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Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2008

Open to Public Inspection

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury  
Internal Revenue Service

**A** For the 2008 calendar year, or tax year beginning JULY 1, 2008, and ending JUNE 30, 2009

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions.	<b>C</b> Name of organization <u>STARK STATE COLLEGE FOUNDATION</u> Number and street (or P O box, if mail is not delivered to street address) Room/suite <u>6200 FRANK AVE NW</u> City or town, state or country, and ZIP + 4 <u>NORTH CANTON OH 44720-7228</u>	<b>D</b> Employer identification number <u>341577595</u> <b>E</b> Telephone number <u>(330) 494-6170</u> <b>F</b> Group Exemption Number . . . ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). **G** Accounting method  Cash  Accrual Other (specify) ▶

**I** Website: ▶ www.starkstate.edu **H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**J** Organization type (check only one) —  501(c) (3) (insert no)  4947(a)(1) or  527

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 94,439

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

	Description	Code	Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	63,794
	2 Program service revenue including government fees and contracts	2	0
	3 Membership dues and assessments	3	0
	4 Investment income	4	30,645
	5a Gross amount from sale of assets other than inventory	5a	0
	b Less: cost or other basis and sales expenses	5b	0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	0
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	0
	b Less: direct expenses other than fundraising expenses	6b	0
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	0	
7a Gross sales of inventory less returns and allowances	7a	0	
b Less: cost of goods sold	7b	0	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8 Other revenue (describe _____)	8	0	
9 <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.	9	94,439	
Expenses	10 Grants and similar amounts paid (attach schedule)	10	98,455
	11 Benefits paid to or for members	11	0
	12 Salaries, other compensation, and employee benefits	12	0
	13 Professional fees and other payments to independent contractors	13	5,635
	14 Occupancy, rent, utilities, and maintenance	14	0
	15 Printing, publications, postage, and shipping	15	867
	16 Other expenses (describe <u>UNCOLLECTED SUPPLIES, TRAVEL, FOOD, MEMBERSHIP, PROGRAMS</u> )	16	7,920
	17 <b>Total expenses.</b> Add lines 10 through 16.	17	112,877
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(18,438)
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	2,060,514
	20 Other changes in net assets or fund balances (attach explanation)	20	(260,252)
	21 <b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20.	21	1,781,824

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	1,808,757	22	1,631,474
23 Land and buildings	0	23	0
24 Other assets (describe <u>RECEIVABLES, PREPAID EXPENSES</u> )	253,179	24	150,389
25 <b>Total assets</b>	2,061,936	25	1,781,863
26 <b>Total liabilities</b> (describe _____)	1,422	26	39
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	2,060,514	27	1,781,824

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**Part V Other Information** (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a confirmed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <u>37a</u> 0		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	<u>38b</u>	
39	Section 501(c)(7) organizations Enter:		
a	Initiation fees and capital contributions included on line 9	<u>39a</u>	
b	Gross receipts, included on line 9, for public use of club facilities	<u>39b</u>	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ <u>0</u>		
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶ <u>0</u>	
d	Enter amount of tax on line 40c reimbursed by the organization	▶ <u>0</u>	
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		X
41	List the states with which a copy of this return is filed ▶ <u>OHIO</u>		
42a	The books are in care of ▶ <u>JAYNE STERNER</u> Telephone no. ▶ <u>(330) 494-6170</u> Located at ▶ <u>6200 FRANK AVE NW NORTH CANTON OH</u> ZIP + 4 ▶ <u>44720-7228</u>		
b	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)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>43</u>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

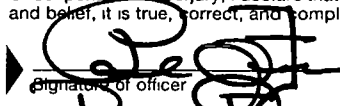
- |   |     | Yes | No |
|---|-----|-----|----|
| 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . . | 46  |     | X  |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .   | 47  |     | X  |
| 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .   | 48  |     | X  |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? . . . . .   | 49a |     | X  |
| b If "Yes," was the related organization(s) a section 527 organization? . . . . .   | 49b |     |    |
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

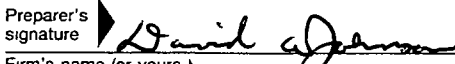
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000 ▶				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors each receiving over \$100,000 ▶		

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 Here:  Date: 5/12/10  
 Signature of officer: PAUL PEASER, FOUNDATION BOARD PRESIDENT

Paid Preparer's Use Only: Preparer's signature:  Date: 5/10/10  
 Firm's name (or yours if self-employed), address, and ZIP + 4: DAVID A JOHNSON, 433 22ND ST NW CANTON OH 44708-2306  
 Check if self-employed:  EIN: Phone no: (330) 268-8918

May the IRS discuss this return with the preparer shown above? See instructions.  Yes  No

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No 1545-0047

**2008**

Open to Public Inspection

Name of the organization <b>STARKE STATE COLLEGE FOUNDATION</b>	Employer identification number <b>341577595</b>
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is (Please check only one organization)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
- 10  An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions)
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
  - a  Type I
  - b  Type II
  - c  Type III - Functionally Integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....
- (ii) A family member of a person described in (i) above? .....
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

**h Provide the following information about the organizations the organization supports**

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	116,708	223,799	250,597	818,449	166,979	1,576,532
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	135,933	145,827	156,900	167,214	187,827	793,701
4 Total. Add lines 1-3 . . . . .	252,641	369,626	407,497	985,663	354,806	2,370,233
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) . . . . .						768,480
6 Public support. Subtract line 5 from line 4						1,601,753

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4. . . . .	252,641	369,626	407,497	985,663	354,806	2,370,233
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	31,968	31,019	37,601	42,525	30,646	173,759
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .	0	0	0	0	0	0
11 Total support. Add lines 7 through 10 . . . . .						2,543,992
12 Gross receipts from related activities, etc. (See instructions) . . . . .					12	2,543,992
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	63.0 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . .	15	46.8 %
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .		N/A				
<b>2</b> 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 . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1-5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 . . . . .						
<b>c</b> Add lines 7a and 7b. . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12) . . . . .						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h . . . . .	<b>18</b>	%

**19a 33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here** The organization qualifies as a publicly supported organization . . . . .

**b 33 1/3% support tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here** The organization qualifies as a publicly supported organization . . . . .

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

NONE

Stark State College Foundation  
Tax ID #34-1577595  
Form 990EZ - 2008  
Supplemental Schedule

Line 10 - Grants and similar amounts paid:

Grantee:

Stark State College of Technology  
6200 Frank Ave. NW  
North Canton, OH 44720

Grants Awarded

Construction of a new health science building	\$ 20,533
Scholarships for students	65,546
Equipment, supplies and operations for College departments	8,576
Faculty and staff professional development	<u>3,800</u>
Total Grants	\$ 98,455 =====

Stark State College Foundation  
Tax ID #34-1577595  
Form 990EZ - 2008  
Supplemental Schedule

Line 20 – Other changes in net assets or fund balances

Unrealized losses on investments carried at market value	\$	(260,252)
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Stark State College Foundation  
Tax ID #34-1577595  
Form 990EZ - 2008  
Supplemental Schedule

Line 31 – Other program services

Faculty and staff professional development was enhanced by grants to enable attendance at educational conferences and seminars	\$3,800
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Stark State College Foundation  
Tax ID #34-1577595  
Form 990EZ - 2008  
Supplemental Schedule

Part IV - List of Officers, Directors, Trustees, and Key Employees

Stark State College Foundation EIN #34-1577595 is a related organization of Stark State College of Technology EIN #34-1055865.

The Stark State College Foundation is a non-profit, 501 (C)( 3) organization formed to seek, receive and distribute funds, equipment and other contributions for the benefit of the students and programs of Stark State College of Technology.

None of the individuals on the attached list are compensated by the Foundation nor have benefit plans from the Foundation.

All of the individuals on the attached list, except for the four listed below, devote on average approximately one hour per week to the Foundation.

All salaries and benefits of the following four individuals, who are employees of the College, are paid by the College:

Para Jones is the Vice President for Advancement/Student Services of the College and is the Foundation Executive Director.

- B 15 hours/week
- C Compensation \$45,275
- D Benefits \$15,742

Jayne Sterner is the Advancement/Fundraising Specialist of the College and is the Foundation Liaison.

- B 40 hours/week
- C Compensation \$48,136
- D Benefits \$25,212

John O'Donnell is the President of the College and an Ex-officio member of the Foundation Board of Directors.

- B 5 hours/week
- C Compensation \$33,126
- D Benefits \$10,403

Shari Shiepis is an Associate Professor of the College and an Ex-officio member of the Foundation Board of Directors.

- B 1 hour/week
- C Compensation \$1,380
- D Benefits \$735

## Stark State College Foundation

Tax ID #34-1577595

Form 990EZ - 2008

## Part IV

<p><b>(1) President</b> Paul Feaser Vice President Major Gifts United Way of Greater Stark County 4825 Higbee Avenue, Suite 101 Canton OH 44718</p>	<p><b>(2) Vice President</b> Larry Smerglia Senior Vice President UBS Financial Services, Inc. 4774 Munson Street, NW - Suite 202 Canton, OH 44718</p>	<p><b>(3) Secretary</b> Grace Wakulchik Vice President for Patient Services Akron Children's Hospital One Perkins Square Akron, OH 44308</p>	<p><b>(4) Treasurer</b> Jeffery Walters President CBIZ Accounting, Tax &amp; Advisory of Ohio 4040 Embassy Parkway Akron, OH 44333</p>
<p><b>(5) Board Director</b> Hortense Bobbitt Community Leader 2684 Fordham Circle NW North Canton, OH 44720-7845</p>	<p><b>(6) Board Director</b> Donald Colaner Retired Hilscher Clarke President 1133 Singing Brook NW Massillon OH 44646</p>	<p><b>(7) Board Director</b> Sally Efremoff Magistrate Stark County Family Court 110 Central Plaza South Canton, OH 44702</p>	<p><b>(8) Board Director</b> Monica Gwin Public Relations The Employment Source 822 30<sup>th</sup> Street NW Canton, OH 44709</p>
<p><b>(9) Board Director</b> Lynn S Hamilton Sr. Vice President, Trust Investments KeyBank 126 Central Plaza North Canton OH 44702</p>	<p><b>(10) Board Director</b> Alexander Hays IV Retired 3507 Blackburn Avenue NW Canton OH 44718</p>	<p><b>(11) Board Director</b> William Lavery President Lavery GM Superstore 1096 West State Street Alliance OH 44601</p>	<p><b>(12) Board Director</b> George Lemon President Technical Products Group 7766 Cricket Circle Massillon OH 44646</p>
<p><b>(13) Board Director</b> Dr. John J. McGrath Health Foundation of Greater Massillon 1237 Lincoln Way E Massillon, OH 44646</p>	<p><b>(14) Board Director</b> Nancy McPeck Retired - Bank One Executive 7405 Brushmore NW North Canton, OH 44720</p>	<p><b>(15) Board Director</b> Timothy Putman President Putman Properties 3978 Fulton Drive NW Canton, OH 44718</p>	<p><b>(16) Board Director</b> Dr. Ahmed Sabe Director of Cardiovascular Medicine Mercy Medical Center 1320 Mercy Drive NW Canton, OH 44708</p>

<p><b>(17) Board Director</b></p> <p>Mary Jo Shannon Slick General Counsel Stark County Edu Service Center 2100 38th Street NW Canton, OH 44709</p>	<p><b>(18) Board Director</b></p> <p>William Strohmenger Vice President Aultman Health Foundation 2600 Sixth Street SW Canton OH 44710</p>	<p><b>(19) Board Director</b></p> <p>Thomas Strouble Retired Timken Executive 1000 Meese Rd. Louisville, Ohio 44641</p>	<p><b>(20) Board Director</b></p> <p>Patricia (DeChellis) Wackery Vice President, Corporate Banking National City 213 Market Avenue N, Suite 250 Canton, OH 44702</p>
<p><b>(21) Board Director</b></p> <p>Charles West Retired Timken Executive 1881 Applegrove Street NE Canton, Ohio 44721</p>	<p><b>(22) Board Director</b></p> <p>Ronald Wilkof President Ron's Workingman's Store 314 Cherry Ave. SE PO Box 20750 Canton, OH 44701</p>	<p><b>(23) Board Director</b></p> <p>Frank Wittman 2379 Amberwood Cr. N.E. Massillon, Ohio 44646</p>	<p><b>(24) Board Director</b></p> <p>Open</p>
<p><b>(25) Ex-officio Stark State College Faculty/Staff Representative</b></p> <p>Shari Shiepis Associate Professor / Practicum Coordinator Human and Social Services Stark State College 6200 Frank Avenue NW North Canton, OH 44720</p>	<p><b>(26) Ex-officio SSC Alumni Representative</b></p> <p>Randall S. Kreinbrink Senior Financial Advisor Ameriprise Financial Advisors 4383 Executive Circle NW Canton OH 44718</p>	<p><b>(27) Ex-officio Stark State College President</b></p> <p>John O'Donnell Ph.D. President Stark State College 6200 Frank Avenue NW North Canton OH 44720</p>	<p><b>(28) Ex-officio College Trustee</b></p> <p>Jeffrey Halm Managing Partner Buckingham Doolittle &amp; Burroughs, LLP 4518 Fulton Drive NW Canton OH 44718</p>
<p><b>Emeritus</b></p> <p>William L. Luntz Luntz Marketing 5621 Loma Linda Lane NE Canton, OH 44721 Non-voting</p>	<p><b>Emeritus</b></p> <p>Dr. Frank Weinstock Ophthalmologist/Consultant 2600 Tuscarawas St. W., Suite 200 Canton, OH 44708 Non-voting</p>	<p><b>Foundation Executive Director</b></p> <p>Para M. Jones, Ph.D. Vice-President for Advancement, Planning, College/Community Relations Stark State College 6200 Frank Avenue NW North Canton, OH 44720</p>	<p><b>Foundation Liasion</b></p> <p>Jayne Sterner Advancement/Fundraising Specialist Stark State College 6200 Frank Avenue NW North Canton, OH 44720</p>