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Form <b>990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>	OMB No 1545-0047
	The organization may have to use a copy of this return to satisfy state reporting requirements	<div> <div>2009</div> <div>Open to Public Inspection</div> </div>

<b>A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009</b>										
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>Please use IRS label or print or type. See Specific Instructions.</b>	<b>C</b> Name of organization Community Foundations Inc					<b>D</b> Employer identification number 31-1197385		
			Doing Business As					<b>E</b> Telephone number (614) 251-4000		
			Number and street (or P O box if mail is not delivered to street address) 1234 East Broad Street				Room/suite	<b>G</b> Gross receipts \$ 7,725,144		
			City or town, state or country, and ZIP + 4 Columbus, OH 432051405							
			<b>F</b> Name and address of principal officer RAYMOND J BIDDISCOMBE 1234 East Broad Street Columbus, OH 432051405					<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
								<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)		
								<b>H(c)</b> Group exemption number ▶		
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527										
<b>J</b> Website: ▶ n/a										
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶					<b>L</b> Year of formation 1987		<b>M</b> State of legal domicile OH			






## Part I Summary

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities <u>This Foundation assists others in improving the community for the benefit of all its citizens</u>
	<b>2</b>	Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) . . . . . <b>3</b> _____
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) . . . . . <b>4</b> _____
<b>5</b>	Total number of employees (Part V, line 2a) . . . . . <b>5</b> _____	
<b>6</b>	Total number of volunteers (estimate if necessary) . . . . . <b>6</b> _____	
<b>7a</b>	Total gross unrelated business revenue from Part VIII, column (C), line 12 . . . . . <b>7a</b> _____	
<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34 . . . . . <b>7b</b> _____	

Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	2,787,705	748,488
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	953,846	1,020,781
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-2,468	4,069
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,739,083	1,773,338
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,559,969	1,995,101
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) <u>78,009</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	309,856	257,369
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,869,825	2,252,470
	19	Revenue less expenses Subtract line 18 from line 12	-130,742	-479,132
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	28,523,975	32,631,139
	21	Total liabilities (Part X, line 26)	792,125	601,609
	22	Net assets or fund balances Subtract line 21 from line 20	27,731,850	32,029,530

<b>Part II</b>	<b>Signature Block</b>
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<div> <div>Sign Here</div> </div>	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	
	*****	2010-08-09
	Signature of officer	Date
	<div> <div> Raymond J Biddiscombe VP </div> <div> Type or print name and title </div> </div>	

<b>Paid Preparer's Use Only</b>	Preparer's signature  TJ CONGER	Date	Check if self-employed  <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4  john gerlach & company 37 west broad street columbus, OH 43215			EIN 
				Phone no  (614) 224-2164

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

Community Foundations, Inc was established in 1987 to serve geographic areas beyond central Ohio Entrusted with the responsibility to improve the community's quality of life, Community Foundations, Inc embraces the following To assist donors and others in strengthening and improving the community for the benefit of all its citizens

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 health ) (Expenses \$ 381,077 including grants of \$ 363,082 ) (Revenue \$ )

4b

(Code education ) (Expenses \$ 524,376 including grants of \$ 499,615 ) (Revenue \$ )

4c

(Code social services ) (Expenses \$ 436,692 including grants of \$ 416,071 ) (Revenue \$ )

(Code advancing philanthropy ) (Expenses \$ 247,633 including grants of \$ 235,940 ) (Revenue \$ )

(Code arts & humanities ) (Expenses \$ 139,076 including grants of \$ 132,509 ) (Revenue \$ )

(Code Religion ) (Expenses \$ 109,353 including grants of \$ 104,189 ) (Revenue \$ )

(Code Urban Affairs ) (Expenses \$ 73,518 including grants of \$ 70,046 ) (Revenue \$ )

(Code conservation ) (Expenses \$ 182,256 including grants of \$ 173,649 ) (Revenue \$ )

4d









Other program services (Describe in Schedule O )

(Expenses \$ 751,836 including grants of \$ 716,333 ) (Revenue \$ )

4e

Total program service expenses \$ 2,093,981

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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> 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 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 	6	Yes	
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," complete Schedule D, Part IV 	9		No
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 	10		No
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.	11	Yes	
	• 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 	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
14b	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	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 U S ? 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 U S ? If "Yes," complete Schedule F, Part III	16		No
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	17		No
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	18		No
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	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . .	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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a	0	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .			1c	
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	0	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .			3b	
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)? . . . . .	4a		No
b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .			5c	
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? . . . . .	6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .			6b	
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? . . . . .			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .			7c	No
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? . . . . .			7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .			7f	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .			7h	
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? . . . . .			8	
9 Sponsoring organizations maintaining donor advised funds.				
a 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				
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?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . .	1a	9	
b	Enter the number of voting members that are independent . . . . .	1b	9	
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		No
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		No
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		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body? . . . . .	8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes	
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		No

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		No
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		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .			
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	Yes	
14	Does the organization have a written document retention and destruction policy? . . . . .	14		No
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		No
b	Other officers or key employees of the organization . . . . .	15b		No
	If "Yes" to line a or b, 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		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
18	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. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. 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 ▶ THE COLUMBUS FOUNDATION 1234 east broad street columbus, OH 432051405 (614) 251-4000

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, and **current** key employees. 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, 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.

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

(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			
David R Meuse chairman/trustee	1.00	X		X				0	0	0
Tanny crane vice chairman/trustee	1.00	X		X				0	0	0
William G Jurgensen trustee	1.00	X						0	0	0
Michael J Fiorile trustee	1.00	X						0	0	0
john B Gerlach Jr trustee	1.00	X						0	0	0
archie M Griffin trustee	1.00	X						0	0	0
Bruce A Soll trustee	1.00	X						0	0	0
barbara trueman trustee	1.00	X						0	0	0
frank Wobst thru 1218 trustee	1.00	X						0	0	0
douglas f kridler president & ceo	1.00				X			0	285,625	102,961
raymond j biddiscombe vice president	1.00				X			0	164,000	32,207
philip t schavone vice president	1.00					X		0	150,000	39,231
Lisa S Courtice Phd vice president	1.00					X		0	146,500	26,180



## Part VII

[illegible]

\$100,000 in reportable compensation from the organization

**5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person.* . . . . .

## Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 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	1a	Federated campaigns . . .	1a				
	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	748,488			
	g	Noncash contributions included in lines 1a-1f \$ 68,466					
	h	Total. Add lines 1a-1f . . . . .			748,488		
Program Service Revenue	2a		Business Code				
	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) . . . . .		962,880		
4		Income from investment of tax-exempt bond proceeds . . .					
5		Royalties . . . . .					
6a		Gross Rents	(i) Real 6,583 (ii) Personal				
b		Less rental expenses	2,514				
c		Rental income or (loss)	4,069				
d		Net rental income or (loss) . . . . .		4,069			4,069
7a		Gross amount from sales of assets other than inventory	(i) Securities 6,007,193 (ii) Other				
b		Less cost or other basis and sales expenses	5,949,292				
c		Gain or (loss)	57,901				
d		Net gain or (loss) . . . . .		57,901			57,901
8a		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 . . .					
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a				
b		Less direct expenses . . . . .	b				
c		Net income or (loss) from gaming activities . . .					
10a	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				
11a							
b							
c							
d	All other revenue . . . . .						
e	Total. Add lines 11a-11d . . . . .						
12	Total revenue. See Instructions . . . . .			1,773,338	0	0	1,024,850

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	1,995,101	1,995,101		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
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				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .				
9	Other employee benefits . . . . .				
10	Payroll taxes . . . . .				
11	Fees for services (non-employees)				
a	Management . . . . .	204,556	78,590	63,965	62,001
b	Legal . . . . .				
c	Accounting . . . . .				
d	Lobbying . . . . .				
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .	51,652	19,844	16,152	15,656
g	Other . . . . .				
12	Advertising and promotion . . . . .				
13	Office expenses . . . . .				
14	Information technology . . . . .				
15	Royalties . . . . .				
16	Occupancy . . . . .				
17	Travel . . . . .				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .				
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	other expenses	1,161	446	363	352
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	2,252,470	2,093,981	80,480	78,009
26	Joint costs. Check here <input type="checkbox"/> 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	
	2	Savings and temporary cash investments . . . . .			2,896,588	2	4,706,624
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .			25,594	4	19,168
	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 . . . . .			25,490,081	11	27,861,347
	12	Investments—other securities See Part IV, line 11 . . . . .			111,712	12	44,000
	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) . . . . .			28,523,975	16	32,631,139	
Liabilities	17	Accounts payable and accrued expenses . . . . .				17	
	18	Grants payable . . . . .			792,125	18	601,609
	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 . . . . .				25	
	26	Total liabilities. Add lines 17 through 25 . . . . .			792,125	26	601,609
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			27,731,850	27	32,029,530
	28	Temporarily restricted net assets . . . . .				28	
	29	Permanently restricted net assets . . . . .				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			27,731,850	33	32,029,530
34	Total liabilities and net assets/fund balances . . . . .			28,523,975	34	32,631,139	

**Part XI**    **Financial Statements and Reporting**

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>c</b> If "Yes," to 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 . . . .	Yes	
<b>d</b> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separated basis		
<b>3a</b> 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? . . . . .		No
<b>b</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 . . .		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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 Community Foundations Inc	Employer identification number 31-1197385
---	--

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 **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 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)

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

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.")	3,150,702	1,418,665	2,869,037	2,590,208	748,488	10,777,100
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	3,150,702	1,418,665	2,869,037	2,590,208	748,488	10,777,100
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)						3,530,645
6 Public Support. Subtract line 5 from line 4						7,246,455

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	3,150,702	1,159,159	2,869,037	2,590,208	748,488	10,777,100
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,057,639	1,159,159	1,217,789	1,247,833	969,463	5,651,883
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						16,428,983

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 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	44 110 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	40 270 %

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 the 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

Part IIISupport Schedule for Organizations Described in IRC 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
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts 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						
cAdd lines 7a and 7b						
8Public 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
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 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		
b33 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		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		



Part IV

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

Explanation
Schedule A, Part IV, List of Unusual Grants Bequest Date 12/28/05 Amount 108468 Bequest Date 02/23/06 Amount 1500 Bequest Date 10/23/06 Amount 900000 Bequest Date 08/31/07 Amount 398765 Bequest Date 08/31/07 Amount 79430 Bequest Date 12/04/07 Amount 61545 Bequest Date 12/04/07 Amount 64447 Bequest Date 12/04/07 Amount 103216 bequest Date 12/04/07 Amount 103400 bequest Date 12/04/07 Amount 103770 bequest Date 12/04/07 Amount 108773 bequest Date 12/31/07 Amount 175000 bequest Date 01/09/08 Amount 139927 bequest Date 02/19/08 Amount 19492 bequest Date 03/05/08 Amount 15217 bequest Date 03/05/08 Amount 64 Bequest Date 03/18/08 Amount 1162 bequest Date 12/23/08 Amount 20211 bequest Date 12/29/08 Amount 1424

SCHEDULE D

(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

2009

Open to Public  
Inspection

**Name of the organization**  
Community Foundations Inc

**Employer identification number**  
31-1197385

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	22	111
2 Aggregate contributions to (during year)	193,635	554,853
3 Aggregate grants from (during year)	406,021	1,589,080
4 Aggregate value at end of year	4,926,723	27,704,416
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?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 importantly land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 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 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

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

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 the 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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

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 . . . . .				
b	Contributions . . . . .				
c	Investment earnings or losses . . . . .				
d	Grants or scholarships . . . . .				
e	Other expenditures for facilities and programs . . . . .				
f	Administrative expenses . . . . .				
g	End of year balance . . . . .				

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 . . . . .

3a(i)

☐

☐

(ii)

related organizations . . . . .

3a(ii)

☐

☐

b

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

3b

☐

☐

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-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				0



Part XI

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,773,338
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,252,470
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-479,132
4	Net unrealized gains (losses) on investments	4	4,556,134
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	220,678
9	Total adjustments (net) Add lines 4 - 8	9	4,776,812
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,297,680

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	5,512,937
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	4,556,134
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	-816,535
e	Add lines 2a through 2d . . . . .	2e	3,739,599
3	Subtract line 2e from line 1 . . . . .	3	1,773,338
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 should equal Form 990, Part I, line 12 ) . . . . .	5	1,773,338

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	1,655,272
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	-597,198
e	Add lines 2a through 2d . . . . .	2e	-597,198
3	Subtract line 2e from line 1 . . . . .	3	2,252,470
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 should equal Form 990, Part I, line 18 ) . . . . .	5	2,252,470

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, 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.

Identifier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		net transfers from (to) related foundations 81092 grants rescinded from prior years 124583 grant refunds 15003
Part XII, Line 2d - Other Adjustments		Organization Endowment Funds Held for Others -931538 transfers from related foundations 100000 grant refunds 15003
Part XIII, Line 2d - Other Adjustments		grants rescinded from prior year -124583 Transfers to related foundations 18908 organization endowment funds held for others -491523

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," to 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  
Community Foundations Inc

Employer identification number  
31-1197385

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 . . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

2

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

159

3

Enter total number of other organizations . . . . .

0



Software ID:

Software Version:

EIN: 31-1197385

Name: Community Foundations Inc

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) 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
ACTION FOR CHILDREN COUNCIL OF FRANKLINThe Cecilia Cullman Center for Children 78 Jefferson Avenue Columbus,OH 43215	31-0820393	501c3	1,000				Social Services
ALTAR INCc/o Tom Krouse 50 Fruit Hill Drive Chillicothe,OH 45601	31-1665316	501c3	5,000				Social Services
ALTRUSA CLUB OF CHILLICOTHE OHIO FOUND65 East Second Street Chillicothe,OH 45601	31-1366831	501c3	10,000				Social Services
AMERICAN COUNCIL OF THE BLIND OHIOPO Box 307128 Columbus,OH 43230	31-0989044	501c3	20,000				Social Services
AMERICAN COUNCIL OF THE BLIND OHIOPO Box 307128 Columbus,OH 43230	31-0989044	501c3	40,000				Social Services
ASSISTANCE HOUSE11 West 5th Street Chillicothe,OH 45601	31-4379621	501c3	20,000				Social Services
ATHENS COUNTY HISTORICAL SOCIETY AND 65 North Court Street Athens,OH 45701	31-1044073	501c3	140,000				Conservation
ATHENS FOUNDATION20 South Court Street PO Box 366 Athens,OH 45701	31-1040215	501c3	7,500				Advancing Philanthropy
BALDWIN WALLACE COLLEGE275 Eastland Road Berea,OH 44017	34-0714629	501c3	6,000				Education
BETHANY LUTHERAN CHURCH1000 Noe Bixby Road Columbus,OH 43213	31-0932129	501c3	400				Religion



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) 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
BETHANY LUTHERAN CHURCH1000 Noe Bixby Road Columbus, OH 43213	31-0932129	501c3	750				Religion
BOWLING GREEN STATE UNIVERSITY FDNMilet 1 Alumni Center Bowling Green State University Bowling Green, OH 43403	34-6007199	501c3	4,200				Education
BRADFORD SCHOOL2469 Stelzer Road Columbus, OH 43219	25-1482719	501c3	2,600				Education
BRIGHAM YOUNG UNIVERSITYA-41 ASB Provo, UT 846021128	87-0217280	501c3	500				Education
BRYN MAWR COLLEGE101 North Merion Avenue Bryn Mawr, PA 190102899	23-1352621	501c3	11,000				Education
CAPITAL UNIVERSITY Financial Aid Office 2199 East Main Street Columbus, OH 43209	31-4379435	501c3	1,063				Education
CAPITAL UNIVERSITY Financial Aid Office 2199 East Main Street Columbus, OH 43209	31-4379435	501c3	2,750				Education
CAPITOL SQUARE RENOVATION FOUNDATION INCThe Statehouse Room 16 Columbus, OH 43215	31-1222851	501c3	159				Urban Affairs
CAPITOL SQUARE RENOVATION FOUNDATION INCThe Statehouse Room 16 Columbus, OH 43215	31-1222851	501c3	159				Urban Affairs
CAPITOL SQUARE RENOVATION FOUNDATION INCThe Statehouse Room 16 Columbus, OH 43215	31-1222851	501c3	159				Urban Affairs

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) 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
CAPITOL SQUARE RENOVATION FOUNDATION INCThe Statehouse Room 16 Columbus, OH 43215	31-1222851	501c3	176				Urban Affairs
CAPITOL SQUARE RENOVATION FOUNDATION INCThe Statehouse Room 16 Columbus, OH 43215	31-1222851	501c3	177				Urban Affairs
CAPITOL SQUARE RENOVATION FOUNDATION INCThe Statehouse Room 16 Columbus, OH 43215	31-1222851	501c3	177				Urban Affairs
CASE WESTERN RESERVE UNIVERSITYBaker 203 10900 Euclid Avenue Cleveland, OH 44106	34-1018992	501c3	1,000				Education
CASE WESTERN RESERVE UNIVERSITY417A Yost Hall 10900 Euclid Avenue Cleveland, OH 44106	34-1018992	501c3	1,500				Education
CATHOLIC DIOCESE OF CLEVELAND1027 Superior Avenue Cleveland, OH 44114	34-0714606	501c3	19,789				Religion
CATHOLIC RELIEF SERVICES209 West Fayette Street Baltimore, MD 21201	13-5563422	501c3	1,000				Social Services
CATHOLIC RELIEF SERVICES209 West Fayette Street Baltimore, MD 21201	13-5563422	501c3	1,500				Social Services
CENTRAL OHIO DIABETES ASSOCIATION INC1100 Dennison Avenue Columbus, OH 43201	31-6054100	501c3	250				Social Services
CHILDREN'S ADVOCACY CENTER OF GUERNSEY274 Highland Avenue Cambridge, OH 43725	26-0109515	501c3	2,000				Education

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) 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
CHILLICOTHE & ROSS COUNTY PUBLIC LIBRARY 140-146 South Paint Street PO Box 185 Chillicothe,OH 45601	12-3456789	501c3	10,000				Education
CHRISTIAN COUNSELING CENTERc/o First Lutheran Church 300 Melmore Street Tiffin,OH 44883	20-8421520	501c3	500				Health
CIRCLEVILLE CITY SCHOOL DISTRICTDistrict Office 388 Clark Drive Circleville,OH 43113	31-6400386	501c3	785				Education
CIRCLEVILLE PICKAWAY COMMUNITY IMPROPO Box 506 Circleville,OH 43113	31-1195864	501c3	275				Urban Affairs
CIRCLEVILLE PICKAWAY COMMUNITY IMPROPO Box 506 Circleville,OH 43113	31-1195864	501c3	383				Urban Affairs
CLEMSON UNIVERSITY Room G 01 Sykes Hall PO Box 345123 Clemson,SC 29634	57-6000254	501c3	1,500				Education
CLEVELAND STATE UNIVERSITYEast 24th at Euclid Avenue Cleveland,OH 44115	34-0966056	501c3	1,370				Education
COLUMBUS COLLEGE OF ART AND DESIGN107 North Ninth Street Columbus,OH 432153875	31-0820394	501c3	1,000				Education
COLUMBUS MUSEUM OF ART480 East Broad Street Columbus,OH 43215	31-4379447	501c3	500				Arts and Humanities
COLUMBUS STATE COMMUNITY COLLEGEPO Box 1609 Columbus,OH 43216	31-0729591	501c3	1,942				Education

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) 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
COLUMBUS STATE COMMUNITY COLLEGEPO Box 1609 Columbus,OH 43216	31-0729591	501c3	15,334				Education
COMBINED JEWISH PHILANTHROPIES126 High Street Boston,MA 02110	04-2103559	501c3	25,000				Advancing Philanthropy
COMMUNITY RECREATIONAL COUNCIL OFPO Box 2017 Chillicothe,OH 45601	31-4386181	501c3	3,000				Social Services
COMMUNITY RECREATIONAL COUNCIL OFPO Box 2017 Chillicothe,OH 45601	31-4386181	501c3	15,000				Urban Affairs
COMMUNITY UNITED METHODIST CHURCH120 North Pickaway Street Circleville,OH 43113	31-4443575	501c3	200				Religion
CONCORD PRESBYTERIAN CHURCHc/o 45239 Hart Road Belmont,OH 43718	34-1033585	501c3	1,300				Religion
CORNELL UNIVERSITY260 Day Hall Ithica,NY 14853	15-0532082	501c3	12,000				Education
CORPORATION FOR OHIO APPALACHIAN1 Pinchot Lane PO Box 787 Athens,OH 45701	31-0811788	501c3	6,295				Education
CORPUS CHRISTI CATHOLIC CHURCH1516 Warwood Avenue Wheeling,WV 260037197	55-0363849	501c3	1,300				Religion
EARLY CARE AND LEARNING INC96 Kingsmeadow Lane Blacklick,OH 43004	26-0768278	501c3	4,500				Social Services

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
EASTER SEALS CENTRAL AND SOUTHEAST3830 Trueman Court Hilliard, OH 43026	31-4379471	501c3	2,535				Social Services
EASTER SEALS CENTRAL AND SOUTHEAST3830 Trueman Court Hilliard, OH 43026	31-4379471	501c3	2,535				Social Services
EASTER SEALS CENTRAL AND SOUTHEAST3830 Trueman Court Hilliard, OH 43026	31-4379471	501c3	2,535				Social Services
EASTER SEALS CENTRAL AND SOUTHEAST3830 Trueman Court Hilliard, OH 43026	31-4379471	501c3	2,535				Social Services
FAITH MISSION INCc/o Lutheran Soc Services of Central Oh 750 East Broad Street Columbus, OH 43205	31-0809759	501c3	500				Social Services
FEED THE CHILDREN INC PO Box 36 Oklahoma City, OK 731010036	73-6108657	501c3	400				Social Services
FEED THE CHILDREN INC PO Box 36 Oklahoma City, OK 731010036	73-6108657	501c3	1,000				Social Services
FINANCIAL ASSISTANCE FOR CANCERPO Box 624 Tiffin, OH 44883	34-1658459	501c3	500				Health
FIRST CAPITAL ENTERPRISES INC167 West Main Street Chillicothe, OH 45601	31-0825629	501c3	5,000				Social Services
FIRST PRESBYTERIAN CHURCH212 West Locust Street Fort Branch, IN 47648	12-3456789	501c3	5,000				Religion

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) 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
FISH OF TIFFIN131 East Perry Street Tiffin, OH 44883	34-1440944	501c3	500				Social Services
FOOD FOR THE POOR INC550 SW 12th Avenue Deerfield Beach, FL 33442	59-2174510	501c3	1,000				Social Services
FOOD FOR THE POOR INC550 SW 12th Avenue Deerfield Beach, FL 33442	59-2174510	501c3	1,500				Social Services
FRANKLIN UNIVERSITY Office of Financial Aid and Scholarships 201 South Grant Avenue Columbus, OH 43215	31-0707369	501c3	1,398				Education
GIRL SCOUTS OF OHIOS HEARTLAND COUNCIL1700 Watermark Drive Columbus, OH 432151097	31-4379475	501c3	7,591				Social Services
GIRL SCOUTS OF OHIOS HEARTLAND COUNCIL1700 Watermark Drive Columbus, OH 432151097	31-4379475	501c3	14,001				Social Services
GLOBAL TRAINING NETWORK DBA GLOBAL315 West James Street Suite 202 Lancaster, PA 176032979	23-2854114	501c3	10,000				Religion
GRADY MEMORIAL HOSPITAL561 West Central Avenue Delaware, OH 43015	31-1763100	501c3	3,993				Health
GUSTAVUS ADOLPHUS COLLEGEFinancial Aid Office 800 West College Avenue Saint Peter, MN 56082	41-0695524	501c3	1,000				Education
HEARTBEAT INTERNATIONAL665 E Dublin-Granville Road Suite 440 Columbus, OH 43229	23-7335592	501c3	250				Health

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) 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
HIGHLANDS NATURE SANCTUARY7629 Cave Road Bainbridge, OH 456129501	31-1434730	501c3	33,649				Conservation
HOCKING COLLEGE3301 Hocking Parkway Nelsonville, OH 45764	31-0794924	501c3	500				Education
HOCKING COLLEGE3301 Hocking Parkway Nelsonville, OH 45764	31-0794924	501c3	500				Education
HOCKING COLLEGE3301 Hocking Parkway Nelsonville, OH 45764	31-0794924	501c3	500				Education
HOCKING COLLEGE3301 Hocking Parkway Nelsonville, OH 45764	31-0794924	501c3	1,000				Education
JACKSON CITY SCHOOLS 450 Vaughn Street Jackson, OH 45640	31-6400579	501c3	3,000				Education
JACKSON-VINTON COMMUNITY ACTION INC 118 South New York Avenue Wellston, OH 45692	31-0716914	501c3	10,000				Health
JOHN CARROLL UNIVERSITY20700 North Park Blvd Financial Aid Office- Rodman Hall 2nd FL University Heights, OH 44118	34-0714681	501c3	1,000				Education
JUNIOR ACHIEVEMENT OF NORTHWESTERN2239 Cheyenne Blvd Toledo, OH 43614	34-4430363	501c3	800				Education
KENT STATE UNIVERSITY 131 Michael Schwartz Center PO Box 5190 Kent, OH 44242	31-6402079	501c3	500				Education

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) 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
KENT STATE UNIVERSITY TUSCARAWAS330 University Drive NE New Philadelphia, OH 446639403	31-6402079	501c3	1,489				Education
KIC START DBA VILLAGE HOUSE350 Rawson Avenue Fremont, OH 43420	34-1807056	501c3	1,500				Social Services
LAUNCH INC231 East Main Street Jackson, OH 45640	20-2817712	501c3	10,000				Advancing Philanthropy
LEAGUE OF WOMEN VOTERS OF OHIO EDUCATION17 South High Street Suite 650 Columbus, OH 43215	31-1050638	501c3	1,358				Urban Affairs
LEAGUE OF WOMEN VOTERS OF OHIO EDUCATION17 South High Street Suite 650 Columbus, OH 43215	31-1050638	501c3	1,519				Urban Affairs
LIBERTY PRESBYTERIAN CHURCH7080 Olentangy River Road Delaware, OH 43015	31-6066289	501c3	50,000				Religion
LOGAN ELM BOARD OF EDUCATION9579 Tarlton Road Circleville, OH 43113	12-3456789	501c3	5,000				Education
LOVE INC OF ROSS COUNTYPO Box 6090 Chillicothe, OH 45601	31-1772631	501c3	10,000				Social Services
LUTHERAN SOCIAL SERVICES OF CENTRAL OHIO750 East Broad Street Columbus, OH 432051000	31-4412586	501c3	400				Social Services
LUTHERAN SOCIAL SERVICES OF CENTRAL OHIO750 East Broad Street Columbus, OH 432051000	31-4412586	501c3	1,000				Social Services



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) 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
LUTHERAN SOCIAL SERVICES OF SOUTHERN O 810 Main Street Caldwell,OH 43724	31-4412586	501c3	1,960				Social Services
MALONE UNIVERSITY Financial Aid Office 2600 Cleveland Avenue NW Canton,OH 44709	34-0737794	501c3	250				Education
MARIETTA COLLEGE215 5th Street Marietta,OH 45750	31-4379584	501c3	500				Education
MARIETTA COLLEGE215 5th Street Marietta,OH 45750	31-4379584	501c3	1,000				Education
MARION TECHNICAL COLLEGEOffice of Financial Aid 1467 Mt Vernon Ave Marion,OH 43302	31-0798878	501c3	1,500				Education
MED CENTRAL COLLEGE OF NURSING335 Glessner Avenue Mansfield,OH 44903	34-1860625	501c3	1,000				Education
MIAMI UNIVERSITYBursars Office 301 S Campus Avenue Room 103 Oxford,OH 45056	31-6402089	501c3	500				Education
MIAMI UNIVERSITYBursars Office 301 S Campus Avenue Room 103 Oxford,OH 45056	31-6402089	501c3	1,000				Education
MIAMI UNIVERSITYBursars Office 301 S Campus Avenue Room 103 Oxford,OH 45056	31-6402089	501c3	2,500				Education
MIAMI UNIVERSITYBursars Office 301 S Campus Avenue Room 103 Oxford,OH 45056	31-6402089	501c3	6,000				Education

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) 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
MID OHIO FOODBANK1625 W Mound Street Columbus, OH 43223	31-0865343	501c3	500				Social Services
MID OHIO FOODBANK3960 Brookham Drive Grove City, OH 43123	31-0865343	501c3	500				Social Services
MOREHEAD STATE UNIVERSITYEnrollment Services 100 Admissions Center Morehead, KY 40351	61-1014029	501c3	1,575				Education
MOUNT CARMEL COLLEGE OF NURSING127 South Davis Avenue Columbus, OH 43222	31-1308555	501c3	2,000				Education
MOUNT CARMEL HEALTH SYSTEM FDN793 West State Street Columbus, OH 432221560	31-1113966	501c3	1,300				Health
MUSKINGUM COLLEGE Student Financial Services 163 Stormont New Concord, OH 43762	31-4379515	501c3	1,000				Education
MUSKINGUM COLLEGE Student Financial Services 163 Stormont New Concord, OH 43762	31-4379515	501c3	1,500				Education
MUSKINGUM COLLEGE Student Financial Services 163 Stormont New Concord, OH 43762	31-4379515	501c3	2,000				Education
MUSKINGUM COLLEGE Student Financial Services 163 Stormont New Concord, OH 43762	31-4379515	501c3	3,000				Education
NATIONAL CHURCH RESIDENCES2335 North Bank Drive Columbus, OH 43220	31-0651750	501c3	10,000				Social Services

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) 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
NATIONAL KIDNEY FOUNDATION OF OHIO INC1373 Grandview Avenue Suite 200 Columbus, OH 432122804	13-1673104	501c3	68,860				Health
NATIONAL KIDNEY FOUNDATION OF OHIO INC1373 Grandview Avenue Suite 200 Columbus, OH 432122804	13-1673104	501c3	157,215				Health
NEBRASKA COMMUNITY FOUNDATION650 J Street Suite 305 PO Box 83107 83107 Lincoln, NE 68501	47-0769903	501c3	5,541				Advancing Philanthropy
NEBRASKA COMMUNITY FOUNDATION650 J Street Suite 305 PO Box 83107 83107 Lincoln, NE 68501	47-0769903	501c3	6,000				Advancing Philanthropy
NEBRASKA COMMUNITY FOUNDATION650 J Street Suite 305 PO Box 83107 83107 Lincoln, NE 68501	47-0769903	501c3	7,967				Advancing Philanthropy
NORTH CENTRAL STATE COLLEGECashiers Office PO Box 698 Mansfield, OH 44901	34-1038108	501c3	1,875				Education
NORTHWEST UNITED METHODIST CHURCH5200 Riverside Drive Columbus, OH 43220	12-3456789	501c3	1,000				Religion
NORTHWEST UNITED METHODIST CHURCH5200 Riverside Drive Columbus, OH 43220	12-3456789	501c3	1,000				Religion
NOTRE DAME COLLEGE OF OHIOOffice of Student Financial Assistance 4545 College Road Euclid, OH 441214293	34-0714689	501c3	3,000				Education
OAK HILL UNION LOCAL SCHOOL DISTRICT205 Western Avenue Oak Hill, OH 45656	31-0731712	501c3	10,000				Education

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OBERLIN COLLEGEOffice of Student Accounts 52 West Lorain Street Oberlin, OH 44074	34-0714363	501c3	1,575				Education
OBERLIN COLLEGEOffice of Student Accounts 52 West Lorain Street Oberlin, OH 44074	34-0714363	501c3	10,000				Education
OHIO ASSOCIATION OF CHILD CARING50 West Broad Street Suite 3200 Columbus, OH 43215	34-1168205	501c3	20,000				Social Services
OHIO ASSOCIATION OF CHILD CARING50 West Broad Street Suite 3200 Columbus, OH 43215	34-1168205	501c3	20,000				Social Services
OHIO ASSOCIATION OF CHILD CARING50 West Broad Street Suite 3200 Columbus, OH 43215	34-1168205	501c3	20,000				Social Services
OHIO ASSOCIATION OF CHILD CARING50 West Broad Street Suite 3200 Columbus, OH 43215	34-1168205	501c3	20,000				Social Services
OHIO ASSOCIATION OF CHILD CARING50 West Broad Street Suite 3200 Columbus, OH 43215	34-1168205	501c3	25,000				Social Services
OHIO ASSOCIATION OF CHILD CARING50 West Broad Street Suite 3200 Columbus, OH 43215	34-1168205	501c3	25,000				Social Services
OHIO CHRISTIAN UNIVERSITYFinancial Aid Office Circleville, OH 43113	31-0971599	501c3	247				Education
OHIO CHRISTIAN UNIVERSITYFinancial Aid Office PO Box 458 Circleville, OH 43113	31-0971599	501c3	500				Education

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OHIO HISTORICAL SOCIETY1982 Velma Avenue Columbus,OH 43211	31-4389673	501c3	250				Arts and Humanities
OHIO HISTORICAL SOCIETY1982 Velma Avenue Columbus,OH 43211	31-4389673	501c3	400				Arts and Humanities
OHIO HOSPICE ORGANIZATION INC555 Metro Place North Suite 650 Columbus,OH 43017	31-0966673	501c3	8,355				Health
OHIO HOSPICE ORGANIZATION INC555 Metro Place North Suite 650 Columbus,OH 43017	31-0966673	501c3	8,609				Health
OHIO HOSPICE ORGANIZATION INC555 Metro Place North Suite 650 Columbus,OH 43017	31-0966673	501c3	100,000				Health
OHIO HUMANITIES COUNCIL471 East Broad Street Suite 1620 Columbus,OH 43215	31-0901572	501c3	1,673				Arts and Humanities
OHIO HUMANITIES COUNCIL471 East Broad Street Suite 1620 Columbus,OH 43215	31-0901572	501c3	2,400				Arts and Humanities
OHIO HUMANITIES COUNCIL471 East Broad Street Suite 1620 Columbus,OH 43215	31-0901572	501c3	16,275				Arts and Humanities
OHIO NORTHERN UNIVERSITY525 South Main Street Ada,OH 45810	34-4429091	501c3	1,500				Education
OHIO NORTHERN UNIVERSITY525 South Main Street Ada,OH 45810	34-4429091	501c3	5,700				Education

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OHIO NORTHERN UNIVERSITY525 South Main Street Ada,OH 45810	34-4429091	501c3	10,000				Education
OHIO NORTHERN UNIVERSITY525 South Main Street Ada,OH 45810	34-4429091	501c3	12,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	300				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	300				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	300				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	300				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	375				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	500				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	500				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	500				Education

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OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	1,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	1,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	1,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	2,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	6,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	10,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	10,000				Education
OHIO STATE UNIVERSITY FINANCIAL AID OFFI220 Lincoln Tower 1800 Cannon Drive Columbus,OH 43210	31-1145986	501c3	11,000				Education
OHIO STATE UNIVERSITY FOUNDATION1480 West Lane Avenue Columbus,OH 432213938	31-1145986	501c3	2,500				Education
OHIO STATE UNIVERSITY FOUNDATION1480 West Lane Avenue Columbus,OH 432213938	31-1145986	501c3	5,000				Education

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
OHIO STATE UNIVERSITY FOUNDATION1480 West Lane Avenue Columbus,OH 432213938	31-1145986	501c3	20,000				Education
OHIO STATE UNIVERSITY FOUNDATION1480 West Lane Avenue Columbus,OH 432213938	31-1145986	501c3	50,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	500				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	500				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	500				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	500				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	500				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	500				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education



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OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,000				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	1,063				Education
OHIO UNIVERSITY020 Chubb Hall Athens,OH 45701	31-6402113	501c3	8,750				Education
OHIO WEST VIRGINIA YMCA INCPO Box 239 400 Main Street 2nd Floor Point Pleasant,WV 25550	55-0631259	501c3	1,226				Social Services

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OHIO WEST VIRGINIA YMCA INCPO Box 239 400 Main Street 2nd Floor Point Pleasant, WV 25550	55-0631259	501c3	1,360				Social Services
ONE HEARTLAND4427 North Port Washington Rd Suite 107 Milwaukee, WI 53212	31-1763115	501c3	10,000				Social Services
OTTERBEIN COLLEGE102 West College Avenue Westerville, OH 43081	31-4379532	501c3	8,000				Education
OTTERBEIN COLLEGE102 West College Avenue Westerville, OH 43081	31-4379532	501c3	10,000				Education
PALATINES TO AMERICA PO Box 141260 Columbus, OH 43214	23-2253655	501c3	840				Arts and Humanities
PALATINES TO AMERICA 611 East Weber Road Columbus, OH 43211	23-2253655	501c3	871				Arts and Humanities
PALATINES TO AMERICA 611 East Weber Road Columbus, OH 43211	23-2253655	501c3	5,000				Arts and Humanities
PEOPLE TO PEOPLE INTERNATIONAL911 Main Street Suite 2110 Kansas City, MO 64105	44-0659517	501c3	1,000				Social Services
PICKAWAY COUNTY COMMUNITY ACTION469 East Ohio Street PO Box 67 Circleville, OH 43113	31-0722252	501c3	750				Social Services
PICKAWAY COUNTY COMMUNITY ACTION469 East Ohio Street PO Box 67 Circleville, OH 43113	31-0722252	501c3	1,250				Social Services

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PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	2				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	2				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	2				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	2				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	7				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	7				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	7				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	8				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	8				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	8				Advancing Philanthropy

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) 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
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	11				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	11				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	10				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	11				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	11				Advancing Philanthropy

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PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	11				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	12				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	14				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	15				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	17				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	17				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	19				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	22				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	23				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	24				Advancing Philanthropy

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	24				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	25				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	26				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	27				Advancing Philanthropy

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PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	29				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	30				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	31				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	32				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	32				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	33				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	34				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	34				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	38				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	42				Advancing Philanthropy

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PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	45				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	46				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	47				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	48				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	52				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	54				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	55				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	62				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	100				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	128				Advancing Philanthropy



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PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	132				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	165				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	364				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	364				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	1,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	1,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	1,800				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	2,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	2,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville,OH 43113	31-1777036	501c3	4,300				Advancing Philanthropy

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) 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
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	5,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	6,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	6,448				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	12,500				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	16,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	16,000				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	32,300				Advancing Philanthropy
PICKAWAY COUNTY COMMUNITY FOUNDATION PO Box 3 Circleville, OH 43113	31-1777036	501c3	65,000				Advancing Philanthropy
PICKAWAY COUNTY DISTRICT PUBLIC LIBRARY 1160 North Court Street Circleville, OH 43113	31-6401655	501c3	300				Education
PICKAWAY COUNTY DISTRICT PUBLIC LIBRARY 1160 North Court Street Circleville, OH 43113	31-6401655	501c3	300				Education

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) 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
PICKAWAY COUNTY HISTORICAL SOCIETYPO Box 85 Circleville, OH 43113	31-1596155	501c3	451				Arts and Humanities
PICKAWAY COUNTY HISTORICAL SOCIETYPO Box 85 Circleville, OH 43113	31-1596155	501c3	451				Arts and Humanities
PICKAWAY COUNTY HISTORICAL SOCIETYPO Box 85 Circleville, OH 43113	31-1596155	501c3	615				Arts and Humanities
PICKAWAY COUNTY HISTORICAL SOCIETYPO Box 85 Circleville, OH 43113	31-1596155	501c3	783				Arts and Humanities
PICKAWAY COUNTY WOMEN'S CENTER280 North High Street Chillicothe, OH 45601	31-1278607	501c3	5,600				Social Services
PICKAWAY ROSS COUNTY JOINT VOCATIONAL895 Crouse Chapel Road Chillicothe, OH 45601	12-3456789	501c3	10,000				Education
ROSS COUNTY COALITION AGAINST DOMESTIC43 North Paint Street PO Box 1727 Chillicothe, OH 45601	31-1044779	501c3	4,942				Social Services
ROSS COUNTY COMMUNITY ACTION COMMISSION603 Central Center Chillicothe, OH 45601	31-6059908	501c3	10,000				Social Services
SAINT JOSEPH CENTRAL CATHOLIC HIGH SCHOO 702 Croghan Street Fremont, OH 43420	34-0905004	501c3	1,250				Education
SAINT JOSEPH CENTRAL CATHOLIC HIGH SCHOO 702 Croghan Street Fremont, OH 43420	34-0905004	501c3	1,250				Education

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) 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
SAINT PAULS UNITED METHODIST CHURCH46 Madison Street PO Box 817 Tiffin, OH 448830817	34-6401272	501c3	1,500				Social Services
SALVATION ARMY966 East Main Street Columbus, OH 43205	13-5562351	501c3	250				Social Services
SALVATION ARMY CHILLICOTHEPO Box 451 Chillicothe, OH 45601	31-5562351	501c3	18,000				Social Services
SALVATION ARMY CORPS OF TIFFIN OHIO45 South Monroe Street PO Box 341 Tiffin, OH 44883	13-5562351	501c3	5,000				Social Services
SCIOTO SOCIETY INC216 Freshour Road PO Box 73 Chillicothe, OH 45601	31-0791031	501c3	2,500				Social Services
SENECA COUNTY AGENCY TRANSPORTATION3140 South St Rt 100 Suite F PO Box 922 Tiffin, OH 44883	34-1762284	501c3	1,000				Social Services
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth, OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth, OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth, OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth, OH 456624344	31-0864917	501c3	500				Education

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) 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
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	500				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	1,000				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	1,000				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	1,063				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	1,575				Education
SHAWNEE STATE UNIVERSITYOffice of Financial Aid 940 Second Street Portsmouth,OH 456624344	31-0864917	501c3	2,000				Education

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) 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
SIMON KENTON COUNCIL BOY SCOUTS OF1901 East Dublin-Granville Road PO Box 29207 Columbus, OH 43229	31-4388520	501c3	5,000				Social Services
SOUTH CENTRAL OHIO BIG BROTHER BIG SISTE173 West Second Street Chillicothe, OH 456013113	31-0968026	501c3	3,950				Social Services
SOUTHBROOK CHRISTIAN CHURCH9095 Washington Church Road Miamisburg, OH 45342	31-1170733	501c3	6,750				Religion
STERLING PUBLIC SCHOOLS400 South Tiger Street Sterling, OK 73567	73-0786404	501c3	15,000				Education
STOWE BAPTIST CENTER PO Box 6341 Columbus, OH 43206	31-1092151	501c3	5,000				Religion
STUART'S OPERA HOUSE PO Box 217 Nelsonville, OH 45764	31-0913307	501c3	100,000				Arts and Humanities
TEAYS VALLEY CIVIC ASSOCIATION35 Park Street Ashville, OH 43103	31-1374718	501c3	2,000				Arts and Humanities
TERRA COMMUNITY COLLEGE2830 Napoleon Road Fremont, OH 434209670	34-1054067	501c3	2,000				Education
THE WESTFALL EDUCATION FOUNDATION 19463 Pherson Pike Williamsport, OH 43164	20-4951223	501c3	500				Education
THE WESTFALL EDUCATION FOUNDATION 19463 Pherson Pike Williamsport, OH 43164	20-4951223	501c3	2,114				Education

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) 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
THE WESTFALL EDUCATION FOUNDATION 19463 Pherson Pike Williamsport, OH 43164	20-4951223	501c3	5,000				Education
THOMAS M COOLEY LAW SCHOOL Cooley Center 2 FL 300 S Capitol Ave PO Box 13038 Lansing, MI 48901	38-1988915	501c3	1,370				Education
TIFFIN COMMUNITY YMCA RECREATION CENTER 180 Summit Street Tiffin, OH 44883	34-4479386	501c3	5,000				Social Services
TIFFIN SENECA PUBLIC LIBRARY 77 Jefferson Street Tiffin, OH 44883	34-6401401	501c3	1,000				Social Services
TIFFIN SENECA TEEN CENTER PO Box 1063 Tiffin, OH 44883	34-1725281	501c3	1,000				Social Services
TIFFIN SENECA UNITED WAY INC 201 South Washington Street PO Box 368 Tiffin, OH 44883	34-6401399	501c3	3,000				Social Services
TIFFIN SENECA UNITED WAY INC 174 Jefferson Street PO Box 368 Tiffin, OH 44883	34-6401399	501c3	13,000				Social Services
TOWN OF CYRIL PO Box 448 Cyril, OK 73029	73-6005169	501c3	50,000				Urban Affairs
UNITED WAY OF CENTRAL WEST VIRGINIA One United Way Square Charleston, WV 25301	55-0402755	501c3	2,000				Social Services
UNITED WAY OF THE RIVER CITIES 820 Madison Avenue Huntington, WV 25704	55-0384704	501c3	1,000				Social Services

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) 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
UNIVERSITY OF AKRON302 Buchtel Common Akron, OH 44325	34-6002924	501c3	1,370				Education
UNIVERSITY OF AKRON302 Buchtel Common Akron, OH 44325	34-6002924	501c3	1,370				Education
UNIVERSITY OF CENTRAL FLORIDAStudent Financial Assistance Millican Hall 1204000 Central FL Bl Orlando, FL 328160113	59-2924021	501c3	1,500				Education
UNIVERSITY OF CHARLESTONFinancial Aid Office 2300 MacCorkle Avenue SE Charleston, WV 25304	55-0357039	501c3	500				Education
UNIVERSITY OF CINCINNATISStudent Accounts Office PO Box 210140 Cincinnati, OH 452210140	31-6000989	501c3	500				Education
UNIVERSITY OF CINCINNATISStudent Accounts Office PO Box 210140 Cincinnati, OH 452210140	31-6000989	501c3	10,000				Education
UNIVERSITY OF FINDLAY1000 North Main Street Findlay, OH 45840	34-4431169	501c3	1,000				Education
UNIVERSITY OF FINDLAY1000 North Main Street Findlay, OH 45840	34-4431169	501c3	1,000				Education
UNIVERSITY OF GEORGIAThe Office of Student Financial Aid 220 Holmes/Hunter Academic Building Athens, GA 306026114	58-6001998	501c3	5,000				Education
UNIVERSITY OF NOTRE DAMEOffice of Financial Aid 103 Administration Building Notre Dame, IN 46556	35-0868188	501c3	16,000				Education



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) 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
UNIVERSITY OF OKLAHOMA FOUNDATION 100 Timberdell Road Norman, OK 730190685	73-6091755	501c3	5,000				Education
UNIVERSITY OF OKLAHOMA FOUNDATION 100 Timberdell Road Norman, OK 730190685	73-6091755	501c3	5,000				Education
UNIVERSITY OF RIO GRANDEInstitutional Advancement Office F-33 PO Box 500 Rio Grande, OH 45674	31-4379537	501c3	500				Education
UNIVERSITY OF RIO GRANDEAccounting Office PO Box 500 Rio Grande, OH 45674	31-4379537	501c3	1,575				Education
UNIVERSITY OF TOLEDO Office of Financial Aid 2801 West Bancroft Street MS 314 Toledo, OH 436063390	34-6401483	501c3	1,370				Education
UNIVERSITY OF TOLEDO Office of Financial Aid 2801 West Bancroft Street MS 314 Toledo, OH 436063390	34-6401483	501c3	1,370				Education
UNIVERSITY OF TOLEDO Office of Financial Aid 2801 West Bancroft Street MS 314 Toledo, OH 436063390	34-6401483	501c3	1,370				Education
UNIVERSITY OF WEST FLORIDACashiers Office 11000 University Parkway Pensacola, FL 325145750	59-2976783	501c3	5,000				Education
US DEPARTMENT OF STATE M/FA -Room 8213 Washington, DC 20520	53-0200682	501c3	500				Urban Affairs
WALSH UNIVERSITY Business Office 2020 Easton Street NW North Canton, OH 447203396	34-0868798	501c3	10,000				Education

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) 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
WEECARE OUTREACH INC 16 South Walnut Street PO Box 509 Chillicothe,OH 45601	20-2011289	501c3	3,000				Social Services
WEECARE OUTREACH INC 16 South Walnut Street PO Box 509 Chillicothe,OH 45601	20-2011289	501c3	5,000				Social Services
WEST LIBERTY UNIVERSITYRoom 157 Main Hall PO Box 295 West Liberty,WV 26074	55-6000822	501c3	1,489				Education
WEST LIBERTY UNIVERSITYRoom 157 Main Hall PO Box 295 West Liberty,WV 26074	55-6000822	501c3	2,000				Education
WILLIAMS COLLEGEOffice of Financial Aid PO Box 37 Williamstown,MA 012670037	04-2104847	501c3	10,000				Education
WILMINGTON COLLEGE Business Office 251 Ludovic Street Pyle Box 1206 Wilmington,OH 45177	31-0537514	501c3	1,063				Education
WITTENBERG UNIVERSITY PO Box 720 Springfield,OH 45501	31-0537177	501c3	500				Education
WITTENBERG UNIVERSITY PO Box 720 Springfield,OH 45501	31-0537177	501c3	1,500				Education
WORLD GOSPEL MISSION PO Box 948 Marion,IN 469520948	65-0339453	501c3	400				Religion
WRIGHT STATE UNIVERSITYE 136 Student Union 3640 Colonel Glenn Highway Dayton,OH 454350001	31-0732831	501c3	500				Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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WRIGHT STATE UNIVERSITY136 Student Union 3640 Colonel Glenn Highway Dayton, OH 454350001	31-0732831	501c3	3,783				Education
WRIGHT STATE UNIVERSITY136 Student Union 3640 Colonel Glenn Highway Dayton, OH 454350001	31-0732831	501c3	11,000				Education
XAVIER UNIVERSITY3800 Victory Parkway Cincinnati, OH 45207	31-0537516	501c3	1,000				Education
YOUNG MENS CHRISTIAN ASSOC SANDUSKY1000 North Street Fremont, OH 43420	34-4444246	501c3	2,000				Social Services
YOUNG MENS CHRISTIAN ASSOCIATION40 West Long Street Columbus, OH 43215	31-4379594	501c3	1,200				Social Services
YOUNG MENS CHRISTIAN ASSOCIATION OF594 East Main Street Jackson, OH 45640	31-0886549	501c3	3,500				Health
YOUNG MENS CHRISTIAN ASSOCIATION OF ROSS100 Mill Street Chillicothe, OH 45601	31-4379806	501c3	1,800				Social Services
YOUNGSTOWN STATE UNIVERSITYOne University Plaza Financial Aid Office Youngstown, OH 445550001	34-1011998	501c3	1,000				Education
YOUNGSTOWN STATE UNIVERSITYOne University Plaza Financial Aid Office Youngstown, OH 445550001	34-1011998	501c3	2,500				Education
ZION EVANGELICAL LUTHERAN CHURCHc/o 242 Chapel Road Wheeling, WV 26003	55-0461860	501c3	1,300				Religion

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
Community Foundations Inc

Employer identification number  
31-1197385

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div><div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>1b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain</div></div>		
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</div></div>		
<div><div>3</div><div>Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply</div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</div></div>		
<div><div>4a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>4b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>		No
<div><div>4c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>		No
<div><div></div><div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div></div>		
<div><div>5</div><div>For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div></div>		
<div><div>5a</div><div>The organization?</div></div>		No
<div><div>5b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>		No
<div><div>6</div><div>For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</div></div>		
<div><div>6a</div><div>The organization?</div></div>		No
<div><div>6b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>		No
<div><div>7</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</div></div>		No
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III</div></div>		No
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?</div></div>		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
douglas f kridler	(i) (ii)	285,625			80,396	22,565	388,586	
raymond j biddiscombe cpa	(i) (ii)	164,000			19,510	12,697	196,207	
philip t schavone	(i) (ii)	150,000			16,977	22,254	189,231	
Lisa S Courtice Phd	(i) (ii)	146,500			15,365	10,815	172,680	

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE M  
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization  
Community Foundations Inc

Employer identification number  
31-1197385

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	6	68,466	fair market value
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .			29	
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .				No
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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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

2009

Open to Public  
Inspection

Name of the organization Community Foundations Inc	Employer identification number 31-1197385
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		TO FACILITATE THE TIMELY FILING OF THE FORM 990, THE RETURN IS NOT REVIEWED PRIOR TO ITS FILING BY ALL TRUSTEES THE RETURN IS, HOWEVER, AVAILABLE FOR REVIEW AT THE NEXT REGULARLY SCHEDULED BOARD MEETING
Form 990, Part VI, Section B, line 12c		Copy in from this document Policies are review ed at the annual board meeting and members verbally sign off on changes
		Form 990, Part VI, section B, Lines 15a&b Top officials are not compensated
Form 990, Part VI, Section C, line 19		This organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request
Form 990, Part XI, Line 2C	Process for overseeing Audit	at the summer audit committee meeting, the financial statements are presented to the audit commttee by the external auditors and then to the board at the next scheduled board meeting The committee also oversees the process of selecting the independent accountant This process remains unchanged from the prior year

## Related Organizations and Unrelated Partnerships

# 2009

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Employer identification number

31-1197385

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)  
Name, address, and EIN of disregarded entity

**(b)**  
Primary activity

(c)  
Legal domicile (state  
or foreign country)

(d)  
Total income

(e)  
End-of-year assets

(f)  
Direct controlling  
entity

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)  
Name, address, and EIN of related organization

**(b)**  
Primary activity

(c)  
Legal domicile (state  
or foreign country)

(d)  
Exempt Code section

(e)  
Public charity status  
(if section 501(c)(3))

(f)  
Direct controlling  
entity

See Additional Data Table

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
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Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	Yes	
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o		No
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q	Yes	
r Other transfer of cash or property from other organization(s)	1r	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	The Columbus Foundation	L	191,288
(2)	the Columbus Foundation	Q	18,908
(3)	the Columbus Foundation	R	100,000
(4)			
(5)			
(6)			

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
The Columbus Foundation  1234 East Broad Street Columbus, OH432051405 31-6044264	Grantmaking	OH	501c3	Line 8	N/A
Battelle Charities  1234 East Broad Street Columbus, OH432051405 31-172342	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Central Benefits Health Care Foundation  1234 East Broad Street Columbus, OH432051405 31-1502517	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Columbus Youth Foundation  1234 East Broad Street Columbus, OH432051405 31-6034435	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Community Gifts Foundation  1234 East Broad Street Columbus, OH432051405 31-1606919	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
crane family foundation  1234 East Broad Street columbus, OH432051405 41-2138379	grantmaking	OH	501c3	line 11a, Type 1	the Columbus Foundation
THE WILLIAM H DAVIS DOROTHY M DAVIS AND WILLIAM C DAVIS FOUNDATION  1234 East Broad Street Columbus, OH432051405 31-1372548	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Dominion homes - borror family foundation  1234 East Broad Street Columbus, OH432051405 20-0523484	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The Paul G Duke Foundation Inc  1234 East Broad Street Columbus, OH432051405 31-1045339	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The Walter & Marian English Foundation  1234 East Broad Street Columbus, OH432051405 31-1484833	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The FG Foundation  1234 East Broad Street Columbus, OH432051405 01-0552288	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
John B & Dareth Gerlach Foundation  1234 East Broad Street Columbus, OH432051405 31-1487829	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The John J & Pauline Gerlach Foundation  1234 East Broad Street Columbus, OH432051405 31-1453633	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Greer Foundation  1234 East Broad Street Columbus, OH432051405 31-1438583	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Hinson Family Trust  1234 East Broad Street Columbus, OH432051405 31-6653583	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Ingram-White Castle Foundation  1234 East Broad Street Columbus, OH432051405 31-6051433	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Kidd Family Foundation  1234 East Broad Street Columbus, OH432051405 31-1631547	Grantmaking	OH	501c3	Line 11a, Type 1	Community Foundations Inc
The Arthur & Sara Jo Kobacker Alfred & Ida Kobacker Foundation  1234 East Broad Street Columbus, OH432051405 31-1380072	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Limited Brands Foundation  1234 East Broad Street Columbus, OH432051405 31-1387703	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The Marsh Family Foundation  1234 East Broad Street Columbus, OH432051405 31-1364161	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The Raymond E Mason Foundation  1234 East Broad Street Columbus, OH432051405 31-1220052	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The John H McConnell Foundation  1234 East Broad Street Columbus, OH432051405 31-1253999	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Meuse Family Foundation  1234 East Broad Street Columbus, OH432051405 26-0017844	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
moritz family foundation  1234 East Broad Street Columbus, OH432051405 32-0100273	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Roush Family Foundation  1234 East Broad Street Columbus, OH432051405 31-1677576	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
James A & Kathleen C Rutherford Foundation  1234 East Broad Street Columbus, OH432051405 31-1445233	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The Shackelford Family Foundation  1234 East Broad Street Columbus, OH432051405 31-1418621	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
The Siemer Family Foundation  1234 East Broad Street Columbus, OH432051405 31-1550556	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Trinity Foundation  1234 East Broad Street Columbus, OH432051405 20-2475731	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation
Robert D Walter Foundation  1234 East Broad Street Columbus, OH432051405 31-1491083	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
The Robert F Wolfe & Edgar T Wolfe Foundation  1234 East Broad Street Columbus, OH432051405 31-1253442	Grantmaking	OH	501c3	Line 11a, Type 1	The Columbus Foundation