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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
325 WEST MAIN STREET NO 1110

City or town, state or country, and ZIP + 4
LOUISVILLE, KY 40202

D Employer identification number
31-0997017

E Telephone number
(502) 585-4649

G Gross receipts $ 89,247,996

F Name and address of principal officer
SUSAN A BARRY
325 WEST MAIN STREET NO 1110
LOUISVILLE,KY 40202

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW CFLOUISVILLE ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1984 | **M** State of legal domicile KY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO STRENGTHEN OUR REGION THROUGH INSPIRED PHILANTHROPY AND OUTSTANDING STEWARDSHIP

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	27
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	27
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	28
6	Total number of volunteers (estimate if necessary)	6	42
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	41,648,943	30,080,930
	9 Program service revenue (Part VIII, line 2g)	0	794,003
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,591,898	10,553,304
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	788,952	0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	49,029,793	41,428,237
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	20,838,205	18,396,446
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,392,473	1,555,878
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶420,662		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1,122,134	1,457,726
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	23,352,812	21,410,050
	19 Revenue less expenses Subtract line 18 from line 12	25,676,981	20,018,187

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	208,946,832	259,376,511
	21 Total liabilities (Part X, line 26)	2,326,738	1,932,213
	22 Net assets or fund balances Subtract line 21 from line 20	206,620,094	257,444,298

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** | 2012-05-15
Signature of officer | Date

MATTHEW L BACON VICE PRESIDENT & CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
REBECCA L PHILLIPS CPA	REBECCA L PHILLIPS CPA		☐	

Firm's name ▶ MOUNTJOY CHILTON MEDLEY LLP | Firm's EIN ▶

Firm's address ▶ 462 S FOURTH ST SUITE 2000
LOUISVILLE, KY 402023445 | Phone no ▶ (502) 749-1900

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☐

1 Briefly describe the organization's mission

TO STRENGTHEN OUR REGION THROUGH INSPIRED PHILANTHROPY AND OUTSTANDING STEWARDSHIP BY PARTNERING WITH DONORS TO ENSURE LASTING IMPACT, LEVERAGING OUR KNOWLEDGE OF OUR COMMUNITIES, AND OFFERING OUR CONSTITUENTS AN UNMATCHED LEVEL OF PERSONAL ENGAGEMENT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 18,999,851 including grants of $ 18,396,446) (Revenue $ 794,003)

DISTRIBUTE CONTRIBUTIONS AND GRANTS TO 501(C)(3) ORGANIZATIONS CLASSIFIED AS 509(A)

4b (Code) (Expenses $ 95,448 including grants of $) (Revenue $)

GIFT ANNUITIES

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

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ $ 19,095,299

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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		No
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	Yes	
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? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		No
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		No
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? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, 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		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (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		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
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? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *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**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	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? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
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**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *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
a	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* ☐ **Yes** ☑ **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? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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 . .	1a	12		
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 gaming (gambling) winnings to prize winners?	1c		Yes	
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	2a	28		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			No
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			No
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	13a			
b	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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	14b			

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.

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section 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	1a	27		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	27		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its 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		No
6	Does the organization have members or stockholders?		6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ KY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☑ 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 ▶

THE COMMUNITY FOUNDATION OF LOUISVI
325 W MAIN STREET SUITE 1110
LOUISVILLE, KY 40202
(502) 585-4649

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☑

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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								404,166	0	45,733

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 2

			Yes	No
3	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*	**3**		No
4	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*	**4**	Yes	
5	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*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . .	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations . . .	1d	242,937			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	29,837,993			
	g Noncash contributions included in lines 1a-1f $		13,516,712			
	h **Total.** Add lines 1a-1f . . . . . ▶		30,080,930			
Program Service Revenue		Business Code				
	2a ADMIN FUND FEES	900009	794,003	794,003		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . . ▶		794,003			
	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		5,861,209			5,861,209
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties . . . . . ▶					
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . . ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	52,511,854				
	b Less cost or other basis and sales expenses	47,819,759				
	c Gain or (loss)	4,692,095				
	d Net gain or (loss) . . . . . ▶		4,692,095			4,692,095
Other Revenue	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from fundraising events . . ▶					
	9a Gross income from gaming activities See Part IV, line 19 . a					
	b Less direct expenses . . . . . b					
	c Net income or (loss) from gaming activities . . . ▶					
	10a Gross sales of inventory, less returns and allowances . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d . . . . . ▶					
	12 **Total revenue.** See Instructions . . . ▶		41,428,237	794,003	0	10,553,304

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	18,396,446	18,396,446		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	402,713	132,592	203,872	66,249
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	865,018	222,372	480,703	161,943
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	80,186	22,453	43,300	14,433
9	Other employee benefits	119,910	33,575	64,751	21,584
10	Payroll taxes	88,051	24,654	47,548	15,849
a	Fees for services (non-employees) Management				
b	Legal	20,500	6,150	12,505	1,845
c	Accounting	33,775	10,132	20,603	3,040
d	Lobbying				
e	Professional fundraising services *See Part IV, line 17*				
f	Investment management fees	680,994		680,994	
g	Other	95,983	28,795	58,550	8,638
12	Advertising and promotion	74,041	1,481		72,560
13	Office expenses	70,651	19,782	41,684	9,185
14	Information technology	51,306	14,365	30,271	6,670
15	Royalties				
16	Occupancy	89,780	25,139	52,970	11,671
17	Travel	29,884	11,057	16,735	2,092
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	84,434	31,241	47,283	5,910
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	74,393	20,086	43,892	10,415
23	Insurance	14,538	4,071	8,577	1,890
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	DEFERRED TRUST DIST	89,137	89,137		
b	MEMBERSHIPS	43,034	1,291	35,718	6,025
c	CONTINUING EDUCATION	3,393	102	2,816	475
d	MISCELLANEOUS	1,883	378	1,317	188
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	21,410,050	19,095,299	1,894,089	420,662
26	**Joint costs.** Check here ▶ ☐ if following 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				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		179,248	1	417,867
	2	Savings and temporary cash investments		11,168,950	2	9,701,705
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		140,458	4	119,733
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		16,735	9	4,335
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 440,772			
	b	Less accumulated depreciation	10b 392,003	107,478	10c	48,769
	11	Investments—publicly traded securities		184,007,751	11	236,192,513
	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		13,326,212	15	12,891,589
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		208,946,832	16	259,376,511
Liabilities	17	Accounts payable and accrued expenses		47,025	17	73,475
	18	Grants payable		1,460,138	18	1,017,170
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		819,575	25	841,568
	26	**Total liabilities.** Add lines 17 through 25		2,326,738	26	1,932,213
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		200,070,487	27	156,659,428
	28	Temporarily restricted net assets		4,049,952	28	98,587,186
	29	Permanently restricted net assets		2,499,655	29	2,197,684
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		206,620,094	33	257,444,298
	34	Total liabilities and net assets/fund balances		208,946,832	34	259,376,511

Part XI Reconcilliation of Net Assets

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	41,428,237
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,410,050
3	Revenue less expenses Subtract line 2 from line 1	3	20,018,187
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	206,620,094
5	Other changes in net assets or fund balances (explain in Schedule O)	5	30,806,017
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	257,444,298

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☑

			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 the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ 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 the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

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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

2010

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Employer identification number
31-0997017

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

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

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

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

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

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

_____

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	39,172,463	23,428,283	15,038,624	41,648,943	30,080,930	149,369,243
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	39,172,463	23,428,283	15,038,624	41,648,943	30,080,930	149,369,243
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)						77,891,501
6 **Public Support.** Subtract line 5 from line 4						71,477,742

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	39,172,463	23,428,283	15,038,624	41,648,943	30,080,930	149,369,243
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,285,074	5,146,835	4,960,343	4,597,449	5,861,209	24,850,910
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)	985,698	1,212,926	906,355	789,345		3,894,324
11 **Total support** (Add lines 7 through 10)						178,114,477

12	Gross receipts from related activities, etc (See instructions)	12	794,003

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	40 130 %
15	Public Support Percentage for 2009 Schedule A, Part II, line 14	15	36 250 %

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part 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 in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(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	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (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 ▶☐

b **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 ▶☐

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Additional Data

Software ID:
Software Version:
EIN: 31-0997017
Name: THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HENRY M ALTMAN JR CHAIRPERSON OF THE BOARD	2 00	X		X				0	0	0
MIMI ZINNIEL VICE CHAIRPERON OF THE BOARD	2 00	X		X				0	0	0
MARIA G HAMPTON SECRETARY OF THE BOARD	2 00	X		X				0	0	0
J DAVID FLANERY TREASURER OF THE BOARD	2 00	X		X				0	0	0
F GERALD GREENWELL CHAIR EMERITUS	2 00	X						0	0	0
DAMIEL W MCMAHAN DIRECTOR	1 00	X						0	0	0
CARA K BERNOSKY DIRECTOR	1 00	X						0	0	0
BONITA K BLACK DIRECTOR	2 00	X						0	0	0
MARSHALL BRADLEY JR DIRECTOR	2 00	X						0	0	0
CARL BRAZLEY DIRECTOR	1 00	X						0	0	0
PEDRO BRYANT DIRECTOR	1 00	X						0	0	0
ADEL S ELMAGHRABY DIRECTOR	1 00	X						0	0	0
MICHAEL B FRENCH DIRECTOR	2 00	X						0	0	0
JACQUELINE C GIBBS-WETHERBY DIRECTOR	2 00	X						0	0	0
CHARLES J KANE JR DIRECTOR	1 00	X						0	0	0
DEBORAH MOESSNER DIRECTOR	1 00	X						0	0	0
SUSAN MOSS DIRECTOR	2 00	X						0	0	0
ELIZABETH S PEABODY DIRECTOR	2 00	X						0	0	0
WILLIAM O PRICE DIRECTOR	1 00	X						0	0	0
SHARON A RECEVEUR DIRECTOR	2 00	X						0	0	0
DOROTHY S RIDINGS DIRECTOR	2 00	X						0	0	0
TERRY L SINGER DIRECTOR	2 00	X						0	0	0
ERIC W TAYLOR DIRECTOR	1 00	X						0	0	0
JEFFEREY M YUSSMAN DIRECTOR	2 00	X						0	0	0
JULIE LAVALLE JONES DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM R MAPOTHER DIRECTOR	1 00	X						0	0	0
ROBERT N SHAW DIRECTOR	1 00	X						0	0	0
SUSAN A BARRY PRESIDENT & CEO	30 00			X				202,520	0	16,242
SUSAN NICHOLSON VICE PRESIDENT & CFO	30 00			X				107,855	0	18,345
KATHY S JACOBI VICE PRESIDENT & COO	1 00			X				93,791	0	11,146

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Employer identification number
31-0997017

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	175	
2	Aggregate contributions to (during year)	17,851,944	
3	Aggregate grants from (during year)	14,152,528	
4	Aggregate value at end of year	150,673,803	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☑ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	207,502,595	170,560,992	200,753,162		
b Contributions	29,088,630	41,317,889	16,814,388		
c Investment earnings or losses	40,996,757	17,351,487	-30,460,959		
d Grants or scholarships	19,785,618	20,838,205	16,900,724		
e Other expenditures for facilities and programs					
f Administrative expenses		889,568	-355,125		
g End of year balance	257,802,364	207,502,595	170,560,992		

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

- a Board designated or quasi-endowment ▶ 55 120 %
- b Permanent endowment ▶ 3 800 %
- c Term endowment ▶ 41 080 %

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

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		59,840	52,153	7,687
d Equipment		152,465	115,541	36,924
e Other		228,467	224,309	4,158
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				48,769

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

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

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

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

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

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

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
DEFERRED COMPENSATION LIABILITY	225,459
GIFT ANNUITY LIABILITY	616,109
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	841,568

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

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

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

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	

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

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS ARE USED TO FURTHER ITS EXEMPT PURPOSE OF DISTRIBUTING CONTRIBUTIONS AND GRANTS FOR CHARITABLE PURPOSES
		PART X, LINE 2 FINANCIAL STATEMENT INCOME TAXES FOOTNOTE THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) ADDITIONALLY, THE COMMUNITY FOUNDATION HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A PRIVATE FOUNDATION WITHIN THE CONTEXT OF SECTION 509(A) OF THE CODE WHEN APPLICABLE, THE FOUNDATION RECOGNIZES UNCERTAIN INCOME TAX POSITIONS USING THE "MORE-LIKELY-THAN-NOT" APPROACH AS DEFINED IN THE ASC NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN REFLECTED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS THE FOUNDATION'S 2007 THROUGH 2010 TAX YEARS REMAIN OPEN AND SUBJECT TO EXAMINATION

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Employer identification number
31-0997017

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 243

3 Enter total number of other organizations . . . ▶

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) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 FOR GRANTS THAT ARE ISSUED FROM THE ENDOWMENT FUNDS, THE ORGANIZATION USES GUIDESTAR ORG TO CONFIRM THAT THE RECIPIENT ORGANIZATION IS IN GOOD STANDING WHEN THE DONATION IS SENT TO THE RECIPIENT ORGANIZATION A LETTER IS INCLUDED WITH THE DONATION THAT GOODS AND/OR SERVICES THAT MAY BE GIVEN IN EXCHANGE FOR THE DISTRIBUTION ARE BEING DECLINED, EXCEPT THOSE THAT WOULD NOT REDUCE AN INDIVIDUALS CHARITABLE TAX DEDUCTION THE LETTER ALSO INDICATES THAT BY ACCEPTING THE CHECK THE RECIPIENT ORGANIZATION CERTIFIES TO THE COMMUNITY FOUNDATION OF LOUISVILLE THAT THEIR ORGANIZATION CONTINUES TO BE PUBLICLY SUPPORTED AND EXEMPT UNDER SECTION 501(C)(3) OF THE IRS CODE THE RECEIPIENT ORGANIZATION IS ALSO INFORMED THAT THEY ARE REQUIRED TO NOTIFY THE ORGANIZATION IMMEDIATELY OF ANY CHANGE TO THEIR IRS CLASSIFICATION BY RECEIVING THE LETTER THE ORGANIZATION ALSO CERTIFIES THAT NO TANGIBLE BENEFIT, GOODS OR SERVICES WERE RECEIVED BY ANY INDIVIDUALS OR ENTITIES CONNECTED WITH THE COMMUNITY FOUNDATION OF LOUISVILLE, AND THAT THE GRANT WILL NOT BE USED TO SATISFY THE PAYMENT OF ANY ENFORCEABLE PLEDGE OR LEGALLY BINDING FINANCIAL OBLIGATION ON BEHALF OF THE DONOR FOR GRANT RECIPIENTS THAT ARE DETERMINED BY THE ORGANIZATION'S BOARD, ONCE THE GRANTS ARE AWARDED (AFTER APPLICATIONS ARE REVIEWED AND SITE VISITS ARE COMPLETED) QUARTERLY PROGRESS REPORTS ARE REQUIRED FROM THE ORGANIZATIONS ALSO, DROP IN SITE VISITS ARE DONE

Additional Data Return to Form

Software ID:
Software Version:
EIN: 31-0997017
Name: THE COMMUNITY FOUNDATION OF LOUISVILLE INC

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
100 BLACK MEN OF LOUISVILLE INCPO BOX 24142 LOUISVILLE,KY 40224	61-1191888	501(C)(3)	11,400				COMMUNITY IMPROVEMENT & CAPACITY BUILDING
21ST CENTURY PARKS INC 471 W MAIN ST 202 LOUISVILLE,KY 40202	20-1780317	501(C)(3)	2,220,834				RECREATION & SPORTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
4-H CLUBS & AFFILIATED 4-H ORGANIZATIONS43 HIGH COUNTRY LANE BEDFORD,KY 40006	61-1395204	501(C)(3)	10,400				YOUTH DEVELOPMENT
A CHOICE FOR LIFE INC 101 W MARKET ST LOUISVILLE,KY 40202	61-1142823	501(C)(3)	7,000				MENTAL HEALTH & CRISIS INTERVENTION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ACTORS THEATRE OF LOUISVILLE INC316 WEST MAIN STREET LOUISVILLE,KY 40202	61-0645030	501(C)(3)	47,450				ARTS, CULTURE & HUMANITIES
AED FOUNDATION INC615 WEST 22ND ST OAK BROOK,IL 605231977	36-3784945	501(C)(3)	5,000				PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AMERICAN LUNG ASSOCIATION OF KENTUCKY4100 CHURCHMAN AVENUE LOUISVILLE,KY 402099967	61-0444714	501(C)(3)	6,350				DISEASES, DISORDERS & MEDICAL DISCIPLINES
AMERICAN RED CROSS - INTERNATIONAL RESPONSE FUNDPO BOX 37243 WASHINGTON,DC 20013	53-0196605	501(C)(3)	7,000				PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AMERICAN RED CROSS - LOUISVILLE AREA CHAPTERPO BOX 1675 LOUISVILLE,KY 40201	53-0196605	501(C)(3)	22,293				PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
ANCHOR BAPTIST CHURCH INC3601 WINTHROP DR LEXINGTON,KY 40514	61-1364459	501(C)(3)	10,000				RELIGION-RELATED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ARCHDIOCESE OF LOUISVILLEPO BOX 740043 LOUISVILLE,KY 40201	61-0447247	501(C)(3)	17,100				RELIGION-RELATED
ARTHRITIS FOUNDATION 1330 W PEACHTREE ST 100 ATLANTA,GA 303570669	58-1341679	501(C)(3)	5,000				MEDICAL RESEARCH

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ARTHRITIS FOUNDATION INC7124 MIAMI AVE CINCINNATI,OH 45243	31-6043937	501(C)(3)	7,500				DISEASES, DISORDERS & MEDICAL DISCIPLINES
AUDUBON AREA COMMUNITY SERVICES INCPO BOX 20004 OWENSBORO,KY 423040004	23-7364935	501(C)(3)	25,000				HUMAN SERVICES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BAPTIST HOSPITAL FOUNDATION OF GREATER LOUISVILLE INC4000 KRESGE WAY LOUISVILLE,KY 40207	20-0292291	501(C)(3)	51,745				HEALTH CARE
BASILICA OF ST JOSEPH PROTO-CATHEDRAL310 WEST STEPHEN FOSTER BARDSTOWN,KY 40004	61-0485640	RELIGIOUS ORGANIZATI	5,000				RELIGION-RELATED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BEARGRASS CHRISTIAN CHURCH4100 SHELBYVILLE ROAD LOUISVILLE,KY 40207	61-1219287	501(C)(3)	7,026				RELIGION-RELATED
BELLARMINE UNIVERSITY 2001 NEWBURG ROAD LOUISVILLE,KY 40205	61-0482955	501(C)(3)	647,748				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BEREA COLLEGE FINANCIAL AFAIRS CPO 2206 BEREA,KY 40404	61-0444650	501(C)(3)	53,500				EDUCATION
BEST BUDDIES KENTUCKY 1151 SOUTH 4TH ST LOUSIVILLE,KY 40203	52-1614576	501(C)(3)	5,000				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BETHLEHEM HIGH SCHOOL 309 WEST STEPHEN FOSTER AVE BARDSTOWN,KY 40004	61-0592028	501(C)(3)	5,300				EDUCATION
BETTY FORD CENTER AT EISENHOWER39000 BOB HOPE DR RANCHO MIRAGE,CA 92270	95-3863994	501(C)(3)	12,500				MENTAL HEALTH & CRISIS INTERVENTION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF KENTUCKIANA 1519 GARDINER LANE SUITE B LOUISVILLE,KY 40218	61-6057856	501(C)(3)	13,604				YOUTH DEVELOPMENT
BILLY GRAHAM EVANGELISTIC ASSOCIATION1 BILLY GRAHAM PKWY CHARLOTTE,NC 28201	41-0692230	501(C)(3)	15,000				RELIGION-RELATED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BINGHAM CHILD GUIDANCE CLINIC INC 200 E CHESTNUT STREET LOUISVILLE,KY 40202	61-0445838	501(C)(3)	32,323				YOUTH DEVELOPMENT
BLUE APPLE PLAYERSPO BOX 4261 LOUISVILLE,KY 40204	61-1103965	501(C)(3)	42,000				ARTS, CULTURE & HUMANITIES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BLUE RIDGE SCHOOL273 MAYO DRIVE ST GEORGE,VA 22935	54-0505868	501(C)(3)	50,000				EDUCATION
BLUEGRASS COMMUNITY & TECHNICAL COLLEGE211 COOPER DRIVE LEXINGTON,KY 405060235	76-0826082	501(C)(3)	13,000				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BOARD OF EDUCATION OF MARION COUNTY755 EAST MAIN STREET LEBANON,KY 40033	61-6001309	GOVERNMENT MUNICIPAL	21,000				EDUCATION
BOURBON BAROQUEPO BOX 4176 LOUISVILLE,KY 40204	26-2689413	501(C)(3)	5,250				ARTS, CULTURE & HUMANITIES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BRESCIA UNIVERSITY717 FREDERICA STREET OWENSBORO,KY 42301	61-0660795	501(C)(3)	12,000				EDUCATION
BRIDGEHAVEN INC950 S FIRST ST LOUISVILLE,KY 402032288	61-0548949	501(C)(3)	24,196				MENTAL HEALTH & CRISIS INTERVENTION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BROADWAY BAPTIST CHURCH4000 BROWNSBORO ROAD LOUISVILLE,KY 40207	61-6001947	RELIGIOUS ORGANIZATI	25,654				RELIGION-RELATED
BROOKLAWN INC2125 GOLDSMITH LANE LOUISVILLE,KY 402181200	61-0471572	501(C)(3)	69,925				MENTAL HEALTH & CRISIS INTERVENTION

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

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BROWN PUSEY HOUSE128 N MAIN STREET ELIZABETHTOWN,KY 42701	61-0449610	PRIVATE OPERATING FO	62,926				ARTS, CULTURE & HUMANITIES
CABBAGE PATCH SETTLEMENT HOUSE INC 1413 SOUTH SIXTH STREET LOUISVILLE,KY 40208	61-0458359	501(C)(3)	22,060				HUMAN SERVICES

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

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CALIFORNIA ACADEMY OF SCIENCES55 MUSIC CONCOURSE DRIVE SAN FRANCISCO,CA 94118	94-1156258	501(C)(3)	5,000				ARTS, CULTURE & HUMANITIES
CALVARY EPISCOPAL CHURCH821 SOUTH FOURTH STREET LOUISVILLE,KY 40203	13-5562208	RELIGIOUS ORGANIZATI	5,000				RELIGION-RELATED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CATHEDRAL OF THE ASSUMPTION443 SOUTH FIFTH STREET LOUISVILLE,KY 40202	61-0448554	RELIGIOUS ORGANIZATI	50,600				RELIGION-RELATED
CAVE HILL HERITAGE FOUNDATION INC701 BAXTER AVE LOUISVILLE,KY 40204	56-2498254	501(C)(3)	10,000				MUTUAL & MEMBERSHIP BENEFIT

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

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CEDAR LAKE FOUNDATION 7984 LAGRANGE ROAD LOUISVILLE,KY 40222	61-1093278	501(C)(3)	6,526				HUMAN SERVICES
CENTER FOR WOMEN AND FAMILIES927 S 2ND ST LOUISVILLE,KY 402012048	61-0444846	501(C)(3)	13,650				HUMAN SERVICES

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

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CENTRAL KENTUCKY CHRISTIAN SCHOOL1501 DANVILLE ROAD HARRODSBURG,KY 40330	61-1034449	501(C)(3)	6,000				EDUCATION
CENTRAL PRESBYTERIAN CHURCH318 WEST KENTUCKY ST LOUISVILLE,KY 40203	61-0459493	RELIGIOUS ORGANIZATI	27,000				RELIGION-RELATED

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

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CEREBRAL PALSY KIDS CENTER982 EASTERN PARKWAY 6 LOUISVILLE,KY 40217	61-0492378	501(C)(3)	5,724				DISEASES, DISORDERS & MEDICAL DISCIPLINES
CHABAD OF ATHENS INC 1491 S LUMPKIN ST ATHENS,GA 30605	87-0760911	501(C)(3)	5,600				RELIGION-RELATED

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

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CHANCE SCHOOL INC 4200 LIME KILN LANE LOUISVILLE,KY 402225999	61-0549871	501(C)(3)	26,766				EDUCATION
CHILDREN'S HOSPITAL FOUNDATION - LOUISVILLE234 EAST GRAY ST 450 LOUISVILLE,KY 40202	61-6027530	501(C)(3)	28,521				HEALTH CARE

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CHRIST CHURCH UNITED METHODIST CHURCH4614 BROWNSBORO ROAD LOUISVILLE,KY 40207	61-0449611	RELIGIOUS ORGANIZATI	20,500				RELIGION-RELATED
CHRISTIAN ACADEMY OF LOUISVILLE700 SOUTH ENGLISH STATION ROAD LOUISVILLE,KY 40245	61-0907309	501(C)(3)	10,000				EDUCATION

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

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CHRISTIAN CARE COMMUNITIES12710 TOWNEPARK WAY STE 1000 LOUISVILLE,KY 402431596	61-0445828	501(C)(3)	15,544				HUMAN SERVICES
CHURCH HOME & INFIRMARY EPISCOPAL CHURCH HOME7504 WESTPORT ROAD LOUISVILLE,KY 40222	61-0461720	501(C)(3)	9,100				HEALTH CARE

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

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CHURCH OF THE HOLY SPIRIT3345 LEXINGTON ROAD LOUISVILLE,KY 40206	61-0700575	RELIGIOUS ORGANIZATI	10,000				RELIGION-RELATED
CLAREMONT GRADUATE UNIVERSITY165 EAST TENTH STREET CLAREMONT,CA 91711	95-1664100	501(C)(3)	25,000				EDUCATION

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

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COLUMBIA COLLEGE CHICAGO600 S MICHIGAN AVE CHICAGO,IL 60605	36-6112087	501(C)(3)	8,000				EDUCATION
COMMONWEALTH FUND FOR KET560 COOPER DRIVE LEXINGTON,KY 40502	61-1285473	501(C)(3)	34,958				PHILANTHROPY, VOLUNTARISM

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

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COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY 325 WEST MAIN STREET LOUISVILLE,KY 40202	61-1100993	501(C)(3)	83,750				PHILANTHROPY, VOLUNTARISM
CONGRESSIONAL MEDAL OF HONOR SOCIETY LOUISVILLE CONVENTION 401 INDUSTRY RD 500 LOUISVILLE,KY 402081692	27-2206009	501(C)(3)	150,000				ARTS, CULTURE, HUMANITIES

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

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CORPUS CHRISTI INCPO BOX 395 SIMPSONVILLE,KY 40067	61-1335590	501(C)(3)	9,500				HUMAN SERVICES
DARE TO CARE FOOD BANKPO BOX 35458 LOUISVILLE,KY 40232	23-7345952	501(C)(3)	6,650				FOOD, AGRICULTURE & NUTRITION

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

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DENISON UNIVERSITYPO BOX 716 GRANVILLE,OH 43023	31-4379459	501(C)(3)	19,492				EDUCATION
DOWN SYNDROME OF LOUISVILLE5001 S HURSTBOURNE PKY LOUISVILLE,KY 40299	61-1214126	501(C)(3)	11,795				DISEASES, DISORDERS & MEDICAL DISCIPLINES

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

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DREAMS WITH WINGS1579 BARDSTOWN ROAD LOUISVILLE,KY 40205	61-1371540	501(C)(3)	6,100				HUMAN SERVICES
EASTERN KENTUCKY UNIVERSITYCPO 34-A RICHMOND,KY 40475	61-1011211	501(C)(3)	14,985				EDUCATION

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EASTERN KENTUCKY UNIVERSITY FOUNDATION INC521 LANCASTER AVE RICHMOND,KY 404753102	61-1131682	501(C)(3)	20,933				EDUCATION
FAMILY & CHILDREN'S PLACE2303 RIVER ROAD 200 LOUISVILLE,KY 40206	61-0549561	501(C)(3)	18,568				HUMAN SERVICES

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

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FAMILY Y OF OWENSBORO DAVIESS COUNTY INC900 KENTUCKY PARKWAY OWENSBORO,KY 42301	61-0561344	501(C)(3)	16,500				HUMAN SERVICES
FATHER MALONEY'S BOYS' HAVEN INC2301 GOLDSMITH LN LOUISVILLE,KY 40218	61-0479621	501(C)(3)	19,740				HUMAN SERVICES

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

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FILSON CLUB HISTORICAL SOCIETY1310 SOUTH THIRD STREET LOUISVILLE,KY 40208	61-0444690	501(C)(3)	11,800				ARTS, CULTURE & HUMANITIES
FIRST PRESBYTERIAN CHURCH - ELIZABETHTOWN1016 PEAR ORCHARD DR ELIZABETHTOWN,KY 42701	61-0183855	RELIGIOUS ORGANIZATI	7,000				RELIGION-RELATED

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

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FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS,CO 80995	95-3188150	501(C)(3)	6,000				RELIGION-RELATED
FOUNDATION FOR HEALTH INC2211 MAYFAIR DR 403 OWENSBORO,KY 42304	61-1251763	501(C)(3)	10,000				HEALTH CARE

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

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FUND FOR THE ARTS INC 623 WEST MAIN STREET LOUISVILLE,KY 40202	61-0479626	501(C)(3)	546,430				ARTS, CULTURE & HUMANITIES
GATEWAY FOUNDATION INCPO BOX 274 OWENSBORO,KY 42302	30-0106396	501(C)(3)	5,000				MENTAL HEALTH & CRISIS INTERVENTION

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

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GEORGETOWN BAPTIST CHURCH207 S HAMILTON ST GEORGETOWN,KY 40324	61-0518030	501(C)(3)	5,000				RELIGION-RELATED
GEORGETOWN COLLEGE 400 EAST COLLEGE STREET GEORGETOWN,KY 40324	61-0444695	501(C)(3)	737,700				EDUCATION

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

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GILDA'S CLUB633 BAXTER AVE LOUISVILLE,KY 40204	20-1635170	501(C)(3)	14,600				DISEASES, DISORDERS & MEDICAL DISCIPLINES
GLENVIEW GARDEN CLUB 702 ANTRIM RD LOUISVILLE,KY 40207	31-0993237	501(C)(3)	7,500				ENVIRONMENT

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

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GOODWILL INDUSTRIES OF KENTUCKY1325 S 4TH ST LOUISVILLE,KY 402082313	61-0475284	501(C)(3)	8,272				HUMAN SERVICES
GREATER LOUISVILLE FOUNDATION INC614 W MAIN STREET 6000 LOUISVILLE,KY 40202	61-1131064	501(C)(3)	225,000				PHILANTHROPY, VOLUNTARISM

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

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GREEN RIVER AREA DEVELOPMENT DISTRICT 3860 US HWY 60 WEST OWENSBORO,KY 423010200	61-0706096	GOVERNMENT MUNICIPAL	9,514				PUBLIC & SOCIETAL BENEFIT
GROVELAND AREA INVOLVED NEIGHBORSPO BOX 179 GROVELAND,CA 95321	91-2167031	501(C)(3)	5,000				HEALTH CARE

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

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HABITAT FOR HUMANITY OF METRO LOUISVILLE 1620 BANK STREET LOUISVILLE,KY 40203	58-1735528	501(C)(3)	5,000				HOUSING & SHELTER
HABITAT FOR HUMANITY OF SHELBY CO KY INCPO BOX 728 SHELBYVILLE,KY 40066	61-1185987	501(C)(3)	6,500				HOUSING & SHELTER

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

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HANOVER COLLEGEPO BOX 108 HANOVER,IN 47243	35-0868096	501(C)(3)	11,235				EDUCATION
HARDIN COUNTY EDUCATIONAL FOUNDATION INCPO BOX 391 ELIZABETHTOWN,KY 42702	61-1301324	501(C)(3)	13,580				EDUCATION

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

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HEALING PLACE INC1020 WEST MARKET STREET LOUISVILLE,KY 40202	61-1164775	501(C)(3)	155,943				MENTAL HEALTH & CRISIS INTERVENTION
HENRY FRANCIS DUPONT WINTERTHUR MUSEUM INC ROUTE 52 KENNETT PIKE WINTERTHUR,DE 19735	51-0066038	501(C)(3)	55,500				ARTS, CULTURE & HUMANITIES

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

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HEUSER HEARING & LANGUAGE ACADEMY INC 111 E KENTUCKY STREET LOUISVILLE,KY 40203	61-0492369	501(C)(3)	6,857				EDUCATION
HIGHLAND PRESBYTERIAN CHURCH1011 CHEROKEE ROAD LOUISVILLE,KY 40204	61-0538145	501(C)(3)	16,100				RELIGION-RELATED

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

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HISTORIC HOMES FOUNDATION INC3110 LEXINGTON ROAD LOUISVILLE,KY 40206	61-0549274	501(C)(3)	23,823				ARTS, CULTURE & HUMANITIES
HISTORIC LOCUST GROVE INC561 BLANKENBAKER LANE LOUISVILLE,KY 402071168	61-1390403	501(C)(3)	26,581				ARTS, CULTURE & HUMANITIES

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

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HOLY CROSS HIGH SCHOOL5144 DIXIE HIGHWAY LOUISVILLE,KY 40216	61-1053991	RELIGIOUS ORGANIZATI	29,155				EDUCATION
HOLY NAME CATHOLIC CHURCHPO BOX 774198 STEAMBOAT SPRINGS,CO 80477		RELIGIOUS ORGANIZATI	5,000				RELIGION-RELATED

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

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HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE,KY 40206	61-0445834	501(C)(3)	25,237				HUMAN SERVICES
HONOR FLIGHT INCPO BOX 43986 MIDDLETOWN,KY 402530986	20-2751460	501(C)(3)	10,000				HUMAN SERVICES

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HOPKINS COUNTY EDUCATION FOUNDATION 2000 COLLEGE DR MADISONVILLE,KY 42431	61-1151955	501(C)(3)	17,998				EDUCATION
HOSPARUS INC3532 EPHRAIM MCDOWELL DRIVE LOUISVILLE,KY 40205	61-0921718	501(C)(3)	26,766				HUMAN SERVICES

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

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ILLINOIS WESLEYAN UNIVERSITYPO BOX 2900 BLOOMINGTON,IL 617022900	37-0662594	501(C)(3)	5,000				EDUCATION
INDIANA UNIVERSITY - BLOOMINGTON601 E KIRKWOOD AVE BLOOMINGTON,IN 474051223	35-6001673	501(C)(3)	11,550				EDUCATION

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INDIANA UNIVERSITY SOUTHEAST4201 GRANT LINE ROAD NEW ALBANY,IN 47150	35-6001673	501(C)(3)	6,118				EDUCATION
INSTITUTE OF FOOD TECHNOLOGISTS FOUNDATION525 W VAN BUREN ST 1000 CHICAGO,IL 606073830	36-2136957	501(C)(3)	5,000				FOOD, AGRICULTURE & NUTRITION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
INTELLIGENT CHANGE INITIATIVES INC200 WEST VINE ST 420 LEXINGTON,KY 40507	61-1304888	501(C)(3)	5,000				SCIENCE & TECHNOLOGY
ISAAC W BERNHEIM FOUNDATION INCPO BOX 130 CLERMONT,KY 401100130	61-0444651	501(C)(3)	61,850				ENVIRONMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
JEFFERSON COMMUNITY & TECHNICAL COLLEGE FOUNDATION109 E BROADWAY RM 302A LOUISVILLE,KY 40202	23-7035648	501(C)(3)	100,000				EDUCATION
JEFFERSON COMMUNITY AND TECHNICAL COLLEGE 109 EAST BROADWAY LOUISVILLE,KY 40202	61-1320380	501(C)(3)	5,950				EDUCATION

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

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JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION INC502 WOOD ROAD LOUISVILLE,KY 40222	61-1021128	501(C)(3)	78,332				EDUCATION
JEWISH COMMUNITY OF LOUISVILLE INC3630 DUTCHMANS LANE LOUISVILLE,KY 40205	61-0444765	501(C)(3)	7,250				PHILANTHROPY, VOLUNTARISM

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

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JEWISH HOSPITAL & ST MARY'S HEALTHCARE INC 200 ABRAHAM FLEXNER WAY LOUISVILLE,KY 40202	61-1029768	501(C)(3)	16,000				HEALTH CARE
JUNIOR ACHIEVEMENT OF KENTUCKIANA1401 W MUHAMMAD ALI BLVD LOUISVILLE,KY 40203	61-0476694	501(C)(3)	38,192				EDUCATION

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

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JUVENILE DIABETES RESEARCH FOUNDATION 153 THIERMAN LANE LOUISVILLE,KY 40207	23-1907729	501(C)(3)	12,700				DISEASES, DISORDERS & MEDICAL DISCIPLINES
KENTUCKY PHILANTHROPY INITIATIVE INCPO BOX 1033 GEORGETOWN,KY 403240096	80-0359973	501(C)(3)	5,250				PHILANTHROPY & VOLUNTARISM

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

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KENTUCKY COUNTRY DAY SCHOOL4100 SPRINGDALE ROAD LOUISVILLE,KY 40241	61-0731998	501(C)(3)	18,700				EDUCATION
KENTUCKY DANCE COUNCIL315 EAST MAIN STREET LOUISVILLE,KY 40202	61-6033779	501(C)(3)	40,142				ARTS, CULTURE & HUMANITIES

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

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KENTUCKY FISH & WILDLIFE EDUCATION AND RESOURCE FOUNDATION1 SPORTSMANS LANE FRANKFORT,KY 40601	61-1273612	501(C)(3)	10,000				PHILANTHROPY, VOLUNTARISM
KENTUCKY HORSE PARK FOUNDATION4089 IRON WORKS PARKWAY LEXINGTON,KY 40511	62-1257717	501(C)(3)	20,500				RECREATION & SPORTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KENTUCKY JUNIOR GOLF FOUNDATION INCPO BOX 24292 LOUISVILLE,KY 40224	31-0917072	501(C)(3)	5,500				RECREATION & SPORTS
KENTUCKY NATURAL LANDS TRUST INC433 CHESTNUT ST BEREA,KY 40403	61-1276913	501(C)(3)	23,750				ENVIRONMENT

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

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KENTUCKY OPERA ASSOCIATION323 W BROADWAY SUITE 601 LOUISVILLE,KY 40202	61-6013111	501(C)(3)	40,717				ARTS, CULTURE & HUMANITIES
KENTUCKY PUBLIC RADIO INC619 SOUTH 4TH STREET LOUISVILLE,KY 40202	61-1259787	501(C)(3)	8,800				ARTS, CULTURE & HUMANITIES

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

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KENTUCKY WESLEYAN COLLEGE3000 FREDERICA ST OWENSBORO,KY 42302	61-0466713	501(C)(3)	7,000				EDUCATION
LEADERSHIP INSTITUTE 1101 N HIGHLAND ST ARLINGTON,VA 22201	51-0235174	501(C)(3)	5,000				PUBLIC & SOCIETAL BENEFIT

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

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LEADERSHIP LOUISVILLE FOUNDATION732 W MAIN ST LOUISVILLE,KY 40202	31-0958491	501(C)(3)	7,000				PUBLIC & SOCIETAL BENEFIT
LEXINGTON CHRISTIAN ACADEMY450 W REYNOLDS RD LEXINGTON,KY 40503	61-1161777	501(C)(3)	10,000				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LINCOLN FOUNDATION 200 WEST BROADWAY STE 500 LOUISVILLE,KY 40202	61-0449631	501(C)(3)	86,407				EDUCATION
LINDSEY WILSON COLLEGE210 LINDSEY WILSON STREET COLUMBIA,KY 42728	61-0444763	501(C)(3)	17,563				EDUCATION

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

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LITTLE SISTERS OF THE POOR15 AUDUBON PLAZA DRIVE LOUISVILLE,KY 40217	61-0487466	501(C)(3)	7,625				HEALTH CARE
LOUISVILLE CENTRAL COMMUNITY CENTER INC 1300 W MUHAMMAD ALI BLVD LOUISVILLE,KY 40203	61-0590743	501(C)(3)	32,500				RECREATION & SPORTS

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

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LOUISVILLE COLLEGIATE SCHOOL2427 GLENMARY AVENUE LOUISVILLE,KY 40204	61-0449630	501(C)(3)	5,750				EDUCATION
LOUISVILLE COMMUNITY DESIGN CENTER610 S 4TH ST 701 LOUISVILLE,KY 40202	61-0889003	501(C)(3)	11,400				HOUSING & SHELTER

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

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LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION301 YORK STREET LOUISVILLE,KY 402032257	61-0969361	501(C)(3)	528,499				EDUCATION
LOUISVILLE MALE HIGH SCHOOL4409 PRESTON HIGHWAY LOUISVILLE,KY 40213	61-6001316	GOVERNMENT MUNICIPAL	12,400				EDUCATION

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

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LOUISVILLE OLMSTED PARKS CONSERVANCY INC 1299 TREVILIAN WAY LOUISVILLE,KY 40233	61-1196368	501(C)(3)	918,641				RECREATION & SPORTS
LOUISVILLE ORCHESTRA INC323 W BROADWAY STE 700 LOUISVILLE,KY 40202	61-6000384	501(C)(3)	19,562				ARTS, CULTURE & HUMANITIES

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

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LOUISVILLE PRESBYTERIAN THEOLOGICAL SEMINARY 1044 ALTA VISTA ROAD LOUISVILLE,KY 402051798	61-0444768	501(C)(3)	15,449				RELIGION-RELATED
LOUISVILLE SCIENCE CENTER727 WEST MAIN STREET LOUISVILLE,KY 40202	31-1005850	501(C)(3)	27,600				ARTS, CULTURE & HUMANITIES

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

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LOUISVILLE VISUAL ART ASSOCIATION3005 RIVER ROAD LOUISVILLE,KY 40207	61-0492348	501(C)(3)	13,332				ARTS, CULTURE & HUMANITIES
LOUISVILLE ZOO FOUNDATION INCPO BOX 37250 LOUISVILLE,KY 402339902	31-0971742	501(C)(3)	79,139				ANIMAL-RELATED

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

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MADISONVILLE COMMUNITY COLLEGE 2000 COLLEGE DRIVE MADISONVILLE,KY 42431	61-1320380	501(C)(3)	40,000				EDUCATION
MARCH OF DIMES - GREATER KENTUCKY CHAPTER4802 SHERBURN LANE LOUISVILLE,KY 40207	13-1846366	501(C)(3)	5,000				DISEASES, DISORDERS & MEDICAL DISCIPLINES

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

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MARINE CORPS HERITAGE FOUNDATIONPO BOX 96628 WASHINGTON,DC 200906628	52-1147967	501(C)(3)	7,500				ARTS, CULTURE & HUMANITIES
MARINE CORPS SCHOLARSHIP FOUNDATION INC909 N WASHINGTON ST 400 ALEXANDRIA,VA 22314	22-1905062	501(C)(3)	50,000				PHILANTHROPY, VOLUNTARISM

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

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MENTAL HEALTH ASSOCIATION OF KENTUCKY120 SEARS AVE STE 213 LOUISVILLE,KY 40207	61-0662261	501(C)(3)	35,152				MENTAL HEALTH & CRISIS INTERVENTION
METRO UNITED WAYPO BOX 950148 LOUISVILLE,KY 402950148	61-0444680	501(C)(3)	411,621				PHILANTHROPY, VOLUNTARISM

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

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MILLERSBURG PRESBYTERIAN CHURCH 801 MAIN STREET MILLERSBURG,KY 40348	61-1013376	RELIGIOUS ORGANIZATI	6,100				RELIGION-RELATED
MONTEREY INSTITUTE OF INTERNATIONAL STUDIES 460 PIERCE STREET MONTEREY,CA 93940	94-1425570	501(C)(3)	200,000				EDUCATION

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

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MUHAMMAD ALI MUSEUM AND EDUCATION CENTER INC144 N 6TH STREET LOUISVILLE,KY 40202	61-1323046	501(C)(3)	905,000				ARTS, CULTURE & HUMANITIES
MURRAY STATE UNIVERSITYB2 SPARKS HALL MURRAY,KY 420713312	61-6053844	501(C)(3)	40,950				EDUCATION

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

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NATIONAL CENTER FOR FAMILY LITERACY INC325 WEST MAIN STREET LOUISVILLE,KY 40202	61-1159549	501(C)(3)	53,799				EDUCATION
NATIONAL FOUNDATION TO SUPPORT CELL TRANSPLANT RESEARCH 333 EAST MAIN STREET 304 LOUISVILLE,KY 40202	83-0392250	501(C)(3)	10,000				MEDICAL RESEARCH

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

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NATIONAL MULTIPLE SCLEROSIS SOCIETY 11700 COMMONWEALTH DRIVE SUITE 500 LOUISVILLE,KY 40299	61-0702202	501(C)(3)	15,000				DISEASES, DISORDERS & MEDICAL DISCIPLINES
NATIVITY ACADEMY AT ST BONIFACE529 E LIBERTY STREET LOUISVILLE,KY 40202	51-0450314	501(C)(3)	20,000				EDUCATION

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NATURE CONSERVANCY - KENTUCKY CHAPTER642 W MAIN STREET LEXINGTON,KY 405082018	53-0242652	501(C)(3)	17,772				ENVIRONMENT
NORTH CENTRAL EDUCATION FOUNDATION 306 WEST DIXIE AVE ELIZABETHTOWN,KY 42701	61-6035002	501(C)(3)	22,000				EDUCATION

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NORTHERN KENTUCKY UNIVERSITYNUNN DRIVE AC235 HIGHLAND HEIGHTS,KY 41099	23-7116528	501(C)(3)	17,000				EDUCATION
OLDHAM COUNTY YOUTH FOOTBALL LEAGUEP O BOX 133 BUCKNER,KY 40010	61-1145737	501(C)(3)	11,000				RECREATION & SPORTS

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

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OPEN DOOR OF HOPE INC PO BOX 426 SHELBYVILLE,KY 40065	26-4436314	501(C)(3)	9,000				HUMAN SERVICES
OPTIMIST INTERNATIONAL FOUNDATION4494 LINDELL BLVD ST LOUIS,MO 63108	23-7102928	501(C)(3)	6,000				COMMUNITY IMPROVEMENT & CAPACITY BUILDING

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

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OWENSBORO AREA MUSEUM OF SCIENCE AND HISTORY122 EAST 2ND STREET OWENSBORO,KY 42303	61-1164857	501(C)(3)	5,000				ARTS, CULTURE & HUMANITIES
OWENSBORO COMMUNITY AND TECHNICAL COLLEGE 4800 NEW HARTFORD RD OWENSBORO,KY 42303	61-1109704	501(C)(3)	9,500				EDUCATION

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OWENSBORO CONSOLIDATED CATHOLIC SCHOOL SYSTEM1524 W PARRISH AVE OWENSBORO,KY 42301	62-1357472	501(C)(3)	5,000				EDUCATION
OWENSBORO LIONS CLUB CHARITY FOUNDATION INC3769 PLEASANT VALLEY RD OWENSBORO,KY 423039310	20-0053019	501(C)(3)	50,000				COMMUNITY IMPROVEMENT & CAPACITY BUILDING

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OWENSBORO PUBLIC SCHOOLS FOUNDATION FOR EXCELLENCE INC1335 W 11TH ST OWENSBORO,KY 42301	61-1349137	501(C)(3)	32,545				EDUCATION
OWENSBORO-DAVIESS COUNTY REGIONAL DENTAL CLINIC INC2315 MAYFAIR DR 32 OWENSBORO,KY 42301	26-2343126	501(C)(3)	20,000				HEALTH CARE

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

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PHI SIGMA SIGMA FOUNDATION INC8178 LARK BROWN RD 202 ELKRIDGE,MD 21075	20-5942561	501(C)(3)	5,000				EDUCATION
PIKEVILLE COLLEGE147 SYCAMORE ST PIKEVILLE,KY 415019979	61-0444788	501(C)(3)	43,000				EDUCATION

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PINE KNOT PRIMARY SCHOOL119 EAST HWY 92 PINE KNOT, KY 426359159	61-6001376	GOVERNMENT MUNICIPAL	7,670				EDUCATION
PLANNED PARENTHOOD OF KENTUCKY1025 SOUTH SECOND STREET LOUISVILLE, KY 402039944	61-0481704	501(C)(3)	68,824				HEALTH CARE

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

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PORTLAND AVENUE PRESBYTERIAN CHURCH 3200 PORLAND AVENUE LOUISVILLE,KY 402121142	61-0471575	RELIGIOUS ORGANIZATI	5,000				RELIGION-RELATED
PORTLAND CHRISTIAN SCHOOL SYSTEM INC8507 WESTPORT RD LOUISVILLE,KY 40242	20-2918651	501(C)(3)	37,851				EDUCATION

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

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PORTLAND MUSEUM2308 PORTLAND AVE LOUISVILLE,KY 40212	23-7422794	501(C)(3)	32,147				ARTS, CULTURE & HUMANITIES
PREGNANCY CENTER OF OWENSBOROPO BOX 9525 OWENSBORO,KY 42302	20-0736119	501(C)(3)	6,000				HEALTH CARE

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PRESERVATION KENTUCKY INC306 W MAIN ST 501 FRANKFORT,KY 40602	31-1665931	501(C)(3)	11,000				ARTS, CULTURE & HUMANITIES
PRESIDENT & FELLOWS OF MIDDLEBURY5370 MIDDLEBURY COLLEGE MIDDLEBURY,VT 05753	03-0179298	501(C)(3)	1,920,000				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PRINCETON PRO MUSICA PO BOX 1313 PRINCETON,NJ 08542	22-2317363	501(C)(3)	15,000				ARTS, CULTURE & HUMANITIES
PTA KENTUCKY CONGRESS 11400 RIDGE ROAD ANCHORAGE,KY 40223	61-0461750	501(C)(3)	19,767				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
REGIONAL CANCER CENTER CORPORATION 529 SOUTH JACKSON STREET LOUISVILLE,KY 402023277	61-0936656	501(C)(3)	63,288				MEDICAL RESEARCH
RIVERPARK CENTER INC 101 DAVIESS ST OWENSBORO,KY 423034263	61-1147328	501(C)(3)	5,000				ARTS, CULTURE & HUMANITIES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ROTARY FUND OF LOUISVILLE INC401 WEST MAIN ST 810 LOUISVILLE,KY 40202	61-6029858	501(C)(3)	26,900				COMMUNITY IMPROVEMENT & CAPACITY BUILDING
SAMARITAN'S PURSEPO BOX 3000 BOONE,NC 28607	58-1437002	501(C)(3)	25,000				RELIGION-RELATED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SCHIZOPHRENIA FOUNDATION KENTUCKY INCPO BOX 1927 LOUISVILLE,KY 40201	31-1020023	501(C)(3)	50,044				MENTAL HEALTH & CRISIS INTERVENTION
SCHOOL CHOICE SCHOLARSHIPS INCPO BOX 221546 LOUISVILLE,KY 40252	31-1589289	501(C)(3)	16,500				EDUCATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SECOND PRESBYTERIAN CHURCH3701 OLD BROWNSBORO ROAD LOUISVILLE,KY 40207	61-0466721	501(C)(3)	24,349				RELIGION-RELATED
SEVEN COUNTIES SERVICES INC914 E BROADWAY LOUISVILLE,KY 40202	31-0939757	501(C)(3)	6,000				MENTAL HEALTH & CRISIS INTERVENTION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SHAKERTOWN AT PLEASANT HILL KENTUCKY INC3501 LEXINGTON ROAD HARRODSBURG,KY 403308846	61-0592561	501(C)(3)	7,172				ARTS, CULTURE & HUMANITIES
SHELBY COUNCIL FOR RETARDED CHILDREN INC PO BOX 853 SHELBYVILLE,KY 40066	61-0620554	501(C)(3)	8,030				HUMAN SERVICES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SHELBY COUNTY COMMUNITY CENTER INC 209 MARTIN LUTHER KING JR ST SHELBYVILLE,KY 40065	31-0961436	501(C)(3)	9,000				HUMAN SERVICES
SHELBYVILLESHELBY COUNTY PARKS & RECREATION DEPARTMENT 717 BURKS BRANCH RD SHELBYVILLE,KY 40065	38-3818270	501(C)(3)	25,000				RECREATION & SPORTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUTHEAST CHRISTIAN CHURCH OF JEFFERSON COUNTY KENTUCKY INC 920 BLANKENBAKER PKWY LOUISVILLE,KY 40243	61-0850307	501(C)(3)	25,000				RELIGION-RELATED
SOUTHWEST COMMUNITY MINISTRIES9800 STONESTREET RD LOUISVILLE,KY 40272	62-1257195	501(C)(3)	8,000				HUMAN SERVICES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SPALDING UNIVERSITY 851 SOUTH FOURTH STREET LOUISVILLE,KY 402032188	61-0444780	501(C)(3)	19,456				EDUCATION
SPEED ART MUSEUM2035 SOUTH THIRD ST LOUISVILLE,KY 40208	61-0444823	501(C)(3)	286,029				ARTS, CULTURE & HUMANITIES

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

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ST ANTHONY FOUNDATION121 GOLDEN GATE AVENUE SAN FRANCISCO,CA 94102	94-1513140	501(C)(3)	5,000				HUMAN SERVICES
ST BERNADETTE CHURCH 6500 ST BERNADETTE AVENUE PROSPECT,KY 40059	26-1961485	RELIGIOUS ORGANIZATI	56,000				RELIGION-RELATED

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

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ST CATHARINE COLLEGE 2735 BARDSTOWN ROAD ST CATHARINE,KY 400619435	61-0846809	501(C)(3)	53,000				EDUCATION
ST FRANCIS SCHOOL INC 11000 US HWY 42 GOSHEN,KY 40026	61-0663057	501(C)(3)	13,790				EDUCATION

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

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ST FRANCIS XAVIER CATHOLIC CHURCH155 STRINGER LANE MT WASHINGTON,KY 40047	61-0952560	RELIGIOUS ORGANIZATI	65,000				RELIGION-RELATED
ST JAMES EPISCOPAL CHURCH401 LAGRANGE ROAD PEWEE VALLEY,KY 40056	61-1041508	RELIGIOUS ORGANIZATI	9,763				RELIGION-RELATED

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

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ST JOHN CENTER FOR THE HOMELESS700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE,KY 402023614	61-1135907	501(C)(3)	8,100				HUMAN SERVICES
ST JOSEPH CATHOLIC ORPHAN HOME2823 FRANKFORT AVENUE LOUISVILLE,KY 40206	61-0475286	501(C)(3)	100,500				HUMAN SERVICES

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

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ST MATTHEW'S EPISCOPAL CHURCH330 NORTH HUBBARDS LANE LOUISVILLE,KY 40207	61-0476701	RELIGIOUS ORGANIZATI	25,218				RELIGION-RELATED
ST STEPHEN BAPTIST CHURCH1018 SOUTH 15TH ST LOUISVILLE,KY 40210	61-0724114	501(C)(3)	600,000				RELIGION-RELATED

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

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ST STEPHEN CATHEDRAL 610 LOCUST ST OWENSBORO,KY 42301		RELIGIOUS ORGANIZATI	10,000				RELIGION-RELATED
ST VINCENT DE PAUL SOCIETY COUNCIL OF LOUISVILLE1015-C SOUTH PRESTON STREET LOUISVILLE,KY 40203	61-0727110	501(C)(3)	9,579				MENTAL HEALTH & CRISIS INTERVENTION

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

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ST XAVIER HIGH SCHOOL 1609 POPLAR LEVEL RD LOUISVILLE,KY 40217	61-0480949	RELIGIOUS ORGANIZATI	14,815				EDUCATION
STONY BROOK-MILLSTONE WATERSHED ASSN31 TITUS MILL RD PENNINGTON,NJ 08534	21-0649717	501(C)(3)	6,000				ENVIRONMENT

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

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STROUD WATER RESEARCH CENTER INC 970 SPENCER RD AVONDALE,PA 19311	52-2081073	501(C)(3)	20,000				SCIENCE & TECHNOLOGY
SUMMIT ACADEMY OF GREATER LOUISVILLE INC 11508 MAIN STREET LOUISVILLE,KY 40243	61-1214457	501(C)(3)	51,000				EDUCATION

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

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SUNRISE CHILDREN'S SERVICESPO BOX 1429 MT WASHTINGTON,KY 40047	61-0597273	501(C)(3)	35,500				HUMAN SERVICES
SUNSYSTEM DEVELOPMENT CORPORATION2809 N ORANGE AVE ORLANDO,FL 32804	59-2219301	501(C)(3)	200,000				HEALTH CARE

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

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THE DE PAUL SCHOOL 1925 DUKER AVENUE LOUISVILLE,KY 40205	61-0711082	501(C)(3)	188,086				EDUCATION
THE ENGLISH SPEAKING UNION - KENTUCKY BRANCH817 S FLOYD ST LOUSIVILLE,KY 402032339	61-6053477	501(C)(3)	23,294				HUMAN SERVICES

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

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THE FUND FOR AMERICAN STUDIES1706 NEW HAMPSHIRE AVE NW WASHINGTON,DC 200092502	13-6223604	501(C)(3)	5,000				EDUCATION
THE HERITAGE FOUNDATION214 MASSACHUSETTS AVENUE NE WASHINGTON,DC 20002	23-7327730	501(C)(3)	5,000				PUBLIC & SOCIETAL BENEFIT

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

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THE KENTUCKIANAWORKS FOUNDATION INC410 W CHESTNUT ST 200 LOUISVILLE,KY 40202	37-1508088	501(C)(3)	200,000				EDUCATION
THE MUSIC BOX INC14600 WOODBLUFF TRACE LOUISVILLE,KY 40245	51-0565474	501(C)(3)	5,000				ARTS, CULTURE & HUMANITIES

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

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THE PUBLIC LIFE FOUNDATION OF OWENSBORO401 FREDERICA STREET B-203 OWENSBORO,KY 42301	61-6232654	PRIVATE OPERATING FO	24,500				PHILANTHROPY, VOLUNTARISM
THE SALVATION ARMY - LOUISVILLE AREA COMMANDPO BOX 1149 LOUISVILLE,KY 402011149	58-0660607	501(C)(3)	28,122				HUMAN SERVICES

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

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THE TEMPLE-CONGREGATION ADATH ISRAEL BRITH SHOLOM 5101 US HIGHWAY 42 LOUISVILLE,KY 40241	61-0918772	RELIGIOUS ORGANIZATI	9,459				RELIGION-RELATED
THE UNIVERSITY OF LOUISVILLE FOUNDATION INC215 CENTRAL AVE 300 LOUISVILLE,KY 40208	23-7078461	501(C)(3)	706,811				EDUCATION

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

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THOMAS MERTON CENTER FOUNDATION INC415 W MUHAMMAD ALI BLVD LOUISVILLE,KY 40202	61-1293209	501(C)(3)	11,000				RELIGION-RELATED
TRANSPORTATION ALTERNATIVES INC127 W 26TH ST 1002 NEW YORK,NY 10001	51-0186015	501(C)(3)	5,000				HUMAN SERVICES

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

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TRANSYLVANIA UNIVERSITY300 N BROADWAY LEXINGTON,KY 405081797	61-0444825	501(C)(3)	7,000				EDUCATION
TRINITY EPISCOPAL CHURCH OWENSBORO720 FORD AVE OWENSBORO,KY 42301	61-0445831	501(C)(3)	10,000				RELIGION-RELATED

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

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TRINITY HIGH SCHOOL FOUNDATION INC4011 SHELBYVILLE RD LOUISVILLE,KY 402079824	31-1105966	501(C)(3)	105,350				EDUCATION
TULSA COMMUNITY FOUNDATION7030 S YALE 600 TULSA,OK 74136	73-1554474	501(C)(3)	6,000				PHILANTHROPY, VOLUNTARISM

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

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UNITED WAY OF THE COALFIELD INCPO BOX 366 MADISONVILLE,KY 42431	61-0732633	501(C)(3)	25,500				PHILANTHROPY, VOLUNTARISM
UNIVERSITY OF COLORADO BOULDER CAMPUS BOX 347 BOULDER,CO 80309	84-6000555	501(C)(3)	10,000				EDUCATION

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

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UNIVERSITY OF KENTUCKY128 FUNKHOUSER BUILDING LEXINGTON,KY 405060054	61-6001218	501(C)(3)	293,276				EDUCATION
UNIVERSITY OF LOUISVILLESTUDENT FINANCIAL AID OFFICE LOUISVILLE,KY 40292	61-1014882	501(C)(3)	120,590				EDUCATION

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

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UNIVERSITY OF THE SOUTH735 UNIVERSITY AVE SEWANEE,TN 37383	62-0475697	501(C)(3)	10,000				EDUCATION
VANDERBILT UNIVERSITY 2305 WEST END AVENUE NASHVILLE,TN 372031700	62-0476822	501(C)(3)	6,000				EDUCATION

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

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VOLUNTEERS OF AMERICA OF KENTUCKY933 GOSS AVENUE LOUISVILLE,KY 40217	72-1328891	501(C)(3)	10,633				HUMAN SERVICES
WAYSIDE CHRISTIAN MISSIONPO BOX 7249 LOUISVILLE,KY 402570249	61-0667139	501(C)(3)	15,448				HUMAN SERVICES

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

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WEST END PREPARATORY SCHOOL3628 VIRGINIA AVENUE LOUISVILLE,KY 40211	04-3798875	501(C)(3)	157,200				EDUCATION
WESTERN KENTUCKY BOTANICAL GARDENPO BOX 22562 OWENSBORO,KY 423042562	61-1251188	501(C)(3)	75,000				ENVIRONMENT

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

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WESTERN KENTUCKY UNIVERSITY317 POTTER HALL BOWLING GREEN,KY 421011018	61-6055628	501(C)(3)	56,700				EDUCATION
WESTERN KENTUCKY UNIVERSITY FOUNDATION 1906 COLLEGE HEIGHTS BLVD 8094 BOWLING GREEN,KY 42101	61-1251555	501(C)(3)	55,700				EDUCATION

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

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WOODBERRY FOREST SCHOOL402 WOODBERRY STATION WOODBERRY FOREST,VA 22989	54-0519590	501(C)(3)	10,300				EDUCATION
YALE UNIVERSITYPO BOX 2038 NEW HAVEN,CT 065212038	06-0646973	501(C)(3)	803,500				EDUCATION

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

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YEW DELL INCPO BOX 1334 CRESTWOOD,KY 40014	61-1390688	501(C)(3)	13,050				ENVIRONMENT
YMCA OF GREATER LOUISVILLE545 S 2ND STREET LOUISVILLE,KY 40202	61-0444843	501(C)(3)	9,809				HUMAN SERVICES

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

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YOUNG AMERICA'S FOUNDATION110 ELDEN ST HERNDON,VA 20170	23-7042029	501(C)(3)	5,000				YOUTH DEVELOPMENT
YOUNG LIFEPO BOX 5098 LOUISVILLE,KY 402550098	84-0385934	501(C)(3)	20,000				PHILANTHROPY, VOLUNTARISM

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Employer identification number
31-0997017

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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)		
b	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	**1b**	Yes	
2	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**	Yes	
3	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		
	☑ Independent compensation consultant	☑ Compensation survey or study		
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	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			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	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.			
5	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			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	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			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	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 in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SUSAN A BARRY	(i)	201,914	0	606	10,096	6,146	218,762	0
	(ii)	0	0	0	0	0	0	0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Employer identification number
31-0997017

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	34	8,597,791	FMV AT DATE OF GIFT
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests	X	8	4,904,186	FMV AT DATE OF GIFT
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (BASKETBALL TICKETS)	X	1	14,735	FMV AT DATE OF GIFT
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . **29** 0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	**30a**		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	**31**	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	**32a**	Yes	
b If "Yes," describe in Part II			
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II

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

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	BROKERAGE FIRMS SUCH AS MERRILL LYNCH ARE USED TO SELL PUBLICLY TRADED SECURITIES

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

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Employer identification number
31-0997017

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		A DRAFT OF THE RETURN IS REVIEWED FIRST BY INTERNAL MANAGEMENT AFTER INTERNAL MANAGEMENT HAS REVIEWED THE RETURN AND ANY CHANGES ARE MADE A DRAFT IS PROVIDED TO THE FINANCE COMMITTEE FOR REVIEW AND A COPY IS PROVIDED TO THE ENTIRE BOARD ONCE THE COMMENTS FROM THE BOARD ARE REVIEWED THE FINAL DRAFT OF THE RETURN IS PREPARED AND SIGNED BY THE CHIEF FINANCIAL OFFICER

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST STATEMENT ANNUALLY THESE STATEMENTS ARE REVEIWED BY THE CHIEF FINANCIAL OFFICER

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION HAS A COMPENSATION COMMITTEE THAT REVIEWS FORM 990'S AND COMPENSATION STUDIES TO DETERMINE A FAIR AND REASONABLE COMPENSATION FOR THE OFFICERS AND KEY EMPLOYEES THE PRESIDENT'S AND OFFICERS' COMPENSATION IS THEN APPROVED BY THE COMPENSATION COMMITTEE. COMPENSATION FOR ALL EMPLOYEES IS APPROVED BY THE COMPENSATION COMMITTEE AND BOARD

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
TIME SPENT WITH RELATED ORGANIZATIONS	FORM 990, PART VII	EACH OF THE INDIVIDUALS LISTED BELOW WORKS FOR RELATED ORGANIZATIONS THEIR AVERAGE HOURS WORKED EACH WEEK WITH THE RELATED ORGANIZATION ARE ALSO NOTED SUSAN BARRY - 10 HOURS/WEEK SUSAN NICHOLSON - 10 HOURS/WEEK KATHY JACOBI - 40 HOURS/WEEK

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 30,421,375 TRANSFER TO FOUNDATION FROM PIRTLE AND POOLED INCOME FUND 384,642 INCOME FROM PARTNERSHIP NOT INCLUDED ON FINANCIAL STATEMENTS TOTAL TO FORM 990, PART XI, LINE 5 30,806,017

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR THE COMMUNITY FOUNDATION OF LOUISVILLE IS AUDITED AS PART OF THE COMMUNITY FOUNDATION OF LOUISVILLE COMBINED GROUP THE COMMUNITY FOUNDATION OF LOUISVILLE IS INCLUDED IN THE COMMUNITY FOUNDATION OF LOUISVILLE COMBINED FINANCIAL STATEMENTS THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT OF THE FINANCIAL STATMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR FOR THE COMBINED GROUP

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

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Name of the organization
THE COMMUNITY FOUNDATION OF LOUISVILLE INC

Employer identification number
31-0997017

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY 325 W MAIN STREET SUITE 1110 LOUISVILLE, KY 40202 31-1140889	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING	KY	501(C)(3)	7	COMMUNITY FOUNDATION OF LOUISVILLE INC		No
(2) THE COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY 325 W MAIN STREET SUITE 1110 LOUISVILLE, KY 40202 61-1100993	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING	KY	501(C)(3)	7	COMMUNITY FOUNDATION OF LOUISVILLE INC		No
(3) FELIX E MARTIN JR FOUNDATION INC 325 W MAIN STREET SUITE 1110 LOUISVILLE, KY 40202 26-2193468	TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KY	501(C)(3)	11 TYPE I	COMMUNITY FOUNDATION OF LOUISVILLE INC		No
(4) THE REAL ESTATE ASSET LEGACY FOUNDATION OF KENTUCKY INC 325 W MAIN STREET SUITE 1110 LOUISVILLE, KY 40202 26-2417672	TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KY	501(C)(3)	11 TYPE I	COMMUNITY FOUNDATION OF LOUISVILLE INC		No
(5) LOUISVILLE ORCHESTRA FOUNDATION INC 323 W BROADWAY SUITE 700 LOUISVILLE, KY 40202 20-1546969	TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KY	501(C)(3)	11 TYPE I	N/A		No

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

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

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

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

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" 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

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

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation