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Form **990**Department of the Treasury
Internal Revenue Service**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)

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

OMB No 1545-0047

2009Open to Public
Inspection**A For the 2009 calendar year, or tax year beginning****and ending****B Check if applicable**

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type

See Specific Instructions

C Name of organization**Yellow Springs Community Foundation**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

P.O. Box 55

City or town, state or country, and ZIP + 4

Yellow Springs, OH 45387**F Name and address of principal officer Bruce Bradtmiller same as C above****D Employer identification number****23-7372791****E Telephone number****(937) 767-2655****G Gross receipts \$****1,170,567.****H(a) Is this a group return**

for affiliates?

☐ Yes☒ No**H(b) Are all affiliates included?**☐ Yes☒ No

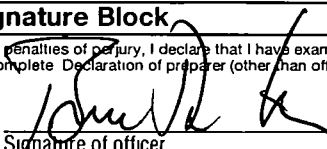
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I Tax-exempt status** ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:** **www.yscf.org****K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L Year of formation:** **1974****M State of legal domicile:** **OH****Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1	Briefly describe the organization's mission or most significant activities To enhance community life in Yellow Springs and Miami Township by providing means for charitable						
2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets						
3	Number of voting members of the governing body (Part VI, line 1a)	3					
4	Number of independent voting members of the governing body (Part VI, line 1b)	4					
5	Total number of employees (Part V, line 2a)	5					
6	Total number of volunteers (estimate if necessary)	6					
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a					
7b	Net unrelated business taxable income from Form 990-T, line 34	7b					
8	Contributions and grants (Part VIII, line 1h)		217,690.		453,009.		
9	Program service revenue (Part VIII, line 2g)						
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		85,564.		33,875.		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		400.		400.		
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		303,654.		487,284.		
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		94,325.		84,147.		
14	Benefits paid to or for members (Part IX, column (A), line 4)						
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		13,734.		13,624.		
16a	Professional fundraising fees (Part IX, column (A), line 11e)						
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 425.						
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		30,764.		29,155.		
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		138,823.		126,926.		
19	Revenue less expenses Subtract line 18 from line 12		164,831.		360,358.		
20	Total assets (Part X, line 16)		Beginning of Current Year 3,243,394.		End of Year 3,479,366.		
21	Total liabilities (Part X, line 26)		876,677.		752,291.		
22	Net assets or fund balances Subtract line 21 from line 20		2,366,717.		2,727,075.		

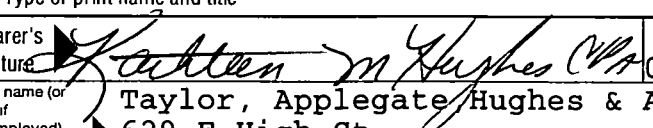
Part II Signature Block

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.

Sign Here ▶  **Signature of officer** **10/12/10** **Date**

▶ **Bruce Bradtmiller, President/Trustee** **Type or print name and title**

Paid Preparer's Use Only

Preparer's signature  **Date** **09/29/10** **Check if self-employed** ☐ **Preparer's identifying number (see instructions)**

Firm's name (or yours if self-employed), address, and ZIP + 4 **Taylor, Applegate Hughes & Assoc. Ltd** **EIN** ▶ **629 E High St** **Springfield, OH 45505** **Phone no.** ▶ **(937) 325-1538**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

- 1 Briefly describe the organization's mission See Schedule O for Continuation
Entrusted with the responsibility of enhancing community life, the
Yellow Springs Community Foundation has the following vision: to serve
as a catalyst and resource for philanthropy; to build and be stewards
of endowments that address the community's evolving needs; to provide
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 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 (Code) (Expenses \$ 102,726. including grants of \$ 84,147.) (Revenue \$)
Benefits the citizens of Yellow Springs and Miami Township by awarding
grants to other non-profit organizations and scholarships to students.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 102,726.

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
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		
6 Did the organization maintain any donor advised funds or any similar funds or 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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Yes 12A	No X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
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		X
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		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
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		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
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		X
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		X
36 Section 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		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		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.	0	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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 premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter.		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter.		
a	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 lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	9	
b Enter the number of voting members that are independent	8	
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	X
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	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
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?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
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	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
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?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
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	X
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**

18 Section 6104 requires an organization to make its Forms 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 ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. **Perry M. Stewart, Asst. Treasurer - (937)767-4541**
P.O. Box 55, Yellow Springs, OH 45387

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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☒ Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Dave Wishart Treasurer/Trustee	3.00	X		X				0.	0.	0.
Bruce Bradtmiller Pres./Trustee	5.00	X		X				0.	0.	0.
Susan Miller Trustee	2.00	X						0.	0.	0.
Jane Scott V.P./Trustee	4.00	X		X				0.	0.	0.
Jane Baker Sec./Trustee	2.00	X		X				0.	0.	0.
Staffan Erickson Trustee	2.00	X						0.	0.	0.
Orlando Brown Trustee	2.00	X						0.	0.	0.
Maureen Lynch Trustee	2.00	X						0.	0.	0.
Joan Ackerman Trustee	2.00	X						0.	0.	0.
Perry M. Stewart Asst. Treas./Non-Trustee	3.00							0.	0.	0.

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a	453,009.					
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above	1f						
	g Noncash contributions included in lines 1a-1f \$							
	h Total. Add lines 1a-1f		453,009.					
Program Service Revenue			Business Code					
	2 a							
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			83,111.			83,111.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross Rents	(i) Real	(ii) Personal					
	b Less: rental expenses							
	c Rental income or (loss)							
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
	b Less cost or other basis and sales expenses							
	c Gain or (loss)							
	d Net gain or (loss)			-49,236.	-49,236.			
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a						
	b Less direct expenses	b						
	c Net income or (loss) from fundraising events							
	9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less direct expenses	b						
	c Net income or (loss) from gaming activities							
	10 a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b						
	c Net income or (loss) from sales of inventory							
	Miscellaneous Revenue			Business Code				
	11 a Trustee Fee		525920	400.		400.		
b								
c								
d All other revenue								
e Total. Add lines 11a-11d			400.					
12 Total revenue. See instructions.			487,284.	-49,236.	400.	83,111.		

Part IX Statement of Functional Expenses

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 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	78,497.	78,497.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	5,650.	5,650.		
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				
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	12,563.		12,563.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	1,061.		1,061.	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	4,325.	2,163.	2,162.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	15,726.	15,726.		
g Other	661.		661.	
12 Advertising and promotion	1,346.		1,346.	
13 Office expenses	2,427.		2,002.	425.
14 Information technology	500.		500.	
15 Royalties				
16 Occupancy	1,380.	690.	690.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	550.		550.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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.)				
a Insurance	1,424.		1,424.	
b Membership Dues	575.		575.	
c Filing Fees	200.		200.	
d Bank/tax fees	41.		41.	
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	126,926.	102,726.	23,775.	425.
26 Joint costs. Check here ☐ 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	-1.
	2 Savings and temporary cash investments	529,924.	2	1,950,013.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	2,695,970.	11	1,511,854.
	12 Investments - other securities. See Part IV, line 11	17,500.	12	17,500.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,243,394.	16	3,479,366.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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 to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	876,677.	25	752,291.
	26 Total liabilities. Add lines 17 through 25	876,677.	26	752,291.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☒ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0.	30	0.
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	2,366,717.	32	2,727,075.
	33 Total net assets or fund balances	2,366,717.	33	2,727,075.
	34 Total liabilities and net assets/fund balances	3,243,394.	34	3,479,366.

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

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?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

Yellow Springs Community Foundation

Employer identification number

23-7372791

Part I	Reason for Public Charity Status (All organizations must complete this part) See instructions.
---------------	--

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) ☐ A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) ☐ A family member of a person described in (i) above?

(iii) ☐ A 35% controlled entity of a person described in (i) or (ii) above?

h ☐ Provide the following information about the supported organization(s)

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

[illegible]

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	263,853.	78,487.	73,456.	217,690.	387,494.	1020980.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	263,853.	78,487.	73,456.	217,690.	387,494.	1020980.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						478,836.
6 Public support. Subtract line 5 from line 4						542,144.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	263,853.	78,487.	73,456.	217,690.	387,494.	1020980.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	68,644.	92,709.	81,950.	101,595.	34,655.	379,553.
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)	400.	400.	400.	400.	3,202.	4,802.
11 Total support. Add lines 7 through 10						1405335.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	38.58 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	27.76 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐		
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐		
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐		

Schedule A (Form 990 or 990-EZ) 2009

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

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule DS
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009Open to Public
Inspection

Name of the organization

Yellow Springs Community Foundation

Employer identification number

23-7372791

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	471,814.
1d	65,861.
1e	17,200.
1f	520,475.

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,180,563.	2,032,288.			
b Contributions	354,768.	172,464.			
c Net investment earnings, gains, and losses	81,629.	67,050.			
d Grants or scholarships	71,891.	91,239.			
e Other expenditures for facilities and programs	566.				
f Administrative expenses					
g End of year balance	2,544,503.	2,180,563.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Term endowment ☐ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

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

0.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1 (a) Description of liability	(b) Amount
Federal income taxes	
Agency Funds	752,291.
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	
	752,291.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	487,284.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	126,926.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	360,358.
4	Net unrealized gains (losses) on investments	4	
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 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	360,358.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	487,284.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	487,284.
4	Amounts 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 must equal Form 990, Part I, line 12.)	5	487,284.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	126,926.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	126,926.
4	Amounts 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.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	126,926.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part IV, line 1b: The Foundation is the successor trustee for the Edwin

K. Foos Trust. The Foundation manages the investments and determines the annual distributions to the beneficiaries.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

Yellow Springs Community Foundation

Employer identification number
23-7372791

Part I General information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ▶

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Glen Helen Ecology Institute (Antioch University) - 405 Corry St., - Yellow Springs, OH 45387	31-0536640	501(c)(3)	19,879.	0.	FMV		\$5,209 General support; \$9,670 Infrastructure Grant; \$5,000 Trailside Museum Improvements
Little Art Theatre Association 247 Xenia Ave. Yellow Springs, OH 45387	26-4341066	501(c)(3)	6,000.	0.	FMV		\$5,000 Challenge Grant; \$1,000 Assistance toward attaining non-profit status
Village of Yellow Springs Bryan Building Yellow Springs, OH 45387	31-6001097		10,300.	0.	FMV		\$10,000 Visioning & Planning Process; \$300 Police Dept. Coat Fund
Yellow Springs Arts Council P.O. Box 459 Yellow Springs, OH 45387	31-1215024	501(c)(3)	6,799.	0.	FMV		\$6,000 Expansion Project Part II; \$499 For 365 Committee; \$300 Holly Hudson Play
Yellow Springs Exempted Village School District - 201 S. Walnut St., - Yellow Springs, OH 45387	31-6000874		6,887.	0.	FMV		\$3,000 Mills Lawn School Landscaping; \$1,600 Jr. Nat'l. Leaders Conference; \$737 Youth

2 Enter total number of section 501(c)(3) and government organizations

▶ **3.**

3 Enter total number of other organizations

▶ **2.**

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

See Part IV for Column (h) descriptions

Schedule I (Form 990) 2009

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Awards and scholarships for students in the Yellow Springs Exempted Village School District	8	5,650.	0.		

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

Schedule I, Part I, Line 2: The Foundation's Grant Agreement Letter includes requiring the grantee to file a final report. The Foundation maintains a tracking list for follow-up if the grantee's final report has not been received in a timely manner.

Part II, line 1, Column (h):

Name of Organization or Government:

Yellow Springs Exempted Village School District

(h) Purpose of Grant or Assistance: \$3,000 Mills Lawn School

Part IV Supplemental Information

landscaping; \$1,600 Jr. Nat'l. Leaders Conference; \$737 Youth

Philanthropy; \$1,550 General support

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

Yellow Springs Community Foundation

Employer identification number

23-7372791

Form 990, Part I, Line 1, Description of Organization Mission:

giving and grant making that fund a broad range of activities.

Form 990, Part III, Line 1, Description of Organization Mission:

flexible and cost-effective ways for donors to improve our community;
and to excel in strategic grant making in areas that include arts,
culture, education, recreation, scientific research, and social
services.Form 990, Part VI, Section B, line 11: The trustees can review the Form
990 electronically on the secure part of the Foundation's website.

Approval can be either electronically or at a regular meeting.

Form 990, Part VI, Section B, Line 12c: The Foundation Administrator
monitors the process of having trustees complete the relevant form. Then
the Foundation Administrator reports the disclosures to the trustees who
enforce the policy.Form 990, Part VI, Section C, Line 19: The Foundation makes its governing
documents, conflict of interest policy, and financial statements available
to the public upon request.

ACCOUNT NUMBER: 3615-1602
YELLOW SPRINGS COMMUNITY FOUNDATION
UNRESTRICTED POOL 1

PG. 1 OF 2

This statement is for the period from
January 1, 2009 to December 31, 2009**SALE/MATURITY SUMMARY**

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
Cash and Equivalents				
	West End Bk C D # 140012201 4.300 04/25/2009 140012201			
05/07/09	Redeemed 15,000 Par Value Trade Date 5/7/09	- 15,000.00	15,000 00	
	Total Cash and Equivalents	- \$15,000.00	\$15,000.00	\$0.00
Taxable Bonds				
	Federal Home Loan Bks 4.030 07/16/2013			
01/16/09	Full Call 10,000 10,000 \$1 Pv On 01/16/09 At 1 00 USD Federal Tax Cost 10,000.00 USD Corporate Action Id 267947	- 10,000.00	10,000 00	
	First American Total Return Bond Fd CI Y FCBYX			
04/23/09	Sold 1,523.796 Shares Trade Date 4/22/09 1,523.796 Shares At 7.86 USD	- 17,500 00	11,977.04	- 5,522 96
	International Lease Fin Corp M T N Ser O 4.375 11/01/2009			
11/02/09	Matured 10,000 Par Value Trade Date 11/1/09 10,000 Par Value At 100 %	- 9,984.30	10,000.00	15.70
	Pimco Total Return Fund PTTRX			
12/10/09	Lt Capital Gains		32.22	32 22
12/10/09	ST Capital Gains		115.84	115.84
	Total Pimco Total Return Fund	\$0.00	\$148.06	\$148.06
	Total Taxable Bonds	- \$37,484.30	\$32,125.10	- \$5,359.20

Stocks

ACCOUNT NUMBER: 3615-1602
YELLOW SPRINGS COMMUNITY FOUNDATION
UNRESTRICTED POOL 1

PG. 2 OF 2

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY (continued)

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
	I Shares Msci Eafe Index Fund E T F EFA			
06/01/09	Sold 50 Shares Trade Date 5/27/09 Sold Through Unx/Sei Brokerage Services Paid \$2 50 Brokerage	- 3,633 50	2,314.57	- 1,318 93
06/17/09	Sold 100 Shares Trade Date 6/12/09 Sold Through Unx/Sei Brokerage Services Paid 5.00 USD Brokerage Paid 0 12 USD Sec Fee Sold On The Over The Counter 100 Shares At 48.462 USD	- 7,267.00	4,841 08	- 2,425 92
	Total I Shares Msci Eafe Index Fund E T F	- \$10,900.50	\$7,155.65	- \$3,744.85
	Total Stocks	- \$10,900.50	\$7,155.65	- \$3,744.85
	Total Sales & Maturities	- \$63,384.80	\$54,280.75	- \$9,104.05

ACCOUNT NUMBER: 3615-1603
YELLOW SPRINGS COMMUNITY FOUNDATION
RESTRICTED POOL 2

PG 1 OF 4

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
Cash and Equivalents				
	First Bk Richmond C D#01050332046 2.720 11/17/2009 01050332046			
11/30/09	Redeemed 75,000 Par Value Trade Date 11/30/09	- 75,000.00	75,000.00	
	Total Cash and Equivalents	- \$75,000.00	\$75,000.00	\$0.00
Taxable Bonds				
	Amer Expr Centur M T N Tranche #Tr 00475 4.375 07/30/2009			
07/30/09	Matured 25,000 Par Value Trade Date 7/30/09 25,000 Par Value At 100 %	- 25,100.00	25,000.00	- 100.00
	Credit Suisse Fb USA 4.700 06/01/2009			
06/01/09	Matured 15,000 Par Value Trade Date 6/1/09 15,000 Par Value At 100 %	- 15,012.30	15,000.00	- 12.30
	Deutsche Bank Financial 7.500 04/25/2009			
04/27/09	Matured 25,000 Par Value Trade Date 4/25/09 25,000 Par Value At 100 %	- 24,444.50	25,000.00	555.50
	Federal Home Loan Bks 5.000 04/23/2018			
04/23/09	Full Call 25,000 25,000 \$1 Pv On 04/23/09 At 1.00 USD Federal Tax Cost 25,000.00 USD Corporate Action Id. 273048	- 25,000.00	25,000.00	
	Ford Motor Credit Co Finl 7.375 10/28/2009			
10/28/09	Matured 10,000 Par Value Trade Date 10/28/09 10,000 Par Value At 100 %	- 10,008.34	10,000.00	- 8.34

ACCOUNT NUMBER: 3615-1603
YELLOW SPRINGS COMMUNITY FOUNDATION
RESTRICTED POOL 2

PG. 2 OF 4

This statement is for the period from
January 1, 2009 to December 31, 2009**SALE/MATURITY SUMMARY (continued)**

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
General Elec Cap Corp 8.300 09/20/2009				
09/21/09	Matured 25 000 Par Value Trade Date 9/20/09 25,000 Par Value At 100 %	- 28,342 75	25,000 00	- 3,342 75
General Re Corp Deb Ser A 9.000 09/12/2009				
09/14/09	Matured 25,000 Par Value Trade Date 9/12/09 25,000 Par Value At 100 %	- 25,746.00	25,000.00	- 746.00
I B M Corp M T N 5.400 01/26/09				
01/26/09	Matured 25,000 Par Value Trade Date 1/26/09 25,000 Par Value At 100 %	- 25,937.50	25,000.00	- 937.50
International Lease Fin Corp M T N Ser O 4.375 11/01/2009				
11/02/09	Matured 20,000 Par Value Trade Date 11/1/09 20,000 Par Value At 100 %	- 19,968 60	20,000.00	31.40
Intl Lease Finanace Corp 6.375 03/15/2009 ILF6309				
03/16/09	Matured 15,000 Par Value Trade Date 3/15/09 15,000 Par Value At 100 %	- 15,478 80	15,000 00	- 478 80
Pimco Total Return Fund PTTRX				
08/27/09	Sold 2,408 478 Shares Trade Date 8/26/09 2,408.478 Shares At 10 75 USD	- 25,000.00	25,891 14	891.14
12/10/09	Lt Capital Gains		88 24	88 24
12/10/09	ST Capital Gains		317 23	317 23
Total Pimco Total Return Fund		- \$25,000.00	\$26,296.61	\$1,296.61

ACCOUNT NUMBER: 3615-1603
YELLOW SPRINGS COMMUNITY FOUNDATION
RESTRICTED POOL 2

PG. 3 OF 4

This statement is for the period from
January 1, 2009 to December 31, 2009**SALE/MATURITY SUMMARY (continued)**

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
	Total Taxable Bonds	- \$240,038.79	\$236,296.61	- \$3,742.18

Stocks**I Shares Msci Eafe Index Fund E T F
EFA**

06/01/09	Sold 55 Shares Trade Date 5/27/09 Sold Through Unx/Sei Brokerage Services Paid \$2.75 Brokerage	- 3,996.85	2,546.02	- 1,450.83
06/01/09	A Revision Has Been Made To A Previously Reported Sale Trade Date 5/27/09 Lt Capital Loss Of \$1,477.83 On Federal Cost Instead Of \$1,450.83 Lt Capital Loss Of \$1,477.83 On State Cost Instead Of \$1,450.83 Fed Tax Cost Of \$4,023.85 Instead Of \$3,996.85 State Tax Cost Of \$4,023.85 Instead Of \$3,996.85 55 Shares At 46.3426 USD	- 27.00		- 27.00
06/17/09	Sold 150 Shares Trade Date 6/12/09 Sold Through Unx/Sei Brokerage Services Paid 7.50 USD Brokerage Paid 0.19 USD Sec Fee Sold On The Over The Counter 150 Shares At 48.462 USD	- 10,900.50	7,261.61	- 3,638.89
08/31/09	Sold 600 Shares Trade Date 8/26/09 Sold Through Unx/Sei Brokerage Services Paid 30.00 USD Brokerage Paid 0.81 USD Sec Fee Sold On The Over The Counter 600 Shares At 52.34 USD	- 40,874.00	31,373.19	- 9,500.81
	Total I Shares Msci Eafe Index Fund E T F	- \$55,798.35	\$41,180.82	- \$14,617.53

**Ishares S&p Smallcap 600 Index E T F
IJR**

08/31/09	Sold 50 Shares Trade Date 8/26/09 Sold Through Unx/Sei Brokerage Services Paid 2.50 USD Brokerage Paid 0.07 USD Sec Fee Sold On The Over The Counter 50 Shares At 50.81 USD	- 3,250.50	2,537.93	- 712.57
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**Midcap Spdr Trust Ser 1
MDY**



ACCOUNT NUMBER: 3615-1603
YELLOW-SPRINGS-COMMUNITY-FOUNDATION
RESTRICTED POOL 2

Pg. 4 of 4

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY (continued)

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
08/31/09	Sold 40 Shares Trade Date 8/26/09 Sold Through Unx/Sei Brokerage Services Paid 2 00 USD Brokerage Paid 0.13 USD Sec Fee Sold On The Over The Counter 40 Shares At 119 58 USD	- 5,778 00	4,781.07	- 996.93
	Spdr Trust Series 1 SPY			
08/31/09	Sold 340 Shares Trade Date 8/26/09 Sold Through Unx/Sei Brokerage Services Paid 17 00 USD Brokerage Paid 0 90 USD Sec Fee Sold On The Over The Counter 340 Shares At 102 8726 USD	- 44,115.00	34,958.78	- 9,156 22
	Vanguard Total Stock Mkt Eff VTI			
08/31/09	Sold 800 Shares Trade Date 8/26/09 Sold Through Unx/Sei Brokerage Services Paid 40 00 USD Brokerage Paid 1.07 USD Sec Fee Sold On The Over The Counter 800 Shares At 51 96 USD	- 51,920.00	41,526.93	- 10,393.07
	Total Stocks	- \$160,861.85	\$124,985.53	- \$35,876.32
	Total Sales & Maturities	- \$475,900.64	\$436,282.14	- \$39,618.50

ACCOUNT NUMBER: 3615-1604
YELLOW SPRINGS COMMUNITY FOUNDATION
SONTAG POOL 3

PG 1 OF 1

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
Taxable Bonds				
	Deutsche Bank Financial 7.500 04/25/2009			
04/27/09	Matured 30,000 Par Value Trade Date 4/25/09 30,000 Par Value At 100 %	- 29,333.40	30,000.00	666 60
	First American Total Return Bond Fd CI Y FCBYX			
04/08/09	Sold 1,214.73 Shares Trade Date 4/7/09 1,214 73 Shares At 7 56 USD	- 12,274 22	9,183 36	- 3,090.86
	Pimco Total Return Fund PTTRX			
12/10/09	Lt Capital Gains		23 63	23 63
2/10/09	ST Capital Gains		84 93	84 93
	Total Pimco Total Return Fund	\$0.00	\$108.56	\$108.56
	Total Taxable Bonds	- \$41,607.62	\$39,291.92	- \$2,315.70
Stocks				
	I Shares Msci Eafe Index Fund E T F EFA			
06/17/09	Sold 170 Shares Trade Date 6/12/09 Sold Through Unx/Sei Brokerage Services Paid 8 50 USD Brokerage Paid 0.21 USD Sec Fee Sold On The Over The Counter 170 Shares At 48 462 USD	- 11,501 40	8,229 83	- 3,271 57
	Total Stocks	- \$11,501.40	\$8,229.83	- \$3,271.57
	Total Sales & Maturities	- \$53,109.02	\$47,521.75	- \$5,587.27

ACCOUNT NUMBER: 3615-1606
YSSC ENDOWMENT

Pg. 1 of 2

This statement is for the period from
January 1, 2009 to December 31 2009**SALE/MATURITY SUMMARY**

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
Taxable Bonds				
Federal Home Loan Bks				
4.030 07/16/2013				
01/16/09	Full Call 20,000 20,000 \$1 Pv On 01/16/09 At 1.00 USD Federal Tax Cost 20,000.00 USD Corporate Action Id 267947	- 20,000.00	20,000.00	
Federal Home Loan Bks				
5.000 04/23/2018				
04/23/09	Full Call 15,000 15,000 \$1 Pv On 04/23/09 At 1.00 USD Federal Tax Cost 15,000.00 USD Corporate Action Id 273048	- 15,000.00	15,000.00	
General Elec Cap Corp				
8.300 09/20/2009				
9/21/09	Matured 10,000 Par Value Trade Date 9/20/09 10,000 Par Value At 100 %	- 11,337.10	10,000.00	- 1,337.10
Merrill Lynch & Co Inc				
M T N Tranche # Tr 00440				
4.125 09/10/2009				
09/10/09	Matured 10,000 Par Value Trade Date 9/10/09 10,000 Par Value At 100 %	- 10,000.00	10,000.00	
Pimco Total Return Fund				
PTTRX				
12/10/09	Lt Capital Gains		66.43	66.43
12/10/09	ST Capital Gains		238.82	238.82
Total Pimco Total Return Fund		\$0.00	\$305.25	\$305.25
Total Taxable Bonds				
		- \$56,337.10	\$55,305.25	- \$1,031.85

Stocks**I Shares Msci Eafe Index Fund E T F**
EFA



ACCOUNT NUMBER: 3615-1606
YSSC ENDOWMENT

Pg. 2 of 2

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY (continued)

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
06/17/09	Sold 130 Shares Trade Date 6/12/09 Sold Through Unx/Sei Brokerage Services Paid 6 50 USD Brokerage Paid 0 16 USD Sec Fee Sold On The Over The Counter 130 Shares At 48 462 USD	- 8,562 27	6,293 40	- 2,268 87
	Total Stocks	- \$8,562.27	\$6,293.40	- \$2,268.87
	Total Sales & Maturities	- \$64,899.37	\$61,598.65	- \$3,300.72

ACCOUNT NUMBER: 15-074648000
YELLOW SPRINGS COMMUNITY FOUNDATION
-WILLIAM D. BAKER AND JANE H. BAKER
ENDOWMENT FUND

P6 1 OF 2

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
Taxable Bonds				
	Federal Home Loan Bks			
	4.030 07/16/2013			
01/16/09	Full Call 10,000 10,000 \$1 Pv On 01/16/09 At 1 00 USD Federal Tax Cost 10,000.00 USD Corporate Action Id 267947	- 10,000 00	10,000.00	
	Merrill Lynch & Co Inc			
	M T N Tranche # Tr 00440			
	4.125 09/10/2009			
09/10/09	Matured 10,000 Par Value Trade Date 9/10/09 10,000 Par Value At 100 %	- 10,000.00	10,000.00	
	Pimco Total Return Fund			
	PTTRX			
7/10/09	Lt Capital Gains		22.26	22.26
12/10/09	ST Capital Gains		80 01	80.01
	Total Pimco Total Return Fund	\$0.00	\$102.27	\$102.27
	Total Taxable Bonds	- \$20,000.00	\$20,102.27	\$102.27

Stocks

	I Shares Msci Eafe Index Fund E T F			
	EFA			
06/01/09	A Revision Has Been Made To A Previously Reported Sale Trade Date 5/27/09 Lt Capital Gain Of \$1,359.44 On Federal Cost Instead Of \$184.14 Loss Lt Capital Gain Of \$1,359 44 On State Cost Instead Of \$184.14 Loss Fed Tax Cost Of \$5,988.58 Instead Of \$4,445.00 State Tax Cost Of \$5,988 58 Instead Of \$4,445.00 100 Shares At 46.3426 USD	- 1,543 58		- 1,543.58
06/01/09	Sold 100 Shares Trade Date 5/27/09 Sold Through Unx/Sei Brokerage Services Paid \$5.00 Brokerage	- 4,445.00	4,629.14	184 14
	Total I Shares Msci Eafe Index Fund E T F	- \$5,988.58	\$4,629.14	- \$1,359.44



ACCOUNT NUMBER: 15-074648000
YELLOW SPRINGS COMMUNITY FOUNDATION
- WILLIAM D. BAKER AND JANE H. BAKER
ENDOWMENT FUND

PG 2 OF 2

This statement is for the period from
January 1, 2009 to December 31, 2009

SALE/MATURITY SUMMARY (continued)

Date Posted	Description	Tax Cost	Proceeds	Estimated Gain/Loss
	Total Stocks	- \$5,988.58	\$4,629.14	- \$1,359.44
	Total Sales & Maturities	- \$25,988.58	\$24,731.41	- \$1,257.17

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)		
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization	Employer identification number
	Yellow Springs Community Foundation	23-7372791
	Number, street, and room or suite no. If a P.O. box, see instructions	For IRS use only
	P.O. Box 55	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Yellow Springs, OH 45387	

Check type of return to be filed (File a separate application for each return)

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

Perry M. Stewart, Asst. Treasurer

- The books are in the care of ☒ **P.O. Box 55, Yellow Springs, OH - 45387**

Telephone No ☒ **(937) 767-4541**

FAX No ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **November 15, 2010.**

5 For calendar year **2009**, or other tax year beginning _____, and ending _____

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension _____

Additional time is needed to prepare a complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☒

Title ☒ **President/Trustee**

Date ☒

Form 8868 (Rev. 4-2009)