAL PROFILE AND PROJECT DESCRIPTION**

1. Briefly state the history and purpose of your organization.

This box is limited to 1400 characters including spaces, which is approximately 200 words.

The Laurens County Trails Association is dedicated to leading the development of land and water trails in Laurens County. Our mission is to increase the health and wellness of the community by increasing the number of residents participating in walking, biking or boating. Numerous studies have concluded that Laurens County is one of State’s least healthiest counties due in part to the lack of exercise related amenities.

In partnership with the Rosemont Preservation Society, the Laurens County Trails Association hopes to provide county citizens with additional recreational areas and activities while enhancing and preserving part of the rich history of our county.

Like many organizations, the Laurens County Trails Association greatly curtailed operations during the pandemic. All of our projects were put on hold. We are just now getting back up and running. We hope that this potential historic bike trail will help upstart us back into increased activity.

3. How will any funding awarded be utilized?

This box is limited to 1400 characters including spaces, which is approximately 200 words.

These funds will allow us (in partnership with the Rosemont Preservation Society) to create approximately three (3) miles of dirt trails located on the site of one of the county's most historic sites.

4. State your organization's ability to continue operations (i.e. current staffing levels, staff qualifications, prior experience, etc.)

This box is limited to 1400 characters including spaces, which is approximately 200 words.



The Laurens County Trails Association with an all-volunteer organization that has existed since 2015. In addition to a strong volunteer board of directors we have strategic partnerships with the Chamber of Commerce, the Laurens County Parks and Recreation Department and Prisma Health.

5. Discuss your organization's relationship with other programs in the community designed to meet the same or similar needs, especially those that provide services/assistance to those most impacted by the pandemic. Describe collaborative partnerships that may result.

This box is limited to 1400 characters including spaces, which is approximately 200 words.

The Trails Association partners with many organizations such as the Chamber of Commerce, the Parks and Recreation Department, the Laurens County Museum and the Laurens County Health Department.

Our biggest partner is Prisma Health. This partnership is both with the local hospital and the cooperate office in Greenville. This partnership has provided us with two substantial grants. Prisma Health recognizes the need to improve the overall health of the citizens of Laurens County. They know that funds and creating of trails and bike paths are low-cost methods of improving the health of citizens.


6. What is your plan for continuing your program(s) in the future, including funding sources?

This box is limited to 1400 characters including spaces, which is approximately 200 words.

The funding level request of \$70,000 is designed to develop and maintain a (approximately)

three (3) mile dirt trail. The Trails Association and the Rosemont Preservation Society will maintain the trails. Additional improvements on the site are in the planning process.

I hereby certify that the applicant organization complies with all Americans with Disabilities Act requirements, and does not discriminate on the basis of race, color, age, sex, religion, sexual orientation, physical disability, or national origin, and that all funds that may be received by applicant organization from Laurens County will be solely used for the purposes set forth in this application and will comply with all laws and statutes. In particular, organizations receiving Community Assistance Funding will comply with state regulations requiring organizations to be registered with the South Carolina Secretary of State's Division of Public Charities.




3/25/22  
Date

Signature of Chief Executive Officer or Executive Director

T. Eston Marchant Executive Director

Name and Title (please print)



3/25/22  
Date

Signature of Chief Financial Officer or Board Chairperson

JEFF THOMPSON CHIEF FINANCIAL OFFICER

Name and Title (please print)

**Make sure your application includes the following:**   
your IRS Letter (if applicable),

LAURENS COUNTY TRAILS ASSOCIATION  
BOARD OF DIRECTORS - 2022-2023

T. Eston "Bud" Marchant



Executive Director

Jamie Adair



Director

Executive Committee

Andrew Howard



Director

Executive Committee

Jeffrey Thomason



Director, Treasurer

Executive Committee

James Nelson



Director

Jane Nelson



Director

Jason Pridgen



Director

Susan Johnson

Director



Robert Bryant

Director



Laura Blind

Director



Janice Long

Director



Justin Brent

Director



ROSEMONT PRESERVATION SOCIETY  
Post Office Box 188  
Gray Court, South Carolina 29645

Doris Taylor- President

Faye Edge- Vice President

Alvina Meeks- Secretary Treasurer

Rebecca Crow

Jim Meeks

Ernest Segars





### LEGEND

- Intersection
- Interpretive Sign
- P Parking Area
- T Trail Head
- ▲ Primitive Campground
- Water
- Paved Road
- Marked Trail (color varies)

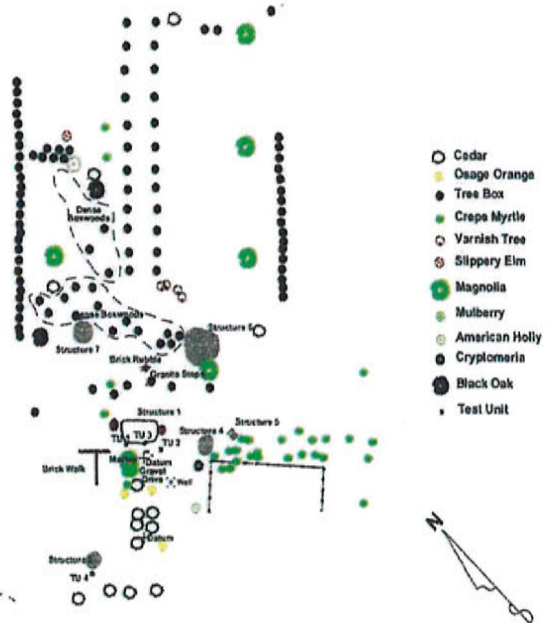
### TRAIL DISTANCES

- Trail 1 - T1 - 1.06 Miles
- Trail 2 - T2 - 0.27 Miles
- Trail 3 - T3 - 1.20 Miles
- Trail 4 - T4 - 0.31 Miles



### ROSEMONT PLANTATION HISTORICAL SITE

- 1 Barn Site
- 2 Brick Wall
- 3 Main House
- 4 Smoke House
- 5 Granite Steps
- 6 Library
- 7 Tree Allee



- Cedar
- Osage Orange
- Tree Box
- Crepe Myrtle
- Varrish Tree
- Slippery Elm
- Magnolia
- Mulberry
- American Holly
- Cryptomeria
- Black Oak
- Teal Unit

## CONCEPTUAL TRAIL MAP

FEBRUARY 8, 2022





Trail Head



Park Bench Along Trail



Trail Marker



Trail Marker



Trail Marker



Trail Marker + Map



Interpretive Signage



Plant I.D.



Plant I.D.



Interpretive Signage



Interpretive Signage



Interpretive Signage

# CONCEPTUAL IMAGES ROSEMONT PLANTATION

FEBRUARY 8, 2022





Park Bench Along Trail



Crushed Granite Trail



Campsite



Crushed Granite Trail



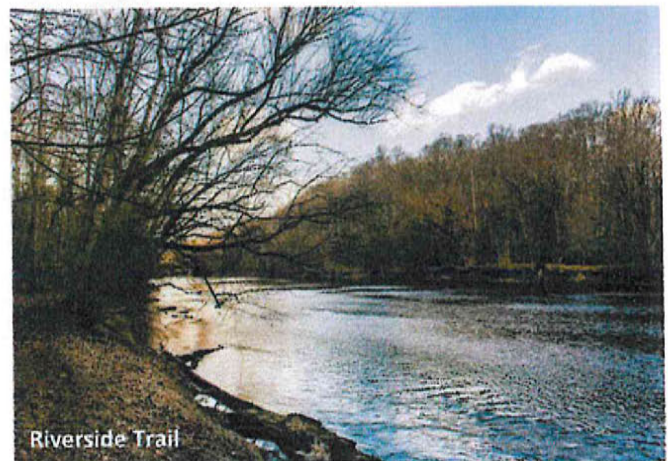
Pedestrian Bridge



Interpretive Signage



Pedestrian Bridge



Riverside Trail

## CONCEPTUAL IMAGES

### ROSEMONT PLANTATION

FEBRUARY 8, 2022



Date of this notice: 01-26-2015

Employer Identification Number:  
47-2902007

Form: SS-4

Number of this notice: CP 575 A

LAURENS COUNTY TRAILS ASSOCIATION  
PO BOX 1492  
LAURENS, SC 29360

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 47-2902007. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1120

09/15/2015

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

**IMPORTANT INFORMATION FOR S CORPORATION ELECTION:**

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at [www.irs.gov](http://www.irs.gov) for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

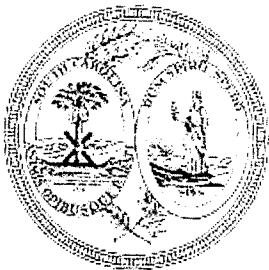
**IMPORTANT REMINDERS:**

- \* Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is LAUR. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.



State of South Carolina  
Office of the Secretary of State  
The Honorable Mark Hammond

Mar 18, 2015

Laurens County Trails Association  
Donald G Walker  
PO Box 1492  
LAURENS, SC 293602656

RE: Registration Confirmation

Charity Public ID: P29668

Dear Donald G Walker :

This letter confirms that the Secretary of State's Office has received and accepted your Registration, therefore your charitable organization is in compliance with the registration requirement of the "South Carolina Solicitation of Charitable Funds Act." The registration of your charitable organization will expire on Nov 15, 2015. If any of the information on your Registration form changes throughout the course of the year, please contact our office to make updates. It is important that this information remain updated so that our office can keep you informed of any changes that may affect your charitable organization.

If you have not yet filed your annual financial report or an extension for the annual financial report, the annual financial report is still due 4 ½ months after the close of your fiscal year. Annual financial reports must either be submitted on the Internal Revenue Service Form 990 or 990-EZ or the Secretary of State's Annual Financial Report Form. There is no fee associated with filing an annual financial report with our office. If your organization files IRS Form 990 or 990-EZ and you wish to extend the filing of that form with us, please submit a copy of your IRS Form 8868. If your organization files the Secretary of State's Annual Financial Report Form, and you wish to extend the filing of that form with us, please submit a written request to the Division of Public Charities. **Failure to submit the annual financial report may result in an administrative fine of up to \$2,000.**

If you have any questions or concerns, please visit our Website at [www.scsos.com](http://www.scsos.com) and review the Public Charities section or contact our office at (803) 734-1790.

Sincerely,

Kimberly S. Wickersham  
Director, Division of Public Charities

