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# Form **990**

Department of the Treasury
Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

2010

OMB No 1545-0047

Open to Public Inspection

A E-		2010	ılendar year, or tax year begin	ning 01 01 2010 and anding 12 21 201	10		
			C Name of organization	ning 01-01-2010 and ending 12-31-201		D Employer	identification number
	юск іт а dress ch	ipplicable hange	LIMITED BRANDS FOUNDATION			31-1387	703
_		,	Doing Business As				
_	me cha	-				E Telephone	number
_	tıal retu		Number and street (or P O box i 1234 EAST BROAD STREET	f mail is not delivered to street address)	Room/suite	(614) 25	1-4000
Te _	mınate	ed				C Cross rosou	atc d 10 060 0E0
Am	nended	return	City or town, state or country, an COLUMBUS, OH 432051405	d ZIP + 4		<b>G</b> Gloss lecel	ots \$ 10,060,059
Ap	plication	n pending	002011000, 011 102002100				
			<b>F</b> Name and address of p	•	H(a) Is this a	group return for affil	lates? Yes No
			RAYMOND J BIDDISCOM 1234 EAST BROAD STRE				
			COLUMBUS, OH 432051			affiliates included	
					_	o," attach a lis p exemption n	t (see instructions)
<b>T</b> a	ax-exem	npt status	<b>▽</b> 501(c)(3) <b>□</b> 501(c)( )	【(insert no )	H(c) Grou	p exemption ii	diliber F
ı w	/ebsite	<b>e: ►</b> N/A	1		7		
<b>/</b> For	m of or	an numation	Corporation Trust Associa	tion C Other Is	l Vonr of for	rmation 1993	M State of legal domicile OH
	nrt I	_	mary	tion) Other F	L fear of for	mation 1993	M State of legal domicile. On
Га			<u> </u>				
				sion or most significant activities RITABLE ORGANIZATIONS FOR WOM	1EN. CHILDRE	N AND EDUC	ATION
3					,		
Ē	:						
ॗ							
Governance	2	Check th	nis box 🔭 if the organization	discontinued its operations or disposed	of more than 2	5% of its net	assets
	3	Number	of voting members of the gove	rnıng body (Part VI, lıne 1a)	•	3	7
γ) (r)	4	Number	of independent voting member	s of the governing body (Part VI, line 1b	)	4	7
ACUMINES &	5	Total nu	mber of ındıvıduals employed ı	n calendar year 2010 (Part V , line 2a)		5	0
É	6	Total nu	mber of volunteers (estimate i	fnecessary)		6	0
đ	7a	Total un	related business revenue from	7a	0		
	ь	Net unre	lated business taxable income	7b	0		
					Prio	r Year	Current Year
	8	Contri	butions and grants (Part VIII,	line 1h)		5,000,000	10,002,729
ŝ	9		ım service revenue (Part VIII,		0	0	
Revent	10	-	,	mn (A), lines 3, 4, and 7d)		61,372	57,330
ž	11			.), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0
	12		· · · · · · · · · · · · · · · · · · ·	l 1 (must equal Part VIII, column (A), lir	ne		
			_			5,061,372	10,060,059
	13	Grants	and sımılar amounts paıd (Pa	rt IX, column (A), lines 1-3)		7,426,475	8,194,871
	14	Benefi	ts paid to or for members (Par	t IX, column (A), line 4)		0	0
<b>(6</b> )	15		es, other compensation, emplo				
₩ ₩		10)				0	0
Expenses	16a			X, column (A), line 11e)		0	0
五	Ь	Total fu	ndraising expenses (Part IX, column	(D), line 25) ▶ <u>0</u>			
	17	Other	expenses (Part IX, column (A	), lines 11a–11d, 11f–24f)		53,431	59,022
	18			nust equal Part IX, column (A), line 25)		7,479,906	8,253,893
	19	Reven	ue less expenses Subtract lin	ie 18 from line 12		-2,418,534	1,806,166
88						of Current	End of Year
Net Assets or Fund Balances	30	T - 4 - 1 :	necete (Part V. line 4.6)		<b>Y</b>	ear	
4 H	20					5,828,137	5,070,639
<u> </u>	21					5,180,066	2,610,327
	22 71 III		ature Block	ct line 21 from line 20		648,071	2,460,312
				nined this return, including accompanying s	schodulos and si	tataments and	to the best of my
anow		and belie		te. Declaration of preparer (other than offic			
		****	**		20	11-05-13	
Sigr	n	Signa	ture of officer			ite	
Her		RAYN	10ND J BIDDISCOMBE ASST TREASUF	RER			
			or print name and title				
		Print/Type		Preparer's signature		Check if self-	PTIN
Paid		preparer's	s name TJ CONGER CPA	TI CONCED CDA	2011-05-13	employed 🕨 🦵	. =
	arer		me 🕨 JOHN GERLACH & COMPANY				Firm's EIN
•	Only	Firm's ad	dress F 37 WEST BROAD STREET				Phone no 🕨 (614) 224-
ンコピ	City		COLUMBUS, OH 43215	2164			

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

▼Yes No

age <b>2</b>	
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Form	990 (2010)								Page	2
Par		nt of Program Serv hedule O contains a resp							. [고	
	, 963, LES WEXNER S	ne organization's mission STARTED A COMPANY ER TO MIRROR OUR AS	BASED ON A							_
COM EDU WE U SHAI PERS	MUNITY PROGRAM CATION ALSO EM INDERSTAND, APP REHOLDERS OUR SPECTIVES GOING	MS THAT FOCUS ON EMBEDDED IN OUR FOCU RECIATE AND LEVERA PHILANTHROPIC EFFO GHAND-IN-HAND WITH URAL ARTS WE BELIEV	IPOWERING V S IS A COMM GE DIVERSIT RTS REPRESE I OUR EFFORT	VOMEN, NURTURING ITMENT TO INCLUSI Y TO PROVIDE VALU ENT A RICH MIXTURE TS TO HELP IMPROVE	AND MEN ON AS O E FOR OU OF BACK E EDUCAT	TORING CHI NE OF OUR ( JR CUSTOME (GROUNDS, I	ILDREN A COMPAN ERS, ASS NSIGHT: COMMIT	AND IMF Y'S COF OCIATE S AND FMENT 1	PROVING REVALUES, ES AND	F
сом	MUNITIES - EXPO	SING US TO NEW WOR INK ABOUT HOW WE LI	KS AND DIFFE							
										_
2	the prior Form 990	on undertake any signific or 990-EZ?					n 🗀 Y	res ✓ N	No	
	If "Yes," describe t	these new services on So	hedule O							
3		on cease conducting, or r	-	<del>-</del>	nducts, an	y program • • • •	Γ,	res ▽ N	No	
	If "Yes," describe t	these changes on Sched	ule O							
4	Section 501(c)(3)	npt purpose achievement and 501(c)(4) organizat rs, the total expenses, a	ions and secti	on 4947(a)(1) trusts a	re required	d to report the			s and	
4a	(Code CHILDREN	) (Expenses \$	3,129,185	including grants of \$	3,12	9,185 ) (Revenu	e \$		)	
4b	(Code EDUCATION	) (Expenses \$	2,541,531	including grants of \$	2,54	1,531 ) (Revenu	e \$		)	_
	-									_
4c	(Code WOMEN	) (Expenses \$	1,067,533	including grants of \$	1,06	7,533 ) (Revenu	e \$		)	
4d	· ·	rvices (Describe in Sch	•		-					_
	(Expenses \$	1,456,622 inc	luding grants o	of \$ 1,456,6	522)(Rev	enue \$			)	
4e	Total program ser	rvice expenses <b>⊁</b> \$	8.194.87	1						

Part IV	<b>Checklist of</b>	Required	Schedules
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			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 (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		Νο
b	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.	11b		Νο
c	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.	11c		No
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		Νο
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, Parts II and IV	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, Parts III and IV.	16		Νο
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 (see instructions)	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		Νο
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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$ $\Box$ Yes $\Box$ No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other I	RS Filings	and Tax	Compliance

	990 (2010) rt V Statements Regarding Other IRS Filings and Tax Compliance			Page !
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .			1
	1a 0	<u> </u>		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
٠_	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return	I		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	Ī		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
la	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
<del>1</del> a	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		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	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?	- 55		
		5c		
5a	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
ь	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).			
а	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
ь	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 receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
g	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
<b>5</b>	Form 1098-C?	7h		
8	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.			
	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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)........	_		
l2a	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			
u	Note. See the instructions for additional information the organization must report on Schedule O	13a		
Ь	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans	-		
C	Enter the amount of reserves on hand 13c			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		l No

**b** If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*.

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.

36	ection A. Governing Body and Management	-		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
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 governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
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		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
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		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Ке	evenue Code.)		Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10a	165	No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a		N o
12-	December and the superior being a supplied of interest nation 2 Tf "No. " as to line 12			
	Does the organization have a written conflict of interest policy? If "No," go to line 13		V	
•		12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	Yes Yes	
c				
c 13	to conflicts?	12b	Yes	
	to conflicts?	12b 12c	Yes	No
13	to conflicts?	12b 12c 13	Yes	No
13 14 15	to conflicts?	12b 12c 13	Yes	No No
13 14 15	to conflicts?	12b 12c 13 14	Yes	
13 14 15	to conflicts?	12b 12c 13 14	Yes	No
13 14 15 a b	to conflicts?	12b 12c 13 14	Yes	No
13 14 15 a b	to conflicts?	12b 12c 13 14 15a 15b	Yes	N o N o
13 14 15 a b	to conflicts?	12b 12c 13 14 15a 15b	Yes	N o N o
13 14 15 a b	to conflicts?	12b 12c 13 14 15a 15b	Yes	N o N o

Own website 🔽 Another's website 🔽 Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 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 FTHE 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

- 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, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the orga	nization nor any rel	ated org	anız	atıor	cor	npens	ated	any current office	r, dırector, or trust	ee	
<b>(A)</b> Name and Title	(B) Average hours		( ition that a			Ш		( <b>D</b> ) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other	
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Key employee  Cofficer  Institutional Trustee		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
(1) ALEX SHUMATE PRESIDENT/TRUSTEE	1 00	х		х				0	0	0	
(2) ABIGAIL WEXNER CHAIR/TRUSTEE	1 00	х		х				0	0	0	
(3) JAMESON CRANE VICE CHAIR/TRUSTEE	1 00	х		х				0	0	0	
(4) DOUGLAS WILLIAMS VICE CHAIR/TRUSTEE	1 00	х		х				0	0	0	
(5) MARYBETH MEUSE VICE CHAIR/TRUSTEE	1 00	х		х				0	0	0	
(6) NANCY KRAMER VICE CHAIR/TRUSTEE	1 00	х		х				0	0	0	
(7) TIMOTHY FABER SECRETARY/TREAS/TRUSTEE	1 00	х		х				0	0	0	
(8) DOUGLAS F KRIDLER ASST SECRETARY	1 00			х				0	295,585	103,339	
(9) RAYMOND J BIDDISCOMBE ASST TREASURER	1 00			х				0	164,000	34,849	

\$100,000 in compensation from the organization **F**0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

week (describe hours for related organizations in Schedule O)  Sub-Total		<b>(A)</b> Name and Title	(B) Average hours per	1	(tion that a		′)		1	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related			nated	
Total from continuation sheets to Part VII, Section A			week (describe hours for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		organızatıons (W- 2/1099-	or	from t ganızatı relate	:he on and ed	
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A	_														
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A	_														
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A	b	Sub-Total							<u></u>						
Total (add lines 1b and 1c)	<u>-</u>											+			
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►0  Yes No  Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	- d							_	<b>&gt;</b>	0	459,585	5		138,188	
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		Total number of individuals (ind	cluding but not lin	nıted to	thos	e lıs			) who	I o received more tha	n				
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			•						ee, o	r highest compens	ated employee		Yes	No	
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		For any individual listed on line	1a, is the sum of	f report	able	com	pens	ation				3		Νο	
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  (A)  (B)  (C)		ındıvıdual			•		•					4	Yes		
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)											r individual for	5		Νο	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization  (A)  (B)  (C)	e -	ection B. Indonesiant Co	ntractors												
(A) (B) (C)	36	Complete this table for your fiv	e highest comper		ındep	ende	ent c	ontrac	tors	that received more	than				
			(A)							Descr					
	_											+			

10,060,059

Par	Part IX Statement of Functional Expenses  Section 501(c)(3) and 501(c)(4) organizations must complete all columns.										
A	Il other organizations must complete column (A) but are not required to c			(D).							
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses						
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	8,194,871	8,194,871								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	-,,	2,22 ,212								
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				_						
а	Fees for services (non-employees) Management	50,711		50,711							
ь	Legal										
С	Accounting	4,000		4,000							
d	Lobbying				_						
e	Professional fundraising services See Part IV, line 17				-						
f	Investment management fees										
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											
23	Insurance										
24	miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)										
а	OTHER EXPENSES	3,079		3,079							
b	BANK EXPENSES	1,032		1,032							
c	FILING FEES	200		200							
d					_						
e					_						
f	All other expenses										
25	Total functional expenses. Add lines 1 through 24f	8,253,893	8,194,871	59,022	0						
26	Joint costs. Check here ► ☐ If following	-,_55,555	2,23.,371	33,022	<u>_</u>						
	SOP 98-2 (ASC 958-720) Complete this line only if the										
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation										

Pa	irt X	Balance Sheet				
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments	•	5,828,137	2	5,070,639
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, highest compensated employees Complete Part II of	key employees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under secrets persons described in section $4958(c)(3)(B)$ , and contributing empsponsoring organizations of section $501(c)(9)$ voluntary employee organizations (see instructions)	loyers, and			
\$		Schedule L			6	
Assets	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 $\it Complete Part VI \ of \ Schedule \ D$	10a			
	Ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV , line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		5,828,137	16	5,070,639
	17	Accounts payable and accrued expenses .			17	27
	18	Grants payable		5,180,066	18	2,610,300
	19	Deferred revenue			19	
- 46	20	Tax-exempt bond liabilities			20	
<u>a</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D	· .		21	
abilities	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		5,180,066	26	2,610,327
ces		Organizations that follow SFAS 117, check here ▶ ↓ and complete through 29, and lines 33 and 34.	te lines 27			
<u>8</u>	27	Unrestricted net assets		648,071	27	2,460,312
Balance	28	Temporarily restricted net assets			28	
Ξ	29	Permanently restricted net assets			29	
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and clines 30 through 34.	complete			
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
	32	Retained earnings, endowment, accumulated income, or other fund	s		32	
Š	33	Total net assets or fund balances		648,071	33	2,460,312
_	34	Total liabilities and net assets/fund balances		5.828.137	34	5.070.639

Pa	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10.0	060,05
2	Total expenses (must equal Part IX, column (A), line 25)	2			253,89
3	Revenue less expenses Subtract line 2 from line 1	3			306,16
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6	548,07
5	Other changes in net assets or fund balances (explain in Schedule O)	5			6,07
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2,4	160,31
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	দ	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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 its Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis 🔽 Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?		3a		Νο
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

# **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

Inspection

		ne organization	Employer identif	ication n	ımber	
ЦМП	ED DKA		31-1387703			
Pa	rt I	Reason for Public Charity Status (All organizations must complete this par		tions		
The	organi	ization is not a private foundation because it is (For lines 1 through 11, check only one box				
1	Г	A church, convention of churches, or association of churches described in section 170(b)(	1)(A)(i).			
2	Г	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E)				
3	Г	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A	)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in <b>section</b> hospital's name, city, and state	on 170(b)(1)(A)(	( <b>iii).</b> Ente	r the	
5	Γ	An organization operated for the benefit of a college or university owned or operated by a g	overnmental unit	describe	d ın	
		section 170(b)(1)(A)(iv). (Complete Part II )				
6	Γ	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)</b>	A)(v).			
7	Γ	An organization that normally receives a substantial part of its support from a government described in section 170(b)(1)(A)(vi) (Complete Part II)	al unit or from the	e general	public	
8	Г	A community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )				
9	Ė	An organization that normally receives (1) more than 331/3% of its support from contribut	tions, membershi	ıp fees. aı	nd aros	SS
	·	receipts from activities related to its exempt functions—subject to certain exceptions, and	•		-	
		its support from gross investment income and unrelated business taxable income (less sec	• •			
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part I	•			
10	Г	An organization organized and operated exclusively to test for public safety. See <b>section 50</b>	)9(a)(4).			
11	ন	An organization organized and operated exclusively for the benefit of, to perform the function one or more publicly supported organizations described in section 509(a)(1) or section 50 the box that describes the type of supporting organization and complete lines 11e through a   Type I b Type II c Type III - Functionally integrated	9(a)(2) See <b>sect</b> 11h		a)(3).	Check
e	고	By checking this box, I certify that the organization is not controlled directly or indirectly be other than foundation managers and other than one or more publicly supported organization section 509(a)(2)	•	•	-	
f		If the organization received a written determination from the IRS that it is a Type I, Type I check this box	I or Type III sup	porting o	rganız	ation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of following persons?				
		(i) a person who directly or indirectly controls, either alone or together with persons descri	ıbed ın (ıı)		Yes	No
		and (III) below, the governing body of the the supported organization?		11g(i)		No
		(ii) a family member of a person described in (i) above?		11g(ii)		No
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?		11g(iii)		Νo
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	(iv) Is the organizati col (i) list your gover docume	on in ed in rning	(v) Did you not organizati col (i) of support	on ın your	(vi) Is the organizati col (i) orga	on in inized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
(A) THE COLUMBUS FOUNDATION	316044264	8	Yes		Yes		Yes		281,711
<del></del>									201711
Total									281,711

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci die tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
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						
	Total. Add lines 1 through 3						
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)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions )			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and <b>stop here</b>	_	r		•	. , . , .	<b>▶</b> ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (	f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							<del> </del>
16a	<b>33 1/3% support test—2010.</b> If the				line 14 is 33 1/3%	or more, chec	
	and <b>stop here.</b> The organization qua	•				2.2.4.204	<b>▶</b> [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor کد	. <del>-</del>
17-	box and <b>stop here.</b> The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
<b>L</b>	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	LIY ▶
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for <b>2010</b> (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

#### **Additional Data**

Software ID: Software Version:

**EIN:** 31-1387703

Name: LIMITED BRANDS FOUNDATION

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code ARTS & CULTURE	) (Expenses \$	691,962	including grants of \$	691,962 ) (Revenue \$	)
(Code CONSERVATION	) (Expenses \$	64,660	including grants of \$	64,660 ) (Revenue \$	)
(Code INCLUSION	) (Expenses \$	121,000	including grants of\$	121,000 ) (Revenue \$	)
(Code INTERNATIONAL	) (Expenses \$	105,000	including grants of \$	105,000 ) (Revenue \$	)
(Code CIVIC	) (Expenses \$	474,000	including grants of \$	474,000 ) (Revenue \$	)

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

DLN: 93493133046321

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

ernal Revenue Service	Attach to Fo	orm 990. F See separate instructions.		Inspe	ction
Name of the organiz			Emp	loyer identification num	ber
LIMITED BRANDS FOUNI	DATION		31-	1387703	
Part I Organi	izations Maintaining Donor Ac	dvised Funds or Other Simila			ete ıf the
	ation answered "Yes" to Form 99	0, Part IV, line 6.		<u> </u>	
		(a) Donor advised funds		( <b>b)</b> Funds and other acco	unts
. Total number at	,				
	ributions to (during year)				
33 3 3	ts from (during year)				
Aggregate valu	·				
_	ation inform all donors and donor advi rganization's property, subject to the			rsed <b>┌ Yes</b>	☐ No
used only for ch	ation inform all grantees, donors, and haritable purposes and not for the ben ermissible private benefit		•		┌ No
Part III Consei	rvation Easements. Complete	ıf the organızatıon answered "Ye	s" to Forn	n 990, Part IV, line 7.	
Preservation Protection Preservation Complete lines	onservation easements held by the or on of land for public use (e g , recreati of natural habitat on of open space 2a-2d if the organization held a quali ne last day of the tax year	on or pleasure)  Preservation o	of a certifie	d historic structure	rea
				Held at the End of th	ne Year
a Total number o	f conservation easements		2a		
<b>b</b> Total acreage r	restricted by conservation easements		2b		
<b>c</b> Number of cons	servation easements on a certified his	toric structure included in (a)	2c		
<b>d</b> Number of cons	servation easements included in (c) ac	equired after 8/17/06	2d		
	servation easements modified, transfe ar 🕨	rred, released, extinguished, or termii	nated by th	ne organization during	
Number of state	es where property subject to conserva	ation easement is located 🗕			
	nization have a written policy regarding the conservation easements it holds?		handling of	violations, and <b>Yes</b>	┌ No
	teer hours devoted to monitoring, insp	, ,		<u> </u>	
	enses incurred in monitoring, inspecti		-	g the year ► \$	
	servation easement reported on line 2 ) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of	section	☐ Yes	☐ No
balance sheet,	escribe how the organization reports co and include, if applicable, the text of t n's accounting for conservation easen	he footnote to the organization's finan	•	•	
<b>art III Organi</b> Comple	izations Maintaining Collectio ete if the organization answered '	ns of Art, Historical Treasure 'Yes" to Form 990, Part IV, line 8	es, or Otl 3.	her Similar Assets.	
art, historical t	cion elected, as permitted under SFAS reasures, or other similar assets held : XIV, the text of the footnote to its fin	for public exhibition, education or res	earch in fu		ce,
historical treas	cion elected, as permitted under SFAS ures, or other similar assets held for j owing amounts relating to these items	oublic exhibition, education, or resear			
(i) Revenues ir	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$	
(ii) Assets uncl	uded in Form 990, Part X			<b>►</b> \$	
If the organizat	cion received or held works of art, historics nts required to be reported under SFA:	·	ts for finan		
	ided in Form 990, Part VIII, line 1	<u> </u>		<b>▶</b> \$	

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	<u>tori</u>	<u>cal Tr</u>	<u>easur</u>	es, or C	the	<u>r Similar</u>	Asse	<b>ts</b> (cc	ontinued)
3	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne foll	owing t	that are	a sıgnıfıca	ant us	se of its co	llection		
а	Public exhibition		d	Γ	Loan	orexcha	inge progi	rams				
b	Scholarly research		e	$\Gamma$	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ıın hov	n they	y furthe	er the or	ganızatıor	ı's ex	empt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ılar	Γ,	Yes	∏ No
Par	<b>Escrow and Custodial Arrang</b> Part IV, line 9, or reported an an						answere	d "Ye	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	itions or	other ass	ets n	ot	Γ.	Yes	Г No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	able		Г			A mou	nt	
c	Beginning balance						ľ	1c				
d	Additions during the year						ļ	1d				
e	Distributions during the year						ľ	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X. lin	e 21?				L				Yes	┌ No
	If "Yes," explain the arrangement in Part XIV		<b>-</b>							•	-	
	t V Endowment Funds. Complete		n ans	were	ed "Ye	s" to Fo	orm 990.	Part	t IV, line	10.		
		(a)Current Year		Prior \			Years Back		hree Years B		Four Ye	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships		<u> </u>									
e	Other expenditures for facilities and programs											
f	Administrative expenses		<u> </u>					1				
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
c	Term endowment ►											
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation t	that a	ire held	d and ad	mınıstere	d for t	:he		Yes	No
	(i) unrelated organizations								[	3a(i)		
	(ii) related organizations								[	3a(ii)		<u> </u>
	If "Yes" to 3a(II), are the related organization	·						•	[	3b		
4	Describe in Part XIV the intended uses of th					00 5		4.0				
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S			•	i '		1		$\overline{}$	
	Description of investment				a) Cost onsider	or other estment)	( <b>b)</b> Cost or basis (ot		(c) Accun depreci		( <b>d</b> ) B	Book value
1a '	_and		•								<del></del>	
Ь	Buildings		•								<u> </u>	
	_easehold improvements			- 1			Ī		1		1	
C	Leasenoid improvements		•	_								
	Equipment		•									
d   e	·	· · · · · · · ·										

Investments—Other Securities. See	roi ili 990, Pait X, ilile 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(2)2001111111	Cost or end-of-year market v	alue
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
O ther			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		12	
Part VIII Investments—Program Related. See	: гогиг ээо, rait x, ime . T		
(a) Description of investment type	(b) Book value	(c) Method of valuation	ماليم
		Cost or end-of-year market v	aiue
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, In	e 15.		
(a) Descrip	tion	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	, line 25.		

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,060,059
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,253,893
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,806,166
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	6,075
9	Total adjustments (net) Add lines 4 - 8	9	6,075
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,812,24
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	
1	Total revenue, gains, and other support per audited financial statements	1	10,060,059
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	(
3	Subtract line <b>2e</b> from line <b>1</b>	3	10,060,059
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	10,060,059
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per ke	
1	Total expenses and losses per audited financial statements	1	8,261,722
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	7,829
3	Subtract line <b>2e</b> from line <b>1</b>	3	8,253,893
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	(
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	8,253,893

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 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,

Ident if ier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	INCOME TAXES - THE FOUNDATION IS RECOGNIZED AS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND THEREFORE, HAS MADE NO PROVISION FOR FEDERAL, STATE, OR LOCAL INCOME TAX IN THE ACCOMPANYING FINANCIAL STATEMENTS THE FOUNDATION HAS ADOPTED THE PROVISIONS OF THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS BOARD (ASC) RELATING TO UNCERTAIN TAX POSITIONS MANAGEMENT HAS REVIEWED ITS CURRENT AND PAST INCOME TAX POSITIONS AND HAS DETERMINED, BASED ON CLEAR AND UNAMBIGUOUS TAX LAW AND REGULATIONS, THAT THE TAX POSITIONS TAKEN ARE CERTAIN AND THAT THERE IS NO LIKELIHOOD THAT A MATERIAL TAX ASSESSMENT WOULD BE MADE IF THE RESPECTIVE GOVERNMENT AGENCY EXAMINED TAX RETURNS SUBJECT TO AUDIT ACCORDINGLY, NO PROVISION FOR THE EFFECTS OF UNCERTAIN TAX POSITIONS HAS BEEN RECORDED THE FOUNDATION IS NO LONGER SUBJECT TO FEDERAL, STATE, OR LOCAL TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2007
PART XI, LINE 8 - OTHER ADJUSTMENTS		PRIOR YEAR GRANTS RESCINDED 6,075
PART XIII, LINE 2D - OTHER ADJUSTMENTS		DISCOUNT ON MULTI YEAR GRANTS 13,904 PRIOR YEAR GRANTS RESCINDED -6,075

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DLN: 93493133046321 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

## **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

**Inspection** Employer identification number

LIMITED BRANDS FOUNDATION						31-1387703	
1 Does the organization maintain in	ecords to substantı	ate the amount of the					✓ Yes 🗀
the selection criteria used to aw  Describe in Part IV the organiza							i res
Part II Grants and Other As Form 990, Part IV, line duplicated if additional	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
<ul><li>Enter total number of section 50</li><li>Enter total number of other organ</li></ul>							167
- Lincol total mailiber of other organ							

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

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Ident if ier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U.S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 GRANTS ARE MADE AT THE RECOMMENDATION OF BOARD MEMBERS

Software ID: **Software Version:** 

**EIN:** 31-1387703

Name: LIMITED BRANDS FOUNDATION

Form 990, Schedule I, Part	t II, Grants and	d Other Assistance	e to Governments	and Organization	s in the United St	ates	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALBUQUERQUE COMMUNITY FOUNDATION PO BOX 36960 ALBUQUERQUE, NM 871766960	85-0295444	501C3	5,000				ARTS & CULTURE
ALZHEIMERS DISEASE AND RELATED DISORDERS3380 TREMONT ROAD COLUMBUS,OH 43221	31-0996236	501C3	2,500				WOMEN
AMERICAN CANCER SOCIETY OHIO DIVISION 5555 FRANTZ ROAD DUBLIN,OH 43017	34-0726080	501C3	15,000				WOMEN
AMERICAN FRIENDS OF THE HEBREW UNIVERSIT ONE BATTERY PARK PLAZA 25 FLOOR NEW YORK, NY 10004	13-1568923	501C3	15,000				EDUCATION
AMERICAN HEART ASSOCIATION5455 NORTH HIGH STREET PO BOX 163549 COLUMBUS,OH 432163549	13-5613797	501C3	5,000				WOMEN
AMERICAN RED CROSS NATIONAL HEADQUARTERSPO BOX 37243 WASHINGTON, DC 200137243	53-0196605	501C3	100,000				INTERNATIONAL
AMERICAN RED CROSS OF GREATER COLUMBU995 EAST BROAD STREET COLUMBUS, OH 432051339	31-0642918	501C3	15,000				EDUCATION
AMERICAN RED CROSS OF LICKING COUNTYPO BOX 4337 196 SOUTH FIFTH STREET NEWARK,OH 43058	31-4417389	501C3	5,000				WOMEN
AMETHYST INC455 EAST MOUND STREET COLUMBUS,OH 432155595	31-1092242	501C3	10,000				WOMEN
ARTHUR G JAMES CANCER HOSPITAL300 WEST 10TH AVENUE B-13-4-459 COLUMBUS,OH 43210	31-1301428	501C3	3,000				CIVIC & COMMUNITY
ARTHUR G JAMES CANCER HOSPITAL300 WEST 10TH AVENUE B-13-4-459 COLUMBUS,OH 43210	31-1301428	501C3	15,000				EDUCATION
ARTHUR G JAMES CANCER HOSPITAL300 WEST 10TH AVENUE B-13-4-459 COLUMBUS,OH 43210	31-1301428	501C3	15,000				EDUCATION

(a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN FESTIVAL CORPORATION1311 AUTUMN HILL DRIVE COLUMBUS, OH 432357512	01-0813672	501C3	2,500				INCLUSION
BALLET METROPOLITAN INC322 MOUNT VERNON AVENUE COLUMBUS,OH 43215	31-0858562	501C3	5,500				ARTS & CULTURE
BALLET METROPOLITAN INC322 MOUNT VERNON AVENUE COLUMBUS,OH 43215	31-0858562	501C3	10,000				ARTS & CULTURE
BIG BROTHERS BIG SISTERS OF CENTRAL OHIO1855 E DUBLIN- GRANVILLE RD 1ST FLOOR COLUMBUS, OH 432293516	31-4379429	501C3	2,500				CHILDREN
BIG BROTHERS BIG SISTERS OF CENTRAL OHIO1855 E DUBLIN- GRANVILLE RD 1ST FLOOR COLUMBUS, OH 432293516	31-4379429	501C3	10,000				CHILDREN
BIG BROTHERS BIG SISTERS OF CENTRAL OHIO1855 E DUBLIN- GRANVILLE RD 1ST FLOOR COLUMBUS, OH 432293516	31-4379429	501C3	25,000				CHILDREN
BIG BROTHERS-BIG SISTERS OF CENTRAL NEW 5400 PHOENIX NE SUITE 200 ALBUQUERQUE,NM 87110	85-0271207	501C3	5,000				CHILDREN
BLACK RETAIL ACTION GROUP INCROCKEFELLER CENTER STATION PO BOX 1192 NEW YORK, NY 10185	13-3350163	501C3	5,000				INCLUSION
BOTTOMLESS CLOSET545 EIGHTH AVENUE NEWYORK,NY 10018	13-4037622	501C3	10,000				WOMEN
BUCKEYE RANCH FOUNDATION INC5665 HOOVER ROAD GROVE CITY,OH 43123	31-1593013	501C3	5,000				CHILDREN
BUCKEYE RANCH FOUNDATION INC5665 HOOVER ROAD GROVE CITY, OH 43123	31-1593013	501C3	20,000				CHILDREN
BUCKEYE RANCH FOUNDATION INC5665 HOOVER ROAD GROVE CITY, OH 43123	31-1593013	501C3	500,000				CHILDREN

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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITAL AREA HUMANE SOCIETY3015 SCIOTO DARBY EXECUTIVE COURT HILLIARD,OH 43026	31-4379492	501C3	1,000				EDUCATION
CARNEGIE HALL SOCIETY INC881 SEVENTH AVENUE NEW YORK, NY 10019	13-6136259	501C3	25,000				ARTS & CULTURE
CENTER FOR CHILD AND FAMILY ADVOCACY655 EAST LIVINGSTON AVENUE COLUMBUS, OH 43205	02-0627166	501C3	5,000				CHILDREN
CENTER FOR HEALTHY FAMILIES INC500 SOUTH FRONT STREET SUITE 1200 COLUMBUS,OH 43215	20-8701526	501C3	10,000				WOMEN
CENTER OF SCIENCE AND INDUSTRY333 WEST BROAD STREET COLUMBUS,OH 43215	31-4383802	501C3	10,000				EDUCATION
CENTER OF SCIENCE AND INDUSTRY333 WEST BROAD STREET COLUMBUS,OH 43215	31-4383802	501C3	900,000				EDUCATION
CENTRAL OH ASSOC FUNDRAISING PROFESSIO PO BOX 20119 COLUMBUS, OH 432200119	12-3456789	501C3	1,000				EDUCATION
CHARITIES AID FOUNDATION AMERICA KINGS STREET STATION 1800 DIAGONAL ROAD SUITE 150 ALEXANDRIA, VA 22314	43-1634280	501C3	5,435				CHILDREN
CHARITIES AID FOUNDATION AMERICA KINGS STREET STATION 1800 DIAGONAL ROAD SUITE 150 ALEXANDRIA, VA 22314	43-1634280	501C3	21,739				WOMEN
CHARITIES AID FOUNDATION AMERICA KINGS STREET STATION 1800 DIAGONAL ROAD SUITE 150 ALEXANDRIA, VA 22314	43-1634280	501C3	27,174				WOMEN
CHILDHOOD LEAGUE INC 670 SOUTH 18TH STREET COLUMBUS,OH 43205	31-6400177	501C3	10,000				CHILDREN
CHILDRENS HUNGER ALLIANCE3077 KETTERING BLVD SUITE 300 DAYTON,OH 45439	23-7303509	501C3	10,000				CHILDREN

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDRENS HUNGER ALLIANCE370 SOUTH 5TH STREET COLUMBUS,OH 43215	23-7303509	501C3	25,000				CHILDREN
CHILDRENS HUNGER ALLIANCE3077 KETTERING BLVD SUITE 300 DAYTON,OH 45439	23-7303509	501C3	45,000				CHILDREN
CITY OF OAKWOOD30 PARK AVENUE DAYTON, OH 45419	31-6000137	501C3	2,500				INCLUSION
CITY YEAR COLUMBUS107 S HIGH STREET 2ND FLOOR COLUMBUS,OH 43215	22-2882549	501C3	5,000				CIVIC & COMMUNITY
CITY YEAR COLUMBUS107 S HIGH STREET 2ND FLOOR COLUMBUS,OH 43215	22-2882549	501C3	15,000				CIVIC & COMMUNITY
CLAREMONT MCKENNA COLLEGETHE CENTER FOR HUMAN RIGHTS LEADERSHIP 850 COLUMBIA AVENUE CLAREMONT, CA 917116420	95-1664101	501C3	10,000				INCLUSION
CLAREMONT MCKENNA COLLEGE500 EAST NINTH STREET CLAREMONT, CA 91711	95-1664101	501C3	10,000				INCLUSION
CLOTHES THAT WORK1133 S EDWIN C MOSES BLVD 392 DAYTON,OH 45417	13-6143014	501C3	5,000				WOMEN
CLOTHES THAT WORK1133 S EDWIN C MOSES BLVD 392 DAYTON,OH 45417	13-6143014	501C3	600				WOMEN
COLUMBUS AIDS TASK FORCE1751 EAST LONG STREET COLUMBUS,OH 43203	31-1126780	501C3	5,000				WOMEN
COLUMBUS ASSOCIATION FOR THE PERFORMING55 EAST STATE STREET COLUMBUS,OH 432154264	31-0749884	501C3	20,000				ARTS & CULTURE
COLUMBUS ASSOCIATION FOR THE PERFORMING55 EAST STATE STREET COLUMBUS, OH 432154264	31-0749884	501C3	22,000				ARTS & CULTURE

(a) Name and address of organization	( <b>b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash	( <b>f</b> ) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
or government				assistance	(book, FMV, appraisal, other)		
COLUMBUS ASSOCIATION FOR THE PERFORMING55 EAST STATE STREET COLUMBUS, OH 432154264	31-0749884	501C3	3,000				ARTS & CULTURE
COLUMBUS ASSOCIATION FOR THE PERFORMING55 EAST STATE STREET COLUMBUS, OH 432154264	31-0749884	501C3	3,000				ARTS & CULTURE
COLUMBUS CHILDRENS THEATRE177 EAST NAGHTEN STREET COLUMBUS,OH 43215	31-0671802	501C3	7,500				ARTS & CULTURE
COLUMBUS COALITION AGAINST FAMILY VIOL655 EAST LIVINGSTON AVENUE COLUMBUS,OH 43205	54-2143915	501C3	100,000				WOMEN
COLUMBUS COLLEGE OF ART AND DESIGN107 NORTH NINTH STREET COLUMBUS,OH 432153875	31-0820394	501C3	35,000				EDUCATION
COLUMBUS COUNCIL ON WORLD AFFAIRS51 JEFFERSON AVENUE COLUMBUS,OH 43215	51-0180760	501C3	15,000				EDUCATION
COLUMBUS COUNCIL ON WORLD AFFAIRS51 JEFFERSON AVENUE COLUMBUS,OH 43215	51-0180760	501C3	25,000				EDUCATION
COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS,OH 43205	31-6044264	501C3	1,000				EDUCATION
COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS,OH 43205	31-6044264	501C3	5,000				WOMEN
COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS,OH 43205	31-6044264	501C3	14,000				CIVIC & COMMUNITY
COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS,OH 43205	31-6044264	501C3	50,000				CIVIC & COMMUNITY
COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS,OH 43205	31-6044264	501C3	75,000				CIVIC & COMMUNITY

Form 990,Schedule I, Par	t 11, Grants and	Otner Assistance	to Governments	and Organizations	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBUS FOUNDATION 1234 EAST BROAD STREET COLUMBUS,OH 43205	31-6044264	501C3	86,000				EDUCATION
COLUMBUS HOUSING PARTNERSHIP INC562 EAST MAIN STREET COLUMBUS, OH 432155312	31-1208260	501C3	1,500				WOMEN
COLUMBUS METROPOLITAN CLUB INC 100 EAST BROAD STREET SUITE 2200 COLUMBUS,OH 43215	31-0889324	501C3	7,000				CIVIC &
COLUMBUS METROPOLITAN CLUB INC 100 EAST BROAD STREET SUITE 2200 COLUMBUS,OH 43215	31-0889324	501C3	15,000				CIVIC &
COLUMBUS METROPOLITAN LIBRARY FOUNDATION96 SOUTH GRANT AVENUE COLUMBUS,OH 43215	31-1692755	501C3	4,400				EDUCATION
COLUMBUS METROPOLITAN LIBRARY FOUNDATION96 SOUTH GRANT AVENUE COLUMBUS,OH 43215	31-1692755	501C3	10,000				EDUCATION
COLUMBUS MUSEUM OF ART480 EAST BROAD STREET COLUMBUS,OH 43215	31-4379447	501C3	10,000				ARTS & CULTURE
COLUMBUS MUSEUM OF ART480 EAST BROAD STREET COLUMBUS,OH 43215	31-4379447	501C3	50,000				ARTS & CULTURE
COLUMBUS PARTNERSHIP 41 SOUTH HIGH STREET SUITE 1200 COLUMBUS,OH 43215	02-0580058	501C3	100,000				CIVIC & COMMUNITY
COLUMBUS PARTNERSHIP 41 SOUTH HIGH STREET SUITE 1200 COLUMBUS,OH 43215	02-0580058	501C3	150,000				CIVIC & COMMUNITY
COLUMBUS SCHOOL FOR GIRLS56 SOUTH COLUMBIA AVENUE COLUMBUS,OH 43209	31-4379452	501C3	15,000				EDUCATION
COLUMBUS SPEECH AND HEARING CENTER510 E NORTH BROADWAY COLUMBUS,OH 43214	31-4379449	501C3	2,500				EDUCATION

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COLUMBUS STATE COMMUNITY COLLEGE550 EAST SPRING STREET COLUMBUS,OH 43215	31-0729591	501C3	10,000				EDUCATION
COLUMBUS STATE COMMUNITY COLLEGE550 EAST SPRING STREET COLUMBUS,OH 43215	31-0729591	501C3	25,000				EDUCATION
COLUMBUS SYMPHONY ORCHESTRA INCC/O CAPA 55 EAST STATE STREET 5TH FLOOR COLUMBUS,OH 43215	31-6402408	501C3	50,000				ARTS & CULTURE
COLUMBUS SYMPHONY ORCHESTRA INCC/O CAPA 55 EAST STATE STREET 5TH FLOOR COLUMBUS,OH 43215	31-6402408	501C3	75,000				ARTS & CULTURE
COLUMBUS URBAN LEAGUE INC788 MOUNT VERNON AVENUE COLUMBUS,OH 432031408	31-4379453	501C3	50,000				CHILDREN
COLUMBUS ZOOLOGICAL PARK ASSOCIATIONPO BOX 400 POWELL,OH 430650400	31-4390844	501C3	10,000				ARTS & CULTURE
COMMUNITY ARTS PROJECT INC867 MT VERNON AVENUE COLUMBUS,OH 43203	23-7065803	501C3	1,000				INCLUSION
COMMUNITY ARTS PROJECT INC867 MT VERNON AVENUE COLUMBUS,OH 43203	23-7065803	501C3	50,000				CHILDREN
COMMUNITY OF HOLY ROSARY AND648 SOUTH OHIO AVENUE COLUMBUS,OH 43205	31-4379551	501C3	5,000				EDUCATION
COMMUNITY RESEARCH PARTNERS300 EAST BROAD STREET SUITE 490 COLUMBUS,OH 43215	31-1690992	501C3	2,500				EDUCATION
COMMUNITY RESEARCH PARTNERS300 EAST BROAD STREET SUITE 490 COLUMBUS,OH 43215	31-1690992	501C3	5,500				EDUCATION
COMMUNITY SHELTER BOARD111 LIBERTY STREET SUITE 150 COLUMBUS,OH 43215	31-1181284	501C3	75,000				WOMEN

Form 990,Schedule I, Par	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>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CONGRESS OF RACIAL EQUITY5 GARD AVENUE BRONXVILLE,NY 10708	13-3608663	501C3	5,000				INCLUSION		
CONTEMPORARY AMERICAN THEATRE COMPANYC/O CAPA 55 EAST STATE STREET COLUMBUS,OH 43215	31-1168461	501C3	5,000				ARTS & CULTURE		
CONTEMPORARY AMERICAN THEATRE COMPANYC/O CAPA 55 EAST STATE STREET COLUMBUS,OH 43215	31-1168461	501C3	25,000				ARTS & CULTURE		
COOL CULTURE INC80 HANSON PLACE SUITE 604 BROOKLYN,NY 11217	16-1636968	501C3	10,000				CHILDREN		
CORPORATE ANGEL NETWORK INC WESTCHESTER COUNTY AIRPORT ONE LOOP ROAD WHITE PLAINS,NY 10604	13-6143014	501C3	5,000				WOMEN		
COURT APPOINTED SPECIAL ADVOCATES OF FRA 373 S HIGH STREET 15TH FLOOR COLUMBUS, OH 432156321	31-1322198	501C3	15,000				CHILDREN		
CURE SEARCH NATIONAL CHILDHOOD CANCER4600 EAST WEST HIGHWAY UNIT 600 BETHESDA, MD 20814	95-4132414	501C3	35,000				CHILDREN		
CYSTIC FIBROSIS FOUNDATION HEADQUARTERS6931 ARLINGTON ROAD BETHESDA, MD 20814	13-1930701	501C3	5,000				CIVIC & COMMUNITY		
DIRECTIONS FOR YOUTH & FAMILIES1515 INDIANOLA AVENUE COLUMBUS, OH 432012118	31-4407642	501C3	15,000				CHILDREN		
DRESS FOR SUCCESS COLUMBUS1260 NORTH HIGH STREET COLUMBUS,OH 432012466	20-5112085	501C3	10,000				WOMEN		
EQUALITY OHIO EDUCATION FUND50 WEST BROAD STREET SUITE 1970 COLUMBUS,OH 43215	02-0743268	501C3	5,000				EDUCATION		
EXECUTIVE LEADERSHIP FOUNDATION1001 NORTH FAIRFAX STREET SUITE 300 ALEXANDRIA,VA 22314	52-1631358	501C3	25,000				EDUCATION		

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FIRST NIGHT COLUMBUS INC929 HARRISON AVENUE SUITE 303 COLUMBUS,OH 43215	31-1445788	501C3	10,000				ARTS & CULTURE
FOOD BANK FOR NEW YORK CITY39 BROADWAY 10TH FLOOR NEW YORK, NY 10006	13-3179546	501C3	5,000				CHILDREN
FRANKLIN PARK CONSERVATORY WOMENS SUSTAI1777 EAST BROAD STREET COLUMBUS,OH 43205	31-1191469	501C3	5,000				ARTS & CULTURE
FREE ARTS FOR ABUSED CHILDREN1431 BROADWAY 7TH FLOOR NEW YORK, NY 10018	13-3958495	501C3	10,000				CHILDREN
FRIENDS OF THE CONSERVATORY1777 EAST BROAD STREET COLUMBUS,OH 43203	31-1657027	501C3	10,000				ARTS & CULTURE
FURNITURE BANK OF CENTRAL OHIO118 S YALE AVE COLUMBUS,OH 43222	31-1600869	501C3	15,000				WOMEN
GAHANNA-JEFFERSON EDUCATION FOUNDATION C/O GAHANNA-JEFFERSON PUBLIC SCHOOLS 160 SOUTH HAMILTON ROAD COLUMBUS,OH 43230	81-0576974	501C3	800				EDUCATION
GATHERING USA INC1220 EAST CONCORD ORLANDO,FL 32803	59-2810392	501C3	5,000				EDUCATION
GIRL SCOUTS OF OHIOS HEARTLAND COUNCIL1700 WATERMARK DRIVE COLUMBUS, OH 432151097	31-4379475	501C3	20,000				EDUCATION
GLADDEN COMMUNITY HOUSE183 HAWKES AVENUE COLUMBUS,OH 43223	31-4379476	501C3	10,000				CHILDREN
GODMAN GUILD ASSOCIATION303 EAST SIXTH AVENUE COLUMBUS,OH 43201	31-4379478	501C3	5,000				CHILDREN
GOODWILL INDUSTRIES OF CENTRAL OHIO INC1331 EDGEHILL ROAD COLUMBUS,OH 43212	31-4379448	501C3	5,000				EDUCATION

Form 990,Schedule 1, Par	t 11, Grants and	d Other Assistance	to dovernments	and Organizations	s in the officed Sta	ites	
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GREATER COLUMBUS ARTS COUNCIL100 EAST BROAD STREET SUITE 2250 COLUMBUS,OH 43215	31-0833384	501C3	1,500				ARTS & CULTURE
GREATER COLUMBUS ARTS COUNCIL100 EAST BROAD STREET SUITE 2250 COLUMBUS,OH 43215	31-0833384	501C3	50,000				ARTS & CULTURE
GREEN COLUMBUS3528 NORTH HIGH STREET SUITE G COLUMBUS,OH 43214	26-1321476	501C3	5,000				EDUCATION
HARMONY PROJECT PRODUCTIONS INC139 EAST MAIN STREET COLUMBUS,OH 43215	27-1819074	501C3	5,000				INCLUSION
HELP FUNDING INC5 HANOVER SQ FL 17 NEW YORK, NY 10004	13-3770118	501C3	10,000				WOMEN
HILLEL FOUNDATION OF OHIO STATE UNIVERSI46 EAST 16TH AVENUE COLUMBUS, OH 432011615	31-1048567	501C3	50,000				INCLUSION
HOMELESS FAMILIES FOUNDATION651 WEST BROAD STREET COLUMBUS,OH 43215	31-1179492	501C3	10,000				CHILDREN
HUCKLEBERRY HOUSE INC 1421 HAMLET STREET COLUMBUS,OH 43201	31-0795573	501C3	500				CHILDREN
HUDSON INSTITUTE1015 15TH STREET NW 6TH FLOOR WASHINGTON, DC 20005	13-1945157	501C3	10,000				EDUCATION
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036	52-1481896	501C3	15,000				EDUCATION
I KNOWI CAN3798 EAST BROAD STREET COLUMBUS,OH 43213	31-1229135	501C3	5,000				EDUCATION
JAZZ ARTS GROUP OF COLUMBUS930 NORTH HIGH STREET COLUMBUS,OH 43201	31-0852944	501C3	2,500				ARTS & CULTURE

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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
JAZZ ARTS GROUP OF COLUMBUS930 NORTH HIGH STREET COLUMBUS,OH 43201	31-0852944	501C3	15,000				ARTS & CULTURE	
JAZZ ARTS GROUP OF COLUMBUS930 NORTH HIGH STREET COLUMBUS,OH 43201	31-0852944	501C3	17,000				ARTS & CULTURE	
JEREMYS HEROES INC900 ROUTE 9 SIXTH FLOOR WOODBRIDGE, NJ 07095	06-1633906	501C3	2,500				CHILDREN	
JEWISH FAMILY SERVICES 1070 COLLEGE AVENUE COLUMBUS,OH 43209	31-4379497	501C3	10,000				CHILDREN	
JEWISH THEOLOGICAL SEMINARY3080 BROADWAY NEWYORK,NY 100274649	13-0887640	501C3	20,000				CIVIC & COMMUNITY	
JUST THINK INC7801 NORTH CENTRAL DRIVE LEWIS CENTER,OH 43035	31-1462426	501C3	10,000				EDUCATION	
JUVENILE DIABETES RESEARCH FOUNDATION 1293-H LYONS ROAD DAYTON,OH 45458	23-1907729	501C3	5,000				CHILDREN	
KALEIDOSCOPE YOUTH CENTER INCPO BOX 8104 COLUMBUS,OH 43201	31-1411495	501C3	5,000				CHILDREN	
KIDS VOTING OHIO60 EAST BROAD STREET 3RD FLOOR COLUMBUS,OH 43215	31-1672947	501C3	5,000				EDUCATION	
KIDSOHIO ORG22 EAST GAY STREET SUITE 600 COLUMBUS,OH 43215	02-0575227	501C3	125,000				EDUCATION	
KIPP CENTRAL OHIO1406 MYRTLE AVE COLUMBUS,OH 43211	20-8627107	501C3	50,000				EDUCATION	
KOMEN BREAST CANCER FOUNDATION929 EASTWIND DRIVE SUITE 211 WESTERVILLE,OH 43081	75-2844651	501C3	30,000				WOMEN	

Form 990,Schedule I, Par	•	Unier Assistance	to governments	anu Organizationi	In the United Sta	1162	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KOMEN BREAST CANCER FOUNDATION855 GRANDVIEW AVENUE SUITE 250 COLUMBUS, OH 43215	75-2844651	501C3	30,000				WOMEN
KOMEN BREAST CANCER FOUNDATION855 GRANDVIEW AVENUE SUITE 250 COLUMBUS,OH 43215	75-2844651	501C3	137,300				WOMEN
KOMEN BREAST CANCER NEW MEXICO 8200 MOUNTAIN RD NE SUITE 220 ALBUQUERQUE,NM 87110	85-0462625	501C3	11,040				WOMEN
KOMEN BREAST CANCER NEW MEXICO 8200 MOUNTAIN RD NE SUITE 220 ALBUQUERQUE,NM 87110	85-0462625	501C3	25,000				WOMEN
KOMEN BREAST CANCER NEW YORK CITY341 WEST 38TH STREET 10TH FLOOR NEW YORK, NY 10018	91-2049420	501C3	3,180				WOMEN
KOMEN BREAST CANCER NEW YORK CITY341 WEST 38TH STREET 10TH FLOOR NEW YORK, NY 10018	91-2049420	501C3	20,000				WOMEN
LEADERSHIP COLUMBUS 150 SOUTH FRONT STREET SUITE 200 COLUMBUS,OH 43215	31-0855540	501C3	6,000				EDUCATION
LEAGUE OF WOMEN VOTERS OF METROPOLITANPO BOX 130 BLACKLICK, OH 430040130	31-1020460	501C3	5,000				WOMEN
LEO YASSENOFF JEWISH CENTER OF1125 COLLEGE AVENUE COLUMBUS,OH 43209	31-4379496	501C3	10,000				EDUCATION
LEON-LATINO EMPOWERMENT OUTREACH NETWORKP O BOX 16215 COLUMBUS, OH 432166215	34-2029849	501C3	3,000				EDUCATION
LEON-LATINO EMPOWERMENT OUTREACH NETWORKP O BOX 16215 COLUMBUS, OH 432166215	34-2029849	501C3	7,500				INCLUSION
LIFECARE ALLIANCE FOUNDATION1699 WEST MOUND STREET COLUMBUS,OH 43223	31-4379494	501C3	5,000				WOMEN

Form 990,Schedule 1, Part	it, Grants and	Other Assistance	to dovernments	and Organizations	s in the officed Sta	ites	
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LIFECARE ALLIANCE FOUNDATION1699 WEST MOUND STREET COLUMBUS,OH 43223	31-4379494	501C3	5,000				WOMEN
LINCOLN THEATRE ASSOCIATION55 E STATE STREET COLUMBUS, OH 43215	20-5886656	501C3	25,000				ARTS & CULTURE
LINKS FOUNDATION INC 1200 MASSACHUSETTS AVENUE NW WASHINGTON, DC 200054501	52-1170830	501C3	2,500				INCLUSION
MAKE A WISH FOUNDATION OF GREATER OHIO2545 FARMERS DRIVE SUITE 300 COLUMBUS,OH 43235	34-1471131	501C3	5,000				CHILDREN
MARBURN ACADEMY1860 WALDEN DRIVE COLUMBUS,OH 43229	31-1011901	501C3	25,000				EDUCATION
MARTIN LUTHER KING JR BREAKFASTPO BOX 83134 COLUMBUS,OH 43203	31-1225276	501C3	12,500				ARTS & CULTURE
MARYHAVEN INC1791 ALUM CREEK DRIVE COLUMBUS,OH 43207	31-0732345	501C3	10,000				WOMEN
MID OHIO FOODBANK3960 BROOKHAM DRIVE GROVE CITY, OH 43123	31-0865343	501C3	25,000				CHILDREN
NATIONAL AUDUBON SOCIETYOHIO505 W WHITTIER STREET COLUMBUS,OH 43215	13-1624102	501C3	5,000				EDUCATION
NATIONAL BLACK MBA ASSOCIATIONPO BOX 163575 COLUMBUS,OH 43216	31-1392039	501C3	15,000				EDUCATION
NATIONAL CENTER FOR MISSINGCHARLES B WANG INTL CHILDRENS BLDG 699 PRINCE STREET ALEXANDRIA, VA 22314	52-1328557	501C3	25,000				CHILDREN
NATIONAL DOMESTIC VIOLENCE HOTLINEPO BOX 161810 AUSTIN,TX 78716	74-2848462	501C3	35,000				WOMEN

Form 990,Schedule I, Par	t II, Grants an	d Otner Assistance	to Governments	and Organization	s in the United Sta	ites	
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NATIONAL SOCIETY TO PREVENT BLINDNESS1500 WEST THIRD AVENUE SUITE 200 COLUMBUS,OH 43212	36-3667121	501C3	1,750				CHILDREN
NATIONAL URBAN LEAGUE 120 WALL STREET 7TH AND 8TH FLOORS NEW YORK, NY 10005	13-1840489	501C3	15,000				EDUCATION
NATIONWIDE CHILDRENS HOSPITAL FOUNDATI700 CHILDRENS DRIVE COLUMBUS,OH 43205	31-1036370	501C3	2,500				CHILDREN
NATIONWIDE CHILDRENS HOSPITAL FOUNDATI700 CHILDRENS DRIVE COLUMBUS,OH 43205	31-1036370	501C3	10,000				CHILDREN
NATIONWIDE CHILDRENS HOSPITAL FOUNDATI700 CHILDRENS DRIVE COLUMBUS,OH 43205	31-1036370	501C3	2,000,000				CHILDREN
NEW ALBANY WOMEN'S NETWORKPO BOX 87 NEW ALBANY, OH 43054	31-1620626	501C3	2,500				CHILDREN
NEW ALBANY WOMEN'S NETWORKPO BOX 87 NEW ALBANY, OH 43054	31-1620626	501C3	2,500				CHILDREN
NEW DIRECTIONS CAREER CENTER199 EAST RICH STREET COLUMBUS,OH 43215	31-1130384	501C3	26,500				WOMEN
NEWARK MIDLAND THEATRE ASSOCIATIONP O BOX 550 36 NORTH PARK PLACE NEWARK,OH 43058	31-1734034	501C3	4,962				ARTS & CULTURE
NEXTGEN NETWORK1010 WISCONSIN AVENUE NW SUITE 430 WASHINGTON, DC 20007	36-4344785	501C3	5,000				INCLUSION
NORTH MARKET DEVELOPMENT AUTHORITY INC59 SPRUCE STREET COLUMBUS, OH 43215	31-1039842	501C3	5,000				CIVIC & COMMUNITY
OHIO ART LEAGUE1552 N HIGH STREET COLUMBUS,OH 432011121	23-7101643	501C3	2,500				ARTS & CULTURE

Form 990,Schedule 1, Par	t 11, Grants and	Other Assistance	to Governments	and Organization	s in the United Sta	ites	
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OHIO ASSOCIATION OF NONPROFIT ORGANIZATI 100 EAST BROAD STREET SUITE 2440 COLUMBUS,OH 432153119	31-1406442	501C3	2,500				EDUCATION
OHIO GRANTMAKERS FORUM37 WEST BROAD STREET SUITE 800 COLUMBUS,OH 43215	31-1111842	501C3	10,000				EDUCATION
OHIO NEWSBOYS ASSOCIATION INC4300 INDIANOLA AVENUE COLUMBUS,OH 432142221	31-6401150	501C3	5,000				CHILDREN
OHIO STATE UNIVERSITY FOUNDATIONCORPORATE AND FOUNDATION RELATIONS 1480 WEST LANE AVENUE COLUMBUS, OH 432213938	31-1145986	501C3	20,000				EDUCATION
OHIO STATE UNIVERSITY FOUNDATION CORPORATE AND FOUNDATION RELATIONS 1480 WEST LANE AVENUE COLUMBUS, OH 432213938	31-1145986	501C3	1,000				WOMEN
OHIO STATE UNIVERSITY FOUNDATION CORPORATE AND FOUNDATION RELATIONS 1480 WEST LANE AVENUE COLUMBUS, OH 432213938	31-1145986	501C3	156,331				EDUCATION
OHIO STATE UNIVERSITY FOUNDATION1480 WEST LANE AVENUE COLUMBUS, OH 432213938	31-1145986	501C3	500,000				EDUCATION
OHIOHEALTH FOUNDATION INC180 EAST BROAD STREET 31ST FLOOR COLUMBUS,OH 43215	23-7446919	501C3	200,000				WOMEN
PEOPLE FOR THE ETHICAL TREATMENT ANIMALS501 FRONT STREET NORFOLK, VA 23510	52-1218336	501C3	5,000				CIVIC & COMMUNITY
PHILADELPHIA MARTIN LUTHER KING JR5398 WYNNEFIELD AVENUE PHILADELPHIA, PA 19131	23-2349896	501C3	5,000				EDUCATION
PHOENIX HOUSE164 WEST 74 THE STREET NEW YORK, NY 10023	13-3020609	501C3	10,000				WOMEN
PLANNED PARENTHOOD OF CENTRAL OHIO INC206 EAST STATE STREET COLUMBUS,OH 43215	31-4379502	501C3	25,000				EDUCATION

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POWERHOUSE FELLOWSHIP INCPO BOX 44068 RIO RANCHO,NM 87112	12-3456789	501C3	5,000				INCLUSION
PRO MUSICA CHAMBER ORCHESTRA OF COLUMBUS243 NORTH 5TH STREET SUITE 202 COLUMBUS,OH 43215	31-0952873	501C3	5,000				ARTS & CULTURE
PSYCHIATRIC RESEARCH FOUNDATION OF COLUM SUITE 130 HARDING HOSPITAL 1670 UPHAM DRIVE COLUMBUS,OH 43210	23-7212292	501C3	5,000				WOMEN
REFUGEES INTERNATIONAL2001 S STREET NW SUITE 700 WASHINGTON, DC 20009	52-1224516	501C3	5,000				INTERNATIONAL
RONALD MCDONALD HOUSE CHARITIES OF CENTR711 E LIVINGSTON AVENUE COLUMBUS, OH 43205	31-0890152	501C3	10,000				CHILDREN
ROSEMONT CENTER2440 DAWNLIGHT AVENUE COLUMBUS,OH 43211	31-1715200	501C3	5,000				CHILDREN
SAFE HORIZON INC2 LAFAYETTE STREET 3RD FLOOR NEW YORK, NY 10007	13-2946970	501C3	25,000				WOMEN
SAINT STEPHENS COMMUNITY HOUSE1500 EAST 17TH AVENUE COLUMBUS,OH 43219	31-4379568	501C3	3,000				CHILDREN
SAINT STEPHENS COMMUNITY HOUSE1500 EAST 17TH AVENUE COLUMBUS,OH 43219	31-4379568	501C3	10,000				CHILDREN
SALVATION ARMY966 EAST MAIN STREET COLUMBUS,OH 43205	13-5562351	501C3	10,000				WOMEN
SALVATION ARMY966 EAST MAIN STREET COLUMBUS,OH 43205	13-5562351	501C3	24,000				EDUCATION
SAMARITAN COUNSELING CENTER OF ALBUQU1101 MEDICAL ARTS AVENUE BLDG 3 ALBUQUERQUE,NM 87102	85-0342072	501C3	5,000				WOMEN

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SHARE SELF-HELP FOR WOMEN WITH BREAST1501 BROADWAY SUITE 1720 NEW YORK, NY 10036	13-3131914	501C3	5,000				WOMEN
SIMON KENTON COUNCIL BOY SCOUTS OF1901 EAST DUBLIN-GRANVILLE ROAD PO BOX 29207 COLUMBUS,OH 43229	31-4388520	501C3	5,000				CIVIC & COMMUNITY
SOCIAL AND ENVIRONMENTAL ENTREPRENEURS I22231 MULHOLLAND HWY SUITE 209 CALABASAS, CA 91302	95-4116679	501C3	30,000				CONSERVATION
SPELMAN COLLEGE350 SPELMAN LANE SW ATLANTA,GA 30314	58-0566243	501C3	25,000				EDUCATION
STARR COMMONWEALTH C/O HANNAH NEIL CENTER FOR CHILDREN 301 OBETZ ROAD COLUMBUS,OH 43207	38-1359593	501C3	1,000				CHILDREN
TEMPLE OHABEI SHALOM 1187 DEACON STREET BROOKLINE,MA 02446	04-2105747	501C3	25,000				EDUCATION
THURBER HOUSE INCORPORATED77 JEFFERSON AVENUE COLUMBUS,OH 43215	31-1136182	501C3	5,000				EDUCATION
UNITED NEGRO COLLEGE FUND INC (COLS)399 EAST MAIN STREET SUITE 120 COLUMBUS,OH 43215	13-1624241	501C3	15,000				EDUCATION
UNITED WAY OF CENTRAL NEW MEXICO 2340 ALAMO AVENUE SE SECOND FLOOR ALBUQUERQUE,NM 87106	85-0277138	501C3	5,000				CHILDREN
UNITED WAY OF CENTRALOHIO INC360 SOUTH THIRD STREET COLUMBUS,OH 432155485	31-4393712	501C3	5,000				EDUCATION
UNITED WAY OF CENTRALOHIO INC360 SOUTH THIRD STREET COLUMBUS,OH 432155485	31-4393712	501C3	10,000				INCLUSION
UNITED WAY OF CENTRALOHIO INC360 SOUTH THIRD STREET COLUMBUS,OH 432155485	31-4393712	501C3	80,000				EDUCATION

	•			<u> </u>	is in the United St	1	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF NEW YORK CITY2 PARK AVENUE 2ND FLOOR NEW YORK, NY 10016	13-2617681	501C3	10,000				EDUCATION
UNITING AGAINST LUNG CANCER27 UNION SQUARE WEST SUITE 304 NEW YORK,NY 10003	13-4195464	501C3	10,000				WOMEN
URBAN LAND INSTITUTE ULI COLUMBUS 1196 HOPE AVE COLUMBUS,OH 43212	53-0159845	501C3	3,000				EDUCATION
WELLINGTON SCHOOL 3650 REED ROAD COLUMBUS,OH 43220	31-0977200	501C3	5,000				EDUCATION
WELSH HILLS SCHOOL INC 2610 NEWARK GRANVILLE ROAD GRANVILLE,OH 43023	31-0967486	501C3	5,000				EDUCATION
WEXNER CENTER FOUNDATION22 EAST 16TH AVENUE 2ND FLOOR COLUMBUS,OH 43201	31-1306419	501C3	200,000				ARTS & CULTURE
WEXNER CENTER FOUNDATION22 EAST 16TH AVENUE 2ND FLOOR COLUMBUS,OH 43201	31-1306419	501C3	10,000				WOMEN
WEXNER HERITAGE VILLAGE1151 COLLEGE AVENUE COLUMBUS,OH 43209	31-4417962	501C3	10,000				WOMEN
WILDLIFE CONSERVATION SOCIETY2300 SOUTHERN BOULEVARD BRONX,NY 10460	13-1740011	501C3	34,660				CONSERVATION
WILLIAM J BRENNAN JR CENTER FOR JUSTICE161 SIXTH AVENUE NEW YORK, NY 10013	13-3839293	501C3	10,000				EDUCATION
WOMEN'S FUND OF CENTRAL OHIO230 HUNTINGTON CENTER 41 SOUTH HIGH STREET COLUMBUS,OH 43215	31-1784310	501C3	10,000				WOMEN
WOMEN'S FUND OF CENTRAL OHIO230 HUNTINGTON CENTER 41 SOUTH HIGH STREET COLUMBUS,OH 43215	31-1784310	501C3	10,000				WOMEN

Form 990,Schedule I, Par	t 11, Grants and	Other Assistance	to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORKS OHIO CENTER OF HISTORY ART & TECH55 SOUTH FIRST STREET PO BOX 721 NEWARK,OH 430580721	31-1395941	501C3	5,000				ARTS & CULTURE
WORLD OF CHILDREN INC 6200 STONERIDGE MALL ROAD PLEASANTON, CA 94588	31-1772381	501C3	10,000				CHILDREN
WRIGHTCHOICE INTERN PROGRAM6230 BUSCH BLVD SUITE 101 COLUMBUS,OH 43229	31-1812237	501C3	2,000				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	2,500				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	2,500				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	5,000				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	5,000				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	7,500				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	7,500				EDUCATION
YOUNG MENS CHRISTIAN ASSOCIATION40 WEST LONG STREET COLUMBUS,OH 43215	31-4379594	501C3	100,000				CHILDREN
YOUNG WOMENS CHRISTIAN ASSOCIATION 65 SOUTH FOURTH STREET COLUMBUS,OH 43215	31-4379597	501C3	75,000				WOMEN

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DLN: 93493133046321

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization LIMITED BRANDS FOUNDATION

Any related organization?

section 53 4958-6(c)?

ın Part III

If "Yes," to line 6a or 6b, describe in Part III

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

**Compensation Information** 

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

31-1387703 Questions Regarding Compensation Yes Νo 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 First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain **1**b 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? 2 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 Compensation committee ✓ Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment from the organization or a related organization? 4a Νo 4Ь Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. 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 The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III 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 The organization? Νo

payments not described in lines 5 and 6? If "Yes," describe in Part III

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe 6Ь

7

8

Νo

Νo

Νo

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) DOUGLAS F KRIDLER	(1) (11)	0 295,585	0	0	0 81,985	0 21,354	0 398,924	o 0
(2) RAYMOND J BIDDISCOMBE	(I) (II)	0 164,000	0	0		0 14,398	0 198,849	0
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
( 10 )								
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								

Schedule J (Form 990) 2010 Page **3** 

#### 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

Schedule J (Form 990) 2010

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OMB No 1545-0047

2010

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990 or 990-EZ

Attach to Form 990 or 990-EZ.

Name of the organization LIMITED BRANDS FOUNDATION

Employer identification number

31-1387703

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		ABIGAIL WEXNER IS A MEMBER OF THE BOARD OF DIRECTORS OF LIMITED BRANDS, INC TIM FABER AND DOUG WILLIAMS ARE BOTH EMPLOYED BY LIMITED BRANDS, INC

ldentifier	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

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, TRUSTEES ARE REQUIRED, IN WRITING, TO CONFIRM BOTH THEIR UNDERSTANDING OF THE FOUNDATION'S CONFLICT OF INTEREST POLICY, AND THAT HE/SHE IS IN COMPLIANCE WITH IT

ldentifier	Return Reference	Explanation
		FORM 990, PART VI, SECTION B, LINES 15A & B TOP OFFICIALS ARE NOT COMPENSATED

Identifier	Return Reference	Explanation
1	FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION'S FORMS 1023 AND 990 ARE AVAILABLE UPON REQUEST FURTHER, THE ORGANIZATION'S FORM 990 IS AVAILABLE AT WWW GUIDESTAR ORG

Identifier	Return Reference	Explanation
	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

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	PRIOR YEAR GRANTS RESCINDED 6,075 TOTAL TO FORM 990, PART XI, LINE 5 6,075

ldentifier	Return Reference	Explanation
PROCESS FOR OVERSEEING AUDIT	FORM 990, PART XII, LINE 2C	THE ORGANIZATION DOES NOT HAVE A FORMAL COMMITTEE WITH SPECIFIC DUTIES TO OVERSEE THE AUDIT AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT HOWEVER, THE FOUNDATION'S FINANCIAL STATEMENTS ARE REVIEWED BY THE ENTIRE BOARD OF TRUSTEES EITHER AT A FORMAL BOARD MEETING, OR BY MEANS OF AN "ACTIONS WITHOUT A MEETING" AN OFFICER OF THE FOUNDATION, EITHER THE TREASURER OR ASSISTANT TREASURER PRESENTS THE AUDITED FINANCIAL STATEMENTS SIMILARLY, ANY DISCUSSION REGARDING THE SELECTION AND RETENTION OF THE INDEPENDENT ACCOUNTANT IS DONE AT THE BOARD LEVEL

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

DLN: 93493133046321

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2010

# **SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► See separate instructions.

Cat No 50135Y

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

	e organization DS FOUNDATION				<b>Employer iden</b> 31-1387703	tification number		
Part I	Identification of Disregarded Entities (Comple	ete if the organizati	on answered "Yes	s" on Form 990, Pa				
	(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(b) Primary activity Legal domicile (state or foreign country)		<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II	Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	zations (Complete ne tax year.)	ıf the organizatio	n answered "Yes"	on Form 990, Part	t IV, line 34 becau	ıse ıt hac	l one
	(a) Name, address, and EIN of related organization	<b>(b)</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	cont	( <b>g)</b> 512(b)(13) crolled nization
C #114	Date Table						Yes	No
See Additional	Data Table							
							$\bot$	
							1	
							+	

<b>(a)</b> ame, address, and EIN of related organization	<b>(b)</b> Primary activity	(b) Primary activity  (c) Legal domicile (state or foreign country)  (d) Direct controlling entity entity (state or foreign country)  (d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)  (f) Share of total income		(f) Share of total income	(g) Share of end-of-year assets		(h) Disproprtionate ar allocations?		prtionate Code V—		-UBI General of managing e K-1 partner?		<b>(k)</b> Percentage ownership	
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	<b>(f)</b> f total income	Shai end-o	y) re of f-year sets		<b>(h)</b> Percentage ownership	

Part V	<b>Transactions With Related Organizations</b>	(Complete if the organization answered "Ye	es" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Y	'es	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	s II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	12	•		No
<b>b</b> Gift, grant, or capital contribution to other organization(s)	11	) Y	'es	
c Gift, grant, or capital contribution from other organization(s)	10	: [		No
d Loans or loan guarantees to or for other organization(s)	10	1		No
e Loans or loan guarantees by other organization(s)	16	= _		No
<b>f</b> Sale of assets to other organization(s)	11	+	+	No
g Purchase of assets from other organization(s)	19	_		No
h Exchange of assets	11			No
i Lease of facilities, equipment, or other assets to other organization(s)	11	i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j	i		No
k Performance of services or membership or fundraising solicitations for other organization(s)	11	·		No
I Performance of services or membership or fundraising solicitations by other organization(s)	11	Y	'es	
m Sharing of facilities, equipment, mailing lists, or other assets	11	n		No
n Sharing of paid employees	11	1		No
• Reimbursement paid to other organization for expenses	10	, ,	'es	
p Reimbursement paid by other organization for expenses	11	_		No
p Remindurs ement paid by other organization for expenses		+		
<b>q</b> O ther transfer of cash or property to other organization(s)	10	1	$\dashv$	No
r Other transfer of cash or property from other organization(s)	11	r		No

(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) THE COLUMBUS FOUNDATION	L	50,711	CASH PAYMENT
(2) THE COLUMBUS FOUNDATION	0	4,200	CASH PAYMENT
(3) THE COLUMBUS FOUNDATION	В	231,000	CASH PAYMENT
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) (c) Primary activity Legal domicile (state or foreig country)		(c) (d) (e)  egal domicile Are all Share of end-of-year end-of-year assets  country) section assets  501(c)(3) organizations?		(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I Gene mana part	agın tner?	
			Yes	No		Yes	No		Yes	N
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## Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

I Identifier I Keturn Keterence I	Identifier Return Reference Explanation	
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Schedule R (Form 990) 2010

# Software ID: Software Version:

**EIN:** 31-1387703

Name: LIMITED BRANDS FOUNDATION

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

Form 990, Schedule R, Part II - Identification of	Related Tax-Exempt	Organizations					
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501 (c)(3))	<b>(f)</b> Direct controlling entity	(g) Section 512 (b)(13) controlled organization	
						Yes	No
THE COLUMBUS FOUNDATION							
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-6044264 COMMUNITY FOUNDATIONS INC	GRANTMAKING	ОН	501C3	LINE 8	N/A		No
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1197385	GRANTMAKING	он	501C3	LINE 8	N/A		N o
BATTELLE CHARITIES							
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1772342	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		Νο
CENTRAL BENEFITS HEALTH CARE FOUNDATION							
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1502517	GRANTMAKING	ОН	501C3	LINE 11A, TYPE 1	THE COLUMBUS FOUNDATION		No
COLUMBUS YOUTH FOUNDATION							
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-6034435	GRANTMAKING	он	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No
COMMUNITY GIFTS FOUNDATION  1234 EAST BROAD STREET	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		N o
COLUMBUS, OH432051405 31-1606919	GRANTMARING	Он	30103	1	FOUNDATION		IN O
CRANE FAMILY FOUNDATION  1234 EAST BROAD STREET	GRANTMAKING	он	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No
COLUMBUS, OH432051405 41-2138379							
THE WILLIAM H DAVIS DOROTHY M DAVIS AND WILLIAM C DAVIS FOUNDATION				LINE 11A TYPE	THE COLUMBUS		
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1372548	GRANTMAKING	он	501C3	TINE TIA, TYPE	THE COLUMBUS FOUNDATION		No
DOMINION HOMES - BORROR FAMILY FOUNDATION							
1234 EAST BROAD STREET COLUMBUS, OH432051405 20-0523484	GRANTMAKING	он	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		Νο
THE PAUL G DUKE FOUNDATION INC							
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1045339	GRANTMAKING	ОН	501C3	LINE 11A, TYPE 1	THE COLUMBUS FOUNDATION		No
THE WALTER & MARIAN ENGLISH FOUNDATION					THE COLUMBUS		
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1484833	GRANTMAKING	он	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No
THE FG FOUNDATION					TUE 00:		
1234 EAST BROAD STREET COLUMBUS, OH432051405 01-0552288	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		N o

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

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations											
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501 (c)(3))	<b>(f)</b> Direct controlling entity	(g) Section 512 (b)(13) controlled organization					
						Yes	No				
JOHN B & DARETH GERLACH FOUNDATION											
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1487829	GRANTMAKING	ОН	501C3	LINE 11A, TYPE 1	THE COLUMBUS FOUNDATION		No				
THE JOHN J & PAULINE GERLACH FOUNDATION					THE COLUMBUS						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1453633	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	FOUNDATION		No				
GREER FOUNDATION					THE COLUMBIA						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1438583	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
HINSON FAMILY TRUST					THE COLUMBIA						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-6653583	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
INGRAM-WHITE CASTLE FOUNDATION					THE COLUMBIA						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-6051433	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
KIDD FAMILY FOUNDATION					COMMUNITY						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1631547	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	FOUNDATIONS INC		No				
THE ARTHUR & SARA JO KOBACKER ALFRED & IDA KOBACKER FOUNDATION											
1234 EAST BROAD STREET COLUMBUS, 0H432051405 31-1380072	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
THE MARSH FAMILY FOUNDATION											
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1364161	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
THE RAYMOND E MASON FOUNDATION					THE COLUMBIA						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1220052	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
THE JOHN H MCCONNELL FOUNDATION					THE COLUMBIIS						
1234 EAST BROAD STREET COLUMBUS, OH432051405 31-1253999	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				
MEUSE FAMILY FOUNDATION					THE COLUMBUS						
1234 EAST BROAD STREET COLUMBUS, OH432051405 26-0017844	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	FOUNDATION		No				
MORITZ FAMILY FOUNDATION					THE COLUMBUS						
1234 EAST BROAD STREET COLUMBUS, OH432051405 32-0100273	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No				

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

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501 (c)(3))	<b>(f)</b> Direct controlling entity	(g) Section 512 (b)(13) controlled organization	
		<u> </u>				Yes	No
ROUSH FAMILY FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, OH432051405  31-1677576	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No
JAMES A & KATHLEEN C RUTHERFORD FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, OH432051405 31-1445233	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No
THE SHACKELFORD FAMILY FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, OH432051405 31-1418621	GRANTMAKING	ОН	501C3		THE COLUMBUS FOUNDATION		No
THE SIEMER FAMILY FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, 0H432051405  31-1550556	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		No
TRINITY FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, OH432051405 20-2475731	GRANTMAKING	ОН	501C3		THE COLUMBUS FOUNDATION		No
ROBERT D WALTER FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, OH432051405 31-1491083	GRANTMAKING	ОН	501C3	LINE 11A, TYPE 1	THE COLUMBUS FOUNDATION		No
THE ROBERT F WOLFE & EDGAR T WOLFE FOUNDATION  1234 EAST BROAD STREET  COLUMBUS, 0H432051405  31-1253442	GRANTMAKING	ОН	501C3	LINE 11A, TYPE	THE COLUMBUS FOUNDATION		Νο