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DLN: 93493222016340

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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2008

Inspection

epartment of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2008 calendar year, or tax year beginning 11-01-2008 and ending 10-31-2009 D Employer identification number B Check if applicable Please Ohio Humanities Council use IRS 31-0901572 Address change label or Doing Business As E Telephone number Name change print or type. See (614) 461-7802 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite **G Gross receipts** \$ 1,285,857 Instruc-471 E Broad Street No 1620 Termination tions. Amended return City or town, state or country, and ZIP + 4 Columbus, OH 43215 Application pending Name and address of Principal Officer **H(a)** Is this a group return for GALE E PETERSON affiliates? **471 E BROAD STREET** COLUMBUS, OH 43215 H(b) Are all affiliates included? **✓** 501(c) (3) **◄** (insert no) √ 4947(a)(1) or
√ 527 (If "No." attach a list See instructions) Group Exemption Number 🕨 Web site: ► www ohiohumanities org L Year of Formation 1976 M State of legal domicile OH Summary Briefly describe the organization's mission or most significant activities Activities & Governance See Additional Data Table Check this box ┌ if the organization discontinued its operations or disposed of more than 25% of its assets 22 Number of voting members of the governing body (Part VI, line 1a) \cdot \cdot 22 Number of independent voting members of the governing body (Part VI, line 1b) $\,$. 9 Total number of employees (Part V, line 2a) . 22 Total number of volunteers (estimate if necessary) . Total gross unrelated business revenue from Part VIII, line 12, column (C) . 0 Net unrelated business taxable income from Form 990-T, line 34 . 0 b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 1,126,078 1,044,260 8 9 Program service revenue (Part VIII, line 2g) . . 98,537 153,848 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 8,346 5,931 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 1,151,143 1,285,857 227,995 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 175,836 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 508,350 Expenses 567,265 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 (Total fundraising expenses, Part IX, column (D), line 25 $\frac{67,270}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 498,365 487,186 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 1,182,551 1,282,446 18 Revenue less expenses Subtract line 18 from line 12 19 -31,408 3,411 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 503,519 422,921 21 Total liabilities (Part X, line 26) 282,508 170,192 22 Net assets or fund balances Subtract line 21 from line 20 252,729 221,011 Part II Signature Block 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 **Please** 2010-07-30 Sign Signature of officer Here Gale E Peterson Executive Director Type or print name and title Date Check if Preparer's PTIN (See Gen Inst) Preparer's Greta Rzymek CPA signature Paid empolyed 🕨 🦵 Preparer's REA & ASSOCIATES INC CPA'S Firm's name (or yours if self-employed). **Use Only** address, and ZIP + 4 5775 PERIMETER DRIVE - SUITE 200 Phone no (614) 889-8725

DUBLIN, OH 430173224 May the IRS discuss this return with the preparer shown above? (See instructions) . . .

Part III Statement of Program Service Accomplishments (See the instructions.)

THE CIDIO BIAMMOTTES COUNCILES A NOT-FOR-ROPET (DESARDZATION WHOSE PROCEDURE SERVICES ACTIONT IS TO SUPPORT HUMANITES IN DISCREMENT WITH CONTRIBUTION OF THE HUMANITES TO JUDICATE AND APPORT CONTRIBUTION OF THE HUMANITES TO JUDICATE AND APPORT TO APPORT THE PORT OF THE HUMANITES AND APPORT TO APP	1	Briefly describe the organization's mission				
the prior Form 990 or 990-E27		INCREASE THE PUBLIC'S AWARENESS OF THE IM	IPORTANT CONTRIBUTION			
Test	2		nıfıcant program se	rvices during the year	which were not listed on	✓ Yes No
Services?		If "Yes," describe these new services	on Schedule O			
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(3) trusts 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 \$ 239,008 including grants of \$ 182,125) (Revenue \$) RATIONAL ENDOWMENT FOR THE HUMANITES - Islational Endowment for the thumanities in a program where the organization takes government grant mome conjunction with the We the People initiative, and redistributes the grants amongst programs promoting the humanities that apply and are approved. 4b (Code) (Expenses \$ 166,478 including grants of \$) (Revenue \$ 75,668) CHMENIQUA: Chautisugus is a program where historians take tents, and travel around Ohio to promote awareness in regions of the state by the atmically presenting HISTORICAL characteristics. 4c (Code) (Expenses \$ 63,333 including grants of \$) (Revenue \$) CYVIC TOURISM - CIVIC TOURISM INCLIDES PROJECTS THAT HELP COMMUNITIES EXPLORE AND PLAN FOR HERITAGE TOURISM (Code) (Expenses \$ 345,841 including grants of \$ 44,870) (Revenue \$ 78,180) (Code) (Expenses \$ 345,841 including grants of \$) (Revenue \$) (Revenue \$)	3	services?		changes in how it cor	nducts any program	┌ Yes ┌ No
Section 501(c)(3) and (4) organizations and 4947 (a)(1) trusts 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 (Cote) (Expenses \$ 228,908 including grants of \$ 182,125) (Revenue \$) MATIDIAL ERDOWNERT FOR THE HUMANTIES - National Endowment for the Humanities are program where the organization takes government annut moment conjunction with the We the People inflative, and redistributes the grants amongst programs promoting the humanities that apply and are approved 4b (Code) (Expenses \$ 166,478 including grants of \$) (Revenue \$ 75,668) CHALTAUQUA - Chautasqua is a program where historians take tents, and travel around Ohio to promote awareness in regions of the state by theatrically presenting HISTORICAL characters 4c (Code) (Expenses \$ 63,333 including grants of \$) (Revenue \$) COVIC TOURISM - CIVIC TOURISM INCLIDES PROJECTS THAT HETP COMMUNITIES EXPLORE AND PLAN FOR HERITAGE TOURISM CODE) (Expenses \$ 345,841 including grants of \$ 44,870) (Revenue \$ 78,180) Code) (Expenses \$ 345,841 including grants of \$) (Revenue \$) (Code) (Expenses \$ 345,841 including grants of \$) (Revenue \$)		If "Yes," describe these changes on So	chedule O			
A4 (Code) (Expenses \$ 166,478 including grants of \$) (Revenue \$ 75,669) CHALTAUQUA - Chaubaquia is a program where historians take tents, and travel around Ohio to promote awareness in regions of the state by theatrically presenting HISTORICAL characters 4c (Code) (Expenses \$ 63,333 including grants of \$) (Revenue \$) (Revenue \$) (Civic Tourism - Civic Tourism Includes PROJECTS THAT HELP COMMUNITIES EXPLORE AND PLAN FOR HERITAGE TOURISM (Code) (Expenses \$ 345,841 including grants of \$ 44,870) (Revenue \$ 78,180) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4	Section 501(c)(3) and (4) organization	ns and 4947(a)(1) t	rusts are required to r	eport the amount of grants	
CMAUTAUQUA - Chautauqua is a program where historians take tents, and travel around Ohio to promote awareness in regions of the state by theatrically presenting HISTORICAL characters 4c	4a	NATIONAL ENDOWMENT FOR THE HUMANITIE	S - National Endowment	t for the Humanities is a pr	ogram where the organization tak	es government grant monies in
CIVIC TOURISM - CIVIC TOURISM INCLUDES PROJECTS THAT HELP COMMUNITIES EXPLORE AND PLAN FOR HERITAGE TOURISM (Code) (Expenses \$ 345,841 including grants of \$ 44,870) (Revenue \$ 78,180) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4b	CHAUTAUQUA - Chautauqua is a program wh	,		, ,	, ,
CIVIC TOURISM - CIVIC TOURISM INCLUDES PROJECTS THAT HELP COMMUNITIES EXPLORE AND PLAN FOR HERITAGE TOURISM (Code) (Expenses \$ 345,841 including grants of \$ 44,870) (Revenue \$ 78,180) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)						
(Code) (Expenses \$ 345,841 including grants of \$ 44,870) (Revenue \$ 78,180) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4c		•		, ,)
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)		CIVIC TOURISM - CIVIC TOURISM INCLUDES	PROJECTS THAT HELP C	OMMONITIES EXPLORE AN	D PLAN FOR HERITAGE TOURISM	
(Expenses \$ including grants of \$) (Revenue \$)		(Code) (Expenses \$	345,841	including grants of \$	44,870) (Revenue \$	78,180)
(Expenses \$ including grants of \$) (Revenue \$)	4d	Other program services (Describe in	Schedule O)			
4e Total program service expenses \$ 814,560 Must equal Part IX, Line 25, column (B).				\$) (Revenue \$)
	4e	Total program service expenses \$	814,560	Must equal Part IX,	Line 25, column (B).	

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	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	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C,	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		No
10	complete Schedule D, Part IV^{\bullet}	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		Yes	
12	Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
13	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII. Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12	165	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	13 14a		No No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G,	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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 $501(c)(3)$ and $501(c)(4)$ 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		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent 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		No

		1			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns, Enter -0- if not applicable					
	or U.S. Information Returns, Enter -U- II not applicable	1a	26			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable					
U	Litter the number of Forms w-29 included in the 1a Litter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t		dors and reportable	_	v	
-	gaming (gambling) winnings to prize winners?	 i	 I	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this					
	return	2a	9			
b	If at least one is reported in 2a, did the organization file all required federal employn Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin					
	return?			3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Scho			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities ac account)?	count	, or other financial ´	4a		Νο
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , <i>Re Financial Accounts</i> .	eport o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exemp Tax Shelter Transaction</i> ?	t Entit	y Regarding Prohibited • • •	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbut	on of \$75 or	7a		No
ь	If "Yes," did the organization notify the donor of the value of the goods or services p	rovide	d?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal proper	rty for	which it was required to			
	file Form 8282?			7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay	/ prem	nums on a personal			
	benefit contract?			7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a person			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8		·	7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization five quired?	ile a F	orm 1098-C as	7h		Νo
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a	and se	ction 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sexcess business holdings at any time during the year?	spons	oring organization, have	8		
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the 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	10a				
Ь	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	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	n lieu d	of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the					
	year	12b	1			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A	<u>a. Governing</u>	Body and M	nanagement	

			165	140
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 22			
Ь	Enter the number of voting members that are independent 1b 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or 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 in Schedule O	11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νo
14	Does the organization have a written document retention and destruction policy?	14		Νo
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed OH
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. value values values values values.
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization mARC hsMITH

471 E Broad Street Columbus, OH 43215 (614) 461-7802

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i	·	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

				(tion that a			all			(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustæ or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	from the		other ation he on and
1b	Total	<u> </u>	<u>.</u> .	<u> </u>		Ш		▶	89,212	2	0		14,872
2	Total number of individuals (includin		a) who	recei	ved	mor	e than	1 \$ 1	00,000 ın reportab	e			
2	Total number of individuals (includin compensation from the organization		a) who	recei	ved	mor	e than	n \$1	00,000 ın reportab	le	•	1 1	
	compensation from the organizationl	- 0										Yes	No
3		►0 officer, direc	tor or t	ruste	e, k	ey e	mploy	/ee,	or highest compens		3	Yes	No No
	Did the organization list any former on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedu</i> For any individual listed online 1a, is organization and related organization	►0 officer, direc le J for such s the sum of	tor or t	ruste <i>ual</i> .	e, k	ey e • •	mploy • ation a	∕ee, • and	or highest compens	sated employee • • •		Yes	No
3 4	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of the	tor or t individu reporta nan \$15	ruste ual ble c	e, k • • • •	ey e • ens If "Y	ation a	and	or highest compens other compensation lete Schedule J for su	sated employee from the	3	Yes	
3	Did the organization list any former on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedu</i> For any individual listed online 1a, is organization and related organization	officer, directle J for such sthe sum of as greater the sum of a greater	tor or t individu reporta nan \$15 • •	ruste ual ble c 0,00	e, k omp 0? i	ey e • ens If "Y • fror	ation : es, co	and	or highest compens other compensation lete Schedule J for su elated organization	sated employee from the ch for services		Yes	No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of as greater the sum of a cruzing	tor or t individu reporta nan \$15 • •	ruste ual ble c 0,00	e, k omp 0? i	ey e • ens If "Y • fror	ation : es, co	and	or highest compens other compensation lete Schedule J for su elated organization	sated employee from the ch for services	4	Yes	N o
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	etor or t individu reporta nan \$15 ue comp Scheduk	ruste ual ble c 50,00 e pensa	e, k omp 0? i tion	ey e • • • • • • • • • •	ation at the set of th	vee, • and • unro	or highest compens other compensation lete Schedule J for su elated organization	ated employee from the ch for services	4	Yes	N o
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	reportanan \$15 ue comp Schedula	ruste ual ble c 50,00 e pensa	e, k omp 0? i tion	ey e • • • • • • • • • •	ation at the set of th	vee, • and • unro	or highest compens other compensation elete Schedule J for su other compensation other compensation	ated employee from the ch for services	4	Yes (C	No No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	reportanan \$15 ue comp Schedula	ruste ual ble c 50,00 e pensa	e, k omp 0? i tion	ey e • • • • • • • • • •	ation at the set of th	vee, • and • unro	or highest compens other compensation elete Schedule J for su other compensation other compensation	sated employee from the for services ethan	4	(с	No No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	reportanan \$15 ue comp Schedula	ruste ual ble c 50,00 e pensa	e, k omp 0? i tion	ey e • • • • • • • • • •	ation at the set of th	vee, • and • unro	or highest compens other compensation elete Schedule J for su other compensation other compensation	sated employee from the for services ethan	4	(c	No No

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns	. 1a	1		Revenue		512, 513, 01 514
数数	ь	Membership dues						
Contributions, gifts, grants and other similar amounts	-	Tramberomp adds :	1b					
o,ĕ	С	Fundraising events .	 1c					
£Έ	d	Related organizations						
S, E	e	Government grants (contribu		1,089,201				
<u>.</u>	f	All other contributions, gifts,	rants. and	36,877				
至至	'	similar amounts not included	above					
풀	g	Noncash contributions	1f Included in					
25		lines 1a-1f \$						
O 14	h	Total (Add lines 1a-1f)			1,126,078			
				Business Code				
e⊒	2a	Other COUNCIL PROJECTS		900,099	78,180	78,180		
Yen Ye	ь	Chautauqua		900,099	<u> </u>	•		
윤	c				73,000	73,000		
956	d							
.≨								
Ξ	e							
Program Serwoe Revenue	f	All other program service	e revenue					
Š	g	Total. Add lines 2a-2f ► \$ 153,848						
	3	Investment income (inc	ludıng dıvı	dends, interest				
		other similar amounts)			5,931			5,931
	4	Income from investment of t	ax-exempt b	ond proceeds				
				•				
	5	Royalties						
	_		Real	(II) Personal				
	6a	Gross Rents Less rental						
	Ь	expenses						
	С	Rental income or (loss)						
	d	Net rental income or (lo	ss)					
		(ı) Sec	urities	(II) O ther				
	7a	Gross amount	unties	(II) O thei				
		from sales of assets other						
		than inventory						
	b	Less cost or other basis and						
	_	sales expenses Gain or (loss)						
	c d							
	ď	Net gain or (loss)		. •				
	8a	Gross income from fund events (not including						
Other Revenue		\$ of contributions reporte	d on line					
듄		1c) See Part IV, line 1						
è		Attach Schedule G if total						
<u>.</u>		\$15,000						
the	b	Less direct expenses						
0	С	Net income or (loss) fro	m fundrais	ing events				
	9a	Gross income from gam						
		activities See part IV, Complete Schedule G if to						
		exceeds \$15,000						
			а					
	b	Less direct expenses	b					
	С	Net income or (loss) fro	m gamıng a	activities •-				
	10a	Gross sales of inventor	v. less					
		returns and allowances						
			а					
	b	Less cost of goods sole						
	С	Net income or (loss) fro						
		Miscellaneous Revenu	e	Business Code				
	11a							
	ь							
	с							
	ي	All other revenue						
	d e	Total. Add lines 11a-11e		\$				
	12	Total Revenue. Add line			1,285,857	153,848	0	5,931
		8c, 9c, 10c, and 11e						

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	226,995	226,995						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,000	1,000						
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	89,212		89,212					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$								
7	Other salaries and wages	350,762	204,548		28,735				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	40,300	18,774	18,893	2,633				
9	Other employee benefits	53,408	24,887	25,045	3,476				
10	Payroll taxes	33,583	15,647	15,747	2,189				
11	Fees for services (non-employees)								
а	Management								
b	Legal								
С	Accounting								
d	Lobbying	4,986	4,986						
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g	Other	168,574	137,195	31,326	53				
12	Advertising and promotion	2,075	2,075						
13	Office expenses	109,469	71,771	23,550	14,148				
14	Information technology								
15	Royalties								
16	Occupancy	46,570		46,570					
17	Travel	18,523	10,304	8,085	134				
18	Payments of travel or entertainment expenses for any Federal, state or local public officials								
19	Conferences, conventions and meetings	2,820		2,820					
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	17,786		17,786					
23	Insurance	3,591	114	3,477					
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	SPONSORSHIPS	90,893	90,893						
	DUES	15,456	, -		15,456				
c	LAYOUT AND DESIGN	4,303	3,552	305	446				
d	PHOTO GRAPHY	1,786	1,690	96					
e	GIFTS	354	129	225	_				
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	1,282,446	814,560	400,616	67,270				
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,,-,-	- 1,7.20	,	.,				

Part X	Balance	Shoot
	Balance	Sneer

					(A)		(E	
	ا				Beginning of year		End o	fyear
	1	Cash—non-interest-bearing			125,944			185,624
	2	Savings and temporary cash investments			40,000			
	3	Pledges and grants receivable, net			110,380			
	4	Accounts receivable, net			6,470	4		7,734
	5	Receivables from current and former officers, directors, trustees, other related parties <i>Complete Part II of Schedule L</i>		nployees or		5		
	6	Receivables from other disqualified persons (as defined under sec persons described in section $4958(c)(3)(B)$ Complete Part II of Sc				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use				8		
ts.	9	Prepaid expenses and deferred charges			5,510	9		3,349
Assets	10a	Land, buildings, and equipment cost basis						
4			10a	105,742				
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	85,294	36,272	10 c		20,448
	11	Investments—publicly traded securities		•	8,811	11		20,987
	12	Investments—other securities See Part IV, line 11 $\it Complete Part Schedule D$	VII of	•	170,132	12		184,779
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Of Schedule D$.	t VIII			13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D				15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			503,519			422,921
	17	Accounts payable and accrued expenses .			56,657	17		51,864
	18	Grants payable		72,200			57,567	
	19	Deferred revenue			153,651	19		60,761
	20	Tax-exempt bond liabilities			,	20		<u> </u>
တ္တ	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
ja.		persons Complete Part II of Schedule L		_		22		
	23	Secured mortgages and notes payable to unrelated third parties		-		23		
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			282,508			170,192
_		Organizations that follow SFAS 117, check here ▶ ✓ and comple	te line	s 27	·			<u> </u>
ces		through 29, and lines 33 and 34.						
Balance	27	Unrestricted net assets			215,612	27		246,801
Ba	28	Temporarily restricted net assets			5,399	28		5,928
Fund	29	Permanently restricted net assets				29		
Ful		Organizations that do not follow SFAS 117, check here ▶ ┌ and	comple	ete				
or		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
	32	Retained earnings, endowment, accumulated income, or other fund	ds			32		
Net	33	Total net assets or fund balances			221,011	33		252,729
	34	Total liabilities and net assets/fund balances			503,519	34		422,921
Pa	rt XI	Financial Statements and Reporting						
							Yes	No

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

			res	140
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
ь	If "Yes." did the organization undergo the required audit or audits?	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493222016340

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

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.

Open to Public Inspection

Ohio H	umanı	ties Council							000157			
Da	rt I	Peacon	for Public C	harity Status (to be co	mpleted	by all or	aanizatio		-0901572 Instruct			
				ation because it is (Please	•				msuucu	10115)		
1				urches, or association of ch					'A)(i).			
2	<u>'</u>	•		ion 170(b)(1)(A)(ii). (Attac				-, ((,),(,),				
3	<u></u>			hospital service organizati			tion 170(l	o)(1)(A)(i	ii). (Attac	h Schedul	e H)	
4	<u>'</u>	•	•	zation operated in conjunctiv			•		• •		•	
	'		name, city, and	,	on men a 1	iioopitai a		., 5550.5	_, _(_,	(,,,(,,,,,	1101 1110	
5	\vdash				universit	v owned o	r onerated	l hy a dove	rnmental	unit desc	rihed in	
_	'	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	\vdash	A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).										
7	<u> </u>	-	_	ally receives a substantial p						n the dene	ral nublic	
•	'	_		o)(1)(A)(vi) (Complete Par		очрроте по	m a gove	· · · · · · · · · · · · · · · · · · ·		ii tiio goile	u. pabiic	
8	\vdash		-	ed in Section 170(b)(1)(A)	•	nnlete Par	+					
9	<u></u>		•	ally receives (1) more than		•	•	ontribution	ıs. membe	rship fees	and aro	SS
-	•	-		ated to its exempt functions					•			
		•		stment income and unrelate	-		•	, ,	•			
			-	on after June 30, 1975 See						,		
10	\vdash			and operated exclusively to			'		•	ee instruc	tions)	
11	Ė			and operated exclusively fo								ses of
	•	-	•	orted organizations describe		, ,			,	•		
				type of supporting organiza					_			
	_	•	ype I b				nally Integ		d	' ''	III - Otl	
е	ı	•		rtify that the organization is agers and other than one or			•				•	
		section 50		agers and other than one or	more publ	iiciy supp	orteu orga	inzations (aescribeu	III Section	1303(4)(1,01
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ıg organız	ation,
		check this										Г
g		Since Augu following pe		as the organization accepted	d any gift	or contrib	ution from	any of the	!			
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No
			•	ng body of the the supported		_	·		. ,	11g		
			· -	erson described in (i) above	_					11g(
		(iii) a 35%	controlled enti	ty of a person described in (ı) or (ıı) al	bove?				11g(_	
h				nation about the organizatio			supports					<u> </u>
			_	-	_							
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) Am	nount of
		orted		(described on lines 1-9	_	ation in		inization		ation in	supp	ort?
	O rgar	nızatıon		above or IRC section (See Instructions))	col (i)			i) of your		rganized		
	(See Instructions)) your governing support? in the U.S.?											
					Yes	No	Yes	No	Yes	No	1	
							1 22					

Total

Part II Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box o	11 line 5, 7, or	o oi Part I.)				
	ublic Support	, ,						
	endar 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")	949,169	931,534	1,003,530	1,044,260		1,126,078	5,054,571
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 line 1-3	949,169	931,534	1,003,530	1,044,260		1,126,078	5,054,571
5	The portion of total contribution by each							
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)							
6	Public Support subtract line 5 from line 4							5,054,571
T	otal Support							
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	949,169	6,220	1,003,530	1,044,260		1,126,078	5,054,571
8	Gross income from interest, dividends,							_
	payments received on securities loans, rents, royalties and income from similar sources	6,139	6,220	8,778	8,346		5,931	35,414
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 IV)							
11	Total Support (Add lines 7 through 10)							5,089,985
12	Gross receipts from related activities, etc	(See instruction	ıs)			12		621,929
13 C	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		rst, second, thir	d, fourth, or fifth	tax year as a 5	01(c)(→ Γ
14	Public Support Percentage for 2008 (line 6	column (f) dıvıd	led by line 11 c	olumn (f))		14		99.300 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, line 26f			15		99.300 %
	33 1/3% Test - 2008. If the organization diand stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization di	a publicly supp d not check the	orted organizat box on line 13 c	ion or 16a, and line 1	·			
17a	box and stop here. The organization qualification for the stand of the organization meets the "factors, and if the organization organizat	If the organizations to the community of	on did not check ances" test, ch	a box on line 1. eck this box and	stop here. Exp	laın ın	Part IV ho	w the
b	organization meets the "facts and circumst 10% Facts and Circumstances Test - 2007. more, and if the organization meets the "fac	If the organizations to the community of	on did not check ances" test, ch	a box on line 1 eck this box and	3, 16a, 16b, or I stop here. Exp	17a ai Iain in	nd line 15 i Part IV ho	w
18	the organization meets the "facts and circu Private Foundation. If the organization did							►□

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar 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						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	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						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in 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 IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% 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 **33 1/3% 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

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 31-0901572

Name: Ohio Humanities Council

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
		Posit t	(C tion (hat a	chec		I			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Fointer	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
MICHAEL GRIFFATON , CHAIR	1 00	X		Х				0	0	0
SHAKILA AHMAD , MEMBER	1 00	X						0	0	0
ROGER BECKETT, MEMBER	1 00	X						0	0	0
DALE BROWN, MEMBER	1 00	X						0	0	0
ANDREW CAYTON , MEMBER	1 00	Х						0	0	0
HENRY DOLL, MEMBER	1 00	Х						0	0	0
CAROL DONLEY, MEMBER	1 00	Х						0	0	0
DAVID DUNHAM , MEMBER	1 00	Х						0	0	0
NEIL EVANS, MEMBER	1 00	Х						0	0	0
JOHN FLEMING , MEMBER	1 00	Х						0	0	0
JOHN HANCOCK , MEMBER	1 00	Х						0	0	0
ELEIZABETH MAIER , MEMBER	1 00	X						0	0	0
MARJORIE MCLELLAN , MEMBER	1 00	Х						0	0	0
TIMOTHY MESSER-KRUSE , MEMBER	1 00	Х						0	0	0
MARGARET PIATT , MEMBER	1 00	Х						0	0	0
NANCY RECCHIE , MEMBER	1 00	Х						0	0	0
PATRICK REYMANN , MEMBER	1 00	Х						0	0	0
EDGAR VELEZ , MEMBER	1 00	Х						0	0	0
PAUL WATKINS , Treasurer	1 00	Х		Х				0	0	0
JEREMY W WEBSTER , MEMBER	1 00	Х						0	0	0
DEBORAH WITTE , MEMBER	1 00	Х						0	0	0
CHRIS ZACHER, MEMBER	1 00	Х						0	0	0
GALE E PETERSON , EXEC DIR & Secretary	40 00			Х				89,212	0	14,872

Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

THE OHIO HUMANITIES COUNCIL IS A NOT-FOR-PROFIT ORGANIZATION WHOSE PRINCIPAL BUSINESS ACTIVITY IS TO SUPPORT HUMANITIES PROGRAMS, WHICH INCREASE THE PUBLIC'S AWARENESS OF THE IMPORTANT CONTRIBUTION OF THE HUMANITIES TO UNDERSTANDING PUBLIC POLICY ISSUES, OR IMPROVE THE PUBLIC'S KNOWLEDGE AND APPRECIATION OF THE HUMANITIES. THE ORGANIZATION IS THE GOVERNING BODY FOR THE STATE-BASED PROGRAM OF THE NATIONAL ENDOWMENT FOR THE HUMANITIES (neh). THE ORGANIZATION IS SUPPORTED BY ANNUAL GRANTS FROM NEH AND BY CONTRIBUTIONS FROM INDEPENDENT SOURCES. NEH IS A UNIQUIE FEDERAL PROGRAM, ESTABLISHED BY CONGRESS, WHICH AWARDS GRANTS TO EACH OF THE STATE-BASED PROGRAMS.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Open to Public

Campaign Activities)
Б
-B
g Activities)
complete Part II-B
Do not complete Part II-A
•
dentification number
72
on 527
\$
ne instructions
\$
\$
\$ Yes
\$ Yes No Yes No
⊤ Yes
·
⊤ Yes
⊤ Yes
⊤ Yes
Yes No ection 501(c)(3). \$
Yes No ection 501(c)(3). \$ \$ \$ \$
\$ Yes No ection 501(c)(3). \$ \$ Yes No tions to which payments rnal funds or were h as a separate
\$ \$ Yes No tions to which payments rnal funds or were h as a separate Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
\$ \$ Yes No tions to which payments rnal funds or were h as a separate Part IV (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,
-

(election under sec	tion 501(h)). (See the instructions for Schedule C for de		768
<u> </u>			
Limits on Lo	bbying Expenditures—	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
Total lobbying expenditures (add line	es 1a and 1b)		
Other exempt purpose expenditures			
Total exempt purpose expenditures	(add lines 1c and 1d)		
columns—			
or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
Grassroots nontaxable amount (ente	r 25% of line 1f)		
Subtract line 1g from line 1a Enter -	0- if line g is more than line a		
Subtract line 1f from line 1c Enter -	O- if line f is more than line c		
If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form 4720 repo	orting	┌ Yes ┌ No
	Check If the filing organization Check If the filing organization Limits on Low (The term "expenditures to influe Total lobbying expenditures to influe Total lobbying expenditures (add line Other exempt purpose expenditures Total exempt purpose expenditures to Lobbying nontaxable amount Enter to columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 Grassroots nontaxable amount (enter Subtract line 1g from line 1a Enter Subtract line 1f from line 1c Enter If there is an amount other than zero	(election under section 501(h)). (See the instructions for Schedule C for detect of the filing organization belongs to an affiliated group (heck of the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 but not over \$1,000,000 \$100,000 plus 10% of the excess over \$1,500,000 Over \$17,000,000 but not over \$1,000,000 \$205,000 plus 5% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 \$205,000 plus 5% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 \$205,000 plus 5% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 \$205,000 plus 5% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 \$1,000,000	Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$1,000,000 but not over \$1,000,000 Ver \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Fig. Soon plus 5% of the excess over \$1,500,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Fig. Soon plus 5% of the excess over \$1,500,000 Over \$1,000,000 Over \$1,000,000 Fig. Soon plus 5% of line 1f) Subtract line 1g from line 1a Enter -0 - if line g is more than line a Subtract line 1ffrom line 1c Enter -0 - if line f is more than line c If there is an amount other than zero on either line 1 in or line 1, did the organization file Form 4720 reporting

	Lobbying Expendit	ures During 4	1-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line d, column (e))					
f	Grassroots lobbying expenditures					

		· - 9	_
Part II-B	To be completed by o	organizations exempt under section 501(c)(3) that have NOT filed Form	
	5768 (election under	section 501(h)). (See the instructions for Schedule C for details.)	

		(a)		(b)		
		Yes	No	A	moun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νo	1		
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νο			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				4,986
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo			
i	Other activities If "Yes," describe in Part IV		Νo			
j	Total lines 1c through					4,986
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes" enter the amount of any tax incurred under section 4912			1		
С	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A To be completed by all organizations exempt under section 501(c)(4), se section 501(c)(6). (See the instructions for Schedule C for details.)	ection	501(c)(5)), or	
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), so section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No question 3 is answered "Yes." (See the instructions for Schedule C for details.	" OR if				
1	Dues, assessments and similar amounts from members	_	1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	1				
а	Current Year		2a \$			
ь	Carryover from last year		2b\$			
C	Total		2c \$			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3 \$			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	al				

Part IV Supplemental Information

expenditure next year?

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)

Ident if ier	Return Reference	Explanation

Part IV Supplemental I	Part IV Supplemental Information					
Ident if ier	Return Reference	Explanation				

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **Employer identification number** Ohio Humanities Council 31-0901572

Par —	Organizations Maintaining Donor Adordanization answered "Yes" to Form 99		unas or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
L '	Total number at end of year		
: .	Aggregate Contributions to (during year)		
	Aggregate Grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		nor advised Yes No
	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bend Impermissible private benefit?	efit of the donor or donor advisor or other	☐ Yes ☐ No
ar	Conservation Easements. Complete	if the organization answered "Yes" t	to Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualif	on or pleasure) Preservation of ar Preservation of ce	ertified historic structure
	on the last day of the tax year		
			Held at the End of the Yea
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	5	2b
С	Number of conservation easements on a certified his	storic structure included in (a)	2c
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	ed by the organization during
	the taxable year 🕨		
ļ	Number of states where property subject to conserva	tion easement is located ▶	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, viol	ations, and Yes No
•	Staff or volunteer hours devoted to monitoring, inspec	cting and enforcing easements during the	e year 🕨
,	A mount of expenses incurred in monitoring, inspectir	ng, and enforcing easements during the y	ear ► \$
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	ction Yes No
	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easem	he footnote to the organization's financia	• '
art	Organizations Maintaining Collection Complete if the organization answered "		or Other Similar Assets.
	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin:	for public exhibition, education or resear	ch in furtherance of public service,
_	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p provide the following amounts relating to these items	public exhibition, education, or research i	·
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$
<u>!</u>	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS	· ·	'
а	Revenues included in Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

3							<u>r Similar Ass</u>		
	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e fol	lowing that are	a sıgnıfıcant u	se of its collecti	on	
а	Public exhibition		d	Γ	Loan or exch	ange programs			
b	Scholarly research		e	Γ	Other				
c	Preservation for future generations								
4	Provide a description of the organization's co Part XIV	ollections and expla	ın hov	v the	y further the or	rganızatıon's ex	cempt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							Yes	┌ No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an an					nization answ	ered "Yes" to	orm 9	990,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontributions oi	r other assets		Yes	┌ No
b	If "Yes," explain why in Part XIV and comple	te the following tabl	le						
							A mo	unt	
c	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f	_		
2a	Did the organization include an amount on Fo		e 21?				Г	Yes	│ No
	If "Yes," explain the arrangement in Part XIV								
Pai	rt V Endowment Funds. Complete							-\ [\	/aara Daak
1a	Beginning of year balance	(a)Current Year 5,399	(D	Prior '	rear (C)TWO	Years Back (d)	Three Years Back	e)rour i	rears back
ь	Contributions	3,333							
c	Investment earnings or losses	529							
d	Grants or scholarships	025							
e	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance	5,928							
g 2	End of year balance		as						
_	•		as						
2	Provide the estimated percentage of the year		as						
2 a	Provide the estimated percentage of the yea		as						
2 a b	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the possesses.	r end balance held a		that a	are held and ac	lmınıstered for	the		
2 a b	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by	r end balance held a		that a	are held and ac	lmınıstered for		Yes	+
2 a b	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a	ation ·			Iministered for	3a(i	1	No
2 a b c 3a	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Term endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a	ation			Iministered for	3a(ii	1	
2 a b c 3a	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a	ation ·	ched	 ule R?	Iministered for	3a(i	1	No
2 a b c 3a b	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	ched	 ule R?		3a(ii	1	No
2 a b c 3a b	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	ule R?	rt X, line 10.	3a(i)	No No
2 a b c 3a b	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	 ule R?		3a(i 3b)	No
2 a b c 3a b Par	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	ule R?	rt X, line 10.	3a(i)	No No
2 a b c 3a b 4 Par	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	ule R?	rt X, line 10.	3a(i)	No No
2 a b c 3a b 4 Parr	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	ule R?	rt X, line 10.	3a(i)	No No
2 a b c 3a b 4 Par	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment Term endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the tyle Investment Description of investment Land Land Buildings	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	ule R?	rt X, line 10.	3a(ii 3a(ii 3b)	(d) E	No No Book value
2 a b c 3a b 4 Par	Provide the estimated percentage of the year Board designated or quasi-endowment Permanent endowment 100 000 % Are there endowment funds not in the posses organization by (i) unrelated organizations	r end balance held a ssion of the organiza ns listed as required e organization's end	ation • • d on S dowme	chedent fu	ule R?	rt X, line 10. (b)Cost or other basis (other)	3a(ii 3a(ii 3b)	(d) E	No No

Part VII Investments—Other Securities. See	Form 990, Part X, line 13	2.	
(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other Beneficial Interest in Assets Held by Others	184,779		
T. I. (C. I. (I) I. I. I. COO. D. I.V. ((C) I. (C) I.	104.770		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) 🕨	184,779		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method	d of valuation
	. ,	Cost or end-of-	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	45		
Part IX Other Assets. See Form 990, Part X, III (a) Descrip			(b) Book value
(a) Descri	ption		(b) book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line :	15)		
Part X Other Liabilities. See Form 990, Part X			
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) 🕨			
. , , , , , , , , , , , , , , , , , , ,	ı		

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,285,857
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	1,282,446
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	3,411
4 Net unrealized gains (losses) on investments	4	28,307
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 - 8	9	28,307
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	31,718
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1 Total revenue, gains, and other support per audited financial	_	1,314,164
statements	1	
A mounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments		
a Net unrealized gains on investments		
c Recoveries of prior year grants		
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d	2e	28,307
3 Subtract line 2e from line 1	3	1,285,857
4 A mounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b Other (Describe in Part XIV) 4b		
c Add lines 4a and 4b	4c	0
5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,285,857
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1 Total expenses and losses per audited financial statements	1	1,282,446
A mounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments		
c Losses reported on Form 990, Part IX, line 25		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	0
3 Subtract line 2e from line 1	3	1,282,446
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	-	
b Other (Describe in Part XIV)	-	
c Add lines 4a and 4b	4c	0
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,282,446

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
art V , Line 4	Description of Intended Use of Endowment Funds	THE TEMPORARILY RESTRICTED FUNDS ARE TO BE USED FOR SPECIFIC PROGRAMS IN SUPPORT OF THE HUMANITIES
		ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THE APPLICATION OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES FOR CERTAIN NONPUBLIC ENTERPRISES HAS BEEN DELAYED UNTIL ANNUAL FINANCIAL STATEMENTS FOR FISCAL YEARS BEGINNING AFTER DECEMBER 15, 2008 THE DEFERRED EFFECTIVE DATE IS INTENDED TO GIVE FASB ADDITIONAL TIME TO AMEND THE DISCLOSURE REQUIREMENT FOR NONPUBLIC ENTERPRISES AND TO DEVELOP GUIDANCE ON THE APPLICATION OF ACCOUNTING FOR INCOME TAXES THE ORGANIZATION HAS ELECTED TO DEFER ADOPTION OF THE ACCOUNTING STANDARD UNTIL NOVEMBER 1, 2009, AND WILL ASSESS THE IMPACT OF THE STANDARD ONCE ADDITIONAL GUIDANCE IS PROVIDED ON ITS APPLICATION TO NON-FOR-PROFIT ORGANIZATIONS

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Grants and Other Assistance to Organizations,

OMB No 1545-0047

DLN: 93493222016340

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Governments and Individuals in the U.S.

Open to Public Inspect ion

Name of the organization						Employer identif	cation number
Ohio Humanities Council						31-0901572	
Part I General Inform	mation on Gra	nts and Assistance				•	
	d to award the grai	nts or assistance?			libility for the grants or ass		✓ Yes —
Form 990, Part : Part IV and Sch	IV, line 21 for ar edule I-1 if addi	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the original rece	ived more than \$5,0	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of seconganizations					•		5
3 Enter total number of oth							. 8

Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization	answered "Yes"	on Form 990,	Part IV,	line 22
	Use Schedule I-1 (Form 990) if additional space is needed.					

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
BJORNSOM HUMANITARIAN AWARD	1	1,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 GRANTEES SUBMIT GRANT APPLICATIONS DETAILING WHAT THE PROJECT IS AND THE REQUESTED AMOUNT THE RE-GRANT COMMITTEE OF THE BOARD MAKES RECOMMENDATIONS OF WHICH GRANTS SHOULD BE FUNDED AND HOW MUCH SHOULD BE AWARDED THE COUNCIL THEN VOTES/RATIFIES THE GRANTS THAT THE COMMITTEE AWARDED THOSE RECEIVING GRANT FUNDS SIGN A STANDARD CONTRACT THE GRANTEES THEN RECEIVE 90% OF THE GRANT FUNDS UPFRONT TO CLAIM THE REMAINING 10%, THE GRANTEES MUST SUBMIT A WRITTEN REPORT ABOUT THE PROJECT

Software ID: Software Version:

EIN: 31-0901572

Name: Ohio Humanities Council

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF AKRON POLSKY BUILDING 284A AKRON,OH 44325	34-6002924	115	15,000				"FINAL EDITION"
OHIO HISTORICAL SOCIETY1982 VELMA AVENUE COLUMBUS,OH 43211	31-4389673	501(C)(3)	10,000				"OHIO MODERN PRESERVING OHIO'S RECENT PAST" AND THE "WRITING FOR CLARITY WORKSHOP"
WESTERN RESERVE HISTORICAL SOCIETY 10825 EAST BLVD CLEVELAND,OH 44106	34-0714724	501(C)(3)	20,000				"WESTERN RESERVE HISTORICAL SOCIETY CORE EXHIBIT DEVELOPMENT PHASE II"
KENT STATE UNIVERSITY PO BOX 5190 KENT,OH 44242	31-6402079	115	31,000				Institute for precollegiate teachers, "JAZZ AND THE AMERICAN CENTURY USING POPULAR MUSIC" AND an exhibit project,"THE HUMAN FACE, THE LIVING VOICE OF HISTORY MAKING MEANING OF MAY 4"
CENTER FOR AFRICAN STUDIES THE OHIO STATE UNIVERSITY RESEARCH DEPARTMENT1960 KENNY ROAD COLUMBUS,OH 43210	31-6025986	115	15,000				"SOMALI HISTORY, LANGUAGE, AND CULTURE"
GALLIA-VINTON EDUCATIONAL SERVICES PO BOX 178 RIO GRANDE, OH 45674		115	15,000				"APPALACHIAN PORTRAIT PROJECT"
CENTER FOR ENVIRONMENTAL EDUCATION NATURAL HISTORY AND CONS MIAMI UNIV102 ROUDEBUSH HALL OXFORD,OH 45056	31-6402089	115	13,870				"A PEOPLE AND THEIR HOMELAND THE MIAMI TRIBE (MYAAMIA)"
SOUTHERN OHIO MUSEUM AND CULTURAL CENTER 825 GALLIA STREET PORTSMOUTH,OH 45662	31-0914613	501(C)(3)	15,000				"SAWDUST AND SPECTACLE UNDER THE BIG TOP IN SMALL TOWN AMERICA"
MIAMI UNIVERSITY243 UPHAM HALL OXFORD,OH 45056	31-6402089	115	15,000				"THE DIGITIZATION OF THE MISSISSIPPI FREEDOM SUMMER COLLECTION WESTERN COLLEGE FOR WOMEN AT MIAMI UNIVERSITY"
THE UNIVERSITY OF CINCINNATI200 VAN WORMER HALL CINCINNATI,OH 45221	31-6000989	115	22,000				"THE ANCIENT OHIO TRAIL" AND "DARWIN AND EVOLUTION - EVIDENCE AND IMPACT ON SOCIETY"

Form 990,Schedule I,	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOSU PUBLIC MEDIA 2400 OLENTANGY RIVER ROAD COLUMBUS,OH 43210	31-6025986	115	10,000				"COLUMBUS NEIGHBORHOODS COLUMBUS AND FRANKLINGTON A CAPITAL IDEA"
THE MERCANTILE LIBRARY ASSOCIATION 414 WALNUT STREET CINCINNATI, OH 45202	1	501(C)(3)	20,000				"BOOKS BY THE BANKS"
OHIOANA LIBRARY ASSOCIATION274 E 1ST AVENUE STE 300 COLUMBUS,OH 43201	31-4379616	501(C)(3)	10,000				"2009 OHIOANA BOOK FESTIVAL - CELEBRATING OHIO'S AUTHORS"

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization Ohio Humanities Council Employer identification number

31-0901572

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	TEACHERS INSTITUTES - Teachers Institutes are provided to ohio K-12 teachers and administrators for networking and interaction to allow them to share ideas and teaching METHODS Expenses \$ 57350 including grants of \$ 44870 Revenue \$ 0

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Speakers Bureau - The Ohio Humanities Council provides professional historical speakers to raise public awareness of history in communities. These speakers may also discuss other humanities topics such as literature, philosophy, law and archaeology. Expenses \$ 36950. including grants of \$ 0. Revenue \$ 0.

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	PATHWAYS NEWSLETTER - The Pathways new sletter is issued to provide the general public with a schedule of upcoming events and programs around ohio focusing on all areas of the humanities Expenses \$ 26091 including grants of \$ 0 Revenue \$ 0

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	NEW DEAL PROJECTS - THE NEW DEAL PROJECT IS A MULTI-YEAR RESEARCH AND OUTREACH ACTIVITY EXPLORING THE LEGACY OF FDR'S NEW DEAL INITIATIVES Expenses \$ 55520 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	TEXT BASED DISCUSSIONS - TEXT-BASED DISCUSSIONS ARE READING AND DISCUSSION SEMINARS USING SHORT, COMPELLING WORKS OF LITERATURE TO ENCOURAGE NEW WAYS OF THINKING ABOUT IMPORTANT WORKPLACE ISSUES THE SEMINARS GIVE PROFESSIONALS THE CHANCE TO RETREAT TEMPORARILY FROM "BUSINESS AS USUAL" AND MEET THEIR PEERS IN A CANDID AND SUPPORTIVE ENVIRONMENT TO EXPLORE COMMON DILEMMAS AND EVERY DAY PRESSURES, USING SHORT LITERARY READINGS AS A SPRINGBOARD FOR DISCUSSION SINCE 1999, THE OHIO HUMANITIES COUNCIL HAS SPONSORED READING AND DISCUSSION PROGRAMS FOR LAWYERS, TEACHERS, HEALTH-CARE WORKERS, PARK SERVICE WORKERS, AND AMERICORPS VOLUNTEERS Expenses \$ 50114 including grants of \$ 0 Revenue \$ 0

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	ORAL HISTORY INSTITUTE - THE ORAL HISTORY INSTITUTE IS A THREE DAY RESIDENTIAL PROGRAM TO TEACH METHODOLOGY FOR PLANNING AND CONDUCTING A SUCCESSFUL ORAL HISTORY PROJECT THE PROGRAM SERVES APPROXIMATELY THIRTY PARTICIPANTS ANNUALLY, INCLUDING VOLUNTEERS AND STAFF FROM HISTORICAL SOCIETIES AND MUSEUMS, COLLEGE PROFESSORS AND STUDENTS, AND INDIVIDUAL RESEARCHERS THUS, IT BUILDS CAPACITY IN HISTORICAL INSTITUTIONS TO FULFILL THEIR MISSIONS, AND PROVIDES THE MEANS FOR DEVELOPING NEW UNDERSTANDING AND CREATING NEW RESOURCES FOR FUTURE RESEARCHERS EXPENSES \$ 18956 including grants of \$ 0 Revenue \$ 0

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER WE THE PEOPLE PROJECTS - OTHER WE THE PEOPLE PROJECTS INCLUDE A VARIETY OF DIFFERENT PROJECTS THAT HELP PROMOTE THE HUMANITIES THROUGHOUT THE STATE OF OHIO Expenses \$ 43410 including grants of \$ 0 Revenue \$ 0

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER COUNCIL PROJECTS - OTHER COUNCIL PROJECTS INCLUDE A VARIETY OF OTHER PROJECTS THAT HELP PROMOTE THE HUMANITIES THROUGHOUT THE STATE OF OHIO Expenses \$ 57450 including grants of \$ 0 Revenue \$ 78180

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM THE FORM 990 IS THEN REVIEWED BY THE BUSINESS MANAGER AND EXECUTIVE DIRECTOR THE FORM 990 IS THEN PROVIDED TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING

ldentifier	Return Reference	Explanation				
Form 990, Part VI, Section B, Inne 12c		during their terms, council members, or any member of their immediate familes, may not receive honoraria, salaries, or stipends for project-related activities, grant participation, and other council business. The council's long-standing ethics policy requires that board members abstain from voting in the consideration of applications from institutions or groups which they represent or in which they hold membership, and shall not assume a position of advocacy for such applications. This policy has been monitored by recording in the minutes of the organization all recusals by board members in complinace with this policy. In december 2009, the council adopted a broader conflict of interest policy that includes completing annual statements disclosing potential conflicts of itnerest.				

Identifier	Return Reference	Explanation				
Form 990, Part VI, Section B, line 15		THE PROCESS OF DETERMINING THE COMPENSATION PACKAGE OF THE EXECUTIVE DIRECTOR INCLUDES A PERFORMANCE REVIEW BY THE EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE ALSO USES BUDGET SIZE AND COMPARABILITY DATA TO DETERMINE THE COMPENSATION PACKAGE ANY CHANGES TO THE COMPENSATION PACKAGE OF THE EXECUTIVE DIRECTOR MUST BE APPROVED BY THE BOARD OF DIRECTORS ALL DELIBERATIONS AND DECISIONS ARE RECORDED IN BOARD MINUTES. There were no other officers or key employees that were compensated during the year. Salaries for other employees of the organization are also determined using a similar process and are determined based upon performance evaluation and comparability data, the board determines the amount of any increase to the salary pool and the final roster of salaries is presented to the executive committee by the executive director.				

ldentifier	Return Reference	Explanation				
Form 990, Part VI, Section C, line 19		THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST				

ldentifier	Return Reference	Explanation				
FORM 990, PART XI, LINE 2C	AUDIT COMMITTEE	THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT The entire board is responsible for SELECTION OF THE INDEPENDENT ACCOUNTANT THE PROCESS BY WHICH THE Organization OVERSEES THE AUDIT AND SELECTS THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEARS				

ldentifier	Return Reference	Explanation				
PART VI, SECTION B	POLICIES	THE ORGANIZATION implemented A CONFLICT OF INTEREST STATEMENT, WHISTLEBLOWER POLICY, AND A DOCUMENT RETENTION AND DESTRUCTION POLICY THESE POLICIES Were RATIFIED AND IMPLEMENTED on december 4, 2009				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493222016340

OMB No 1545-0172

Department of the Treasury

Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Attachment Sequence No 67

Name(s) shown on return Ohio Humanities Council	Business or a	Business or activity to which this form relates			Identifying number 			
omo numamines council	Form 990 Pa	Form 990 Page 10				31-0901572		
	•	Certain Property Un			lata Dawt I			
		sted property, comple			ete Part I.	т.	250.000	
1 Maximum amount See		_				1	250,000	
2 Total cost of section 179 property placed in service (see instruction						2		
3 Threshold cost of section 179 property before reduction in limitation (see instructions)						3	800,000	
4 Reduction in limitation	Subtract line 3	from line 2 If zero or les	s, enter - 0 -			4		
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing								
separately, see instruc	tions					5		
(a) D	escription of pro	perty	1 ' '	(business use only)	(c) Elected	cost		
6								
7 Listed property Enter:	the amount from	June 20		7				
7 Listed property Enter8 Total elected cost of se				. 7		8		
			ullili (c), lilles o	allu /		-		
9 Tentative deduction E						. 9		
10 Carryover of disallowed		•				10		
11 Business income limitation	Enter the smaller of	business income (not less tha	n zero) or line 5 (se	ee instructions)		11		
12 Section 179 expense of	deduction Add I	ines 9 and 10, but do not	enter more tha	n line 11 •		12		
13 Carryover of disallowed	d deduction to 2	009 Add lines 9 and 10.	. less line 12	.▶ 13				
Note: Do not use Part								
		Allowance and Othe			iclude listed r		/) (See instructions)	
14 Special depreciation al tax year (see instruction	lowance for qua		_				, , (See mistractions)	
15 Property subject to see	•	election				15		
16 Other depreciation (inc		stection				16	17,786	
		Do not include listed i	oronerty) (Se	e instructions	:)	110	17,780	
MACKS DE	preciation (ection A	ee msa acaons	.,			
17 MACRS deductions for	assets placed i			008		17		
18 If you are electing t					ne or more			
general asset accou	nts, check hei	re			▶□			
Section B—Asse	ets Placed in	Service During 200	08 Tax Year	Using the G	eneral Dep	recia	tion System	
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use	(d) Recovery period	(e) Convention	n (f) Meth	od	(g)Depreciation deduction	
40.0		only—see instructions)				\longrightarrow		
19a 3-year property						\longrightarrow		
b 5-year property						\longrightarrow		
c 7 - year property								
d 10-year property						\longrightarrow		
e 15-year property						\longrightarrow		
f 20-year property			2.5		6.0	\longrightarrow		
g 25-year property			25 yrs		S/L	\longrightarrow		
h Residential rental			27 5 yrs	MM	S/L	\longrightarrow		
property			27 5 yrs	MM	S/L	\longrightarrow		
i Nonresidential real property			39 yrs	M M M M	S/L S/L	\rightarrow		
	n C—Assets Disa	l ced in Service During 2008	 R Tay Voar Hein	1		n Syste		
20a Class life	II C—ASSELS FIA		Tax real osing			II Syste		
	1		12 yrs		S/L	\rightarrow		
b 12-year c 40-year			12 yrs 40 yrs	MM	S/L S/L	\dashv		
· · · · · · · · · · · · · · · · · · ·	<u>I</u> y (See instrud	tions)	I TO AIR	1 1919] 3/L			
21 Listed property Enter	•					21		
	lines of your ret	urn Partnerships and S	corporations—se	ee instr	· · ·	22	17,786	
23 For assets shown abov portion of the basis att	•		t year, enter the	23				
For Paperwork Peduction A	ct Notice see s	enarate instructions	Cat No. 129	0.6.N		F	orm 4562 (2008)	

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) service basis use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 1 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? _ 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e)

(d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or amount section this year beains percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44