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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

AWARDING GRANTS AND SCHOLARSHIPS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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?

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ 1,230,873 including grants of \$ 1,034,208) (Revenue \$ 2,403)

THE ORGANIZATION SERVES THE COUNTY OF CHARLEVOIX, MICHIGAN, THROUGH THE AWARDING OF GRANTS TO OTHER NON-PROFIT ORGANIZATIONS AND SCHOLARSHIPS TO STUDENTS

4b

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

4c

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

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses 1,230,873

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 instructions)? 	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 for which 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 for escrow or custodial account liability, 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 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, 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, line 10? 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	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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 United States? 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 United States? 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 hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b 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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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 as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	Yes	
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	Yes	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

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	14	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	14	
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	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete 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	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did 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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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	MI
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 made these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ROBERT A HANSEN JR 507 WATER STREET EAST JORDAN, MI (231) 536-2440

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 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) BILL ATEN CHAIRMAN	2 00	X		X				0	0	0
(2) VALERIE SNYDER VICE-CHAIRMA	2 00	X		X				0	0	0
(3) FAY KEANE TREASURER	2 00	X		X				0	0	0
(4) DON SPENCER CORPORATE SE	2 00	X		X				0	0	0
(5) HUGH CONKLIN TRUSTEE	1 00	X						0	0	0
(6) MIKE HINKLE TRUSTEE	1 00	X						0	0	0
(7) JIM HOWELL TRUSTEE	1 00	X						0	0	0
(8) JOHN KEMPTON TRUSTEE	1 00	X						0	0	0
(9) DAVE LEUSINK TRUSTEE	1 00	X						0	0	0
(10) BARBARA MALPASS TRUSTEE	1 00	X						0	0	0
(11) LINDA MUELLER TRUSTEE	1 00	X						0	0	0
(12) PAT O'BRIEN TRUSTEE	1 00	X						0	0	0
(13) RACHEL SWISS TRUSTEE	1 00	X						0	0	0
(14) CONNIE WOJAN TRUSTEE	1 00	X						0	0	0
(15) ROBERT HANSEN JR PRESIDENT	40 00			X				88,391	0	0

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								88,391		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization: **1**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	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. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,920,010		
	g	Noncash contributions included in lines 1a-1f \$		822,867		
	h	Total. Add lines 1a-1f		1,920,010		
Program Service Revenue	2a	PROPERTY RENTAL-FOR PROGRAMS	Business Code	2,403	2,403	
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f		2,403		
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		266,564	
4		Income from investment of tax-exempt bond proceeds . .				
5		Royalties				
6a		Gross rents	(i) Real	(ii) Personal		
b		Less rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b		Less cost or other basis and sales expenses	1,686,715			
c		Gain or (loss)	1,291,798			
d		Net gain or (loss)	394,917			
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		2,583,894	2,403		661,481

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).

Check if Schedule O contains a response to any question in this Part IX

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 United States. See Part IV, line 21.	921,335	921,335		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	112,873	112,873		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	88,391	30,937	39,776	17,678
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	45,374	24,956	13,612	6,806
7	Other salaries and wages.	80,825	44,454	24,247	12,124
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	9,773	4,570	3,536	1,667
9	Other employee benefits.	8,904	4,164	3,221	1,519
10	Payroll taxes.	17,071	7,983	6,176	2,912
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	660		660	
c	Accounting.	14,090	7,750	4,227	2,113
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion.	26,306	14,468	7,892	3,946
13	Office expenses.	17,376	9,556	5,213	2,607
14	Information technology.				
15	Royalties.				
16	Occupancy.	16,436	9,040	4,931	2,465
17	Travel.	12,138	6,676	3,641	1,821
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	21,542	11,849	6,462	3,231
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	5,247		5,247	
23	Insurance.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	SUPPLIES	15,565	8,560	4,670	2,335
b	CONSULTING SERVICES	13,551	7,453	4,065	2,033
c	DUES & SUBSCRIPTIONS	7,225	3,974	2,167	1,084
d	WEBSITE	500	275	150	75
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	1,435,182	1,230,873	139,893	64,416
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☐

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			1,964,143	2	2,576,206
	3	Pledges and grants receivable, net			113,623	3	67,262
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Loans and other 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) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			2,836	9	3,612
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	69,267	33,806	10c	28,559
	b	Less accumulated depreciation	10b	40,708			
	11	Investments—publicly traded securities			19,833,875	11	22,444,548
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11			44,585	13	44,585
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			325	15	99,624
	16	Total assets. Add lines 1 through 15 (must equal line 34)			21,993,193	16	25,264,396
Liabilities	17	Accounts payable and accrued expenses			14,186	17	19,499
	18	Grants payable			345,168	18	248,248
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			330,289	21	283,891
	22	Loans and other 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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			1,095,656	25	1,376,532
	26	Total liabilities. Add lines 17 through 25			1,785,299	26	1,928,170
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			159,666	27	152,537
	28	Temporarily restricted net assets			3,171,497	28	5,691,457
	29	Permanently restricted net assets			16,876,731	29	17,492,232
	Organizations that do not follow SFAS 117 (ASC 958), 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			20,207,894	33	23,336,226
	34	Total liabilities and net assets/fund balances			21,993,193	34	25,264,396

Part XI Reconciliation 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	2,583,894
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,435,182
3	Revenue less expenses Subtract line 2 from line 1	3	1,148,712
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,207,894
5	Net unrealized gains (losses) on investments	5	2,039,595
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-59,975
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,336,226

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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization CHARLEVOIX COUNTY COMMUNITY FOUNDATION	Employer identification number 38-3033739
--	--

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 33¹/₃% 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 33¹/₃% 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 - Non-functionally integrated
- e

☐

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

☐

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

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)
- | | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,803,750	1,053,198	898,584	1,725,685	1,920,010	7,401,227
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	1,803,750	1,053,198	898,584	1,725,685	1,920,010	7,401,227
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)						2,425,147
6 Public support. Subtract line 5 from line 4						4,976,080

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	1,803,750	1,053,198	898,584	1,725,685	1,920,010	7,401,227
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	368,472	337,831	461,714	468,798	266,564	1,903,379
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.)	248,838	-292,943	-65,807	583,779	394,917	868,784
11 Total support (Add lines 7 through 10)						10,173,390
12 Gross receipts from related activities, etc. (see instructions)					12	17,372
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 2012 (line 6, column (f) divided by line 11, column (f))	<table><tr><td>14</td><td>48 910 %</td></tr><tr><td>15</td><td>44 390 %</td></tr></table>	14	48 910 %	15	44 390 %
14	48 910 %					
15	44 390 %					
15	Public support percentage for 2011 Schedule A, Part II, line 14					
16a	33 1/3% support test—2012. 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—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐				
17a	10%-facts-and-circumstances test—2012. 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—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐				
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	☐				

Part IIISupport Schedule for Organizations Described in 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. 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—2011. 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.** 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).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization CHARLEVOIX COUNTY COMMUNITY FOUNDATION	Employer identification number 38-3033739
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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	56
2	Aggregate contributions to (during year)	1,188,081
3	Aggregate grants from (during year)	538,084
4	Aggregate value at end of year	5,819,757
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2012

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

3

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

a

☐ Public exhibition

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 XIII

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 XIII and complete the following table

	Amount
1c	330,289
1d	26,220
1e	72,618
1f	283,891

2a

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

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☒

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back	
1a	Beginning of year balance	18,989,704	19,865,356	17,650,131	13,833,157	19,879,097
b	Contributions	778,621	370,476	303,810	395,647	495,560
c	Net investment earnings, gains, and losses	2,669,256	-498,062	2,706,695	3,961,180	-5,574,598
d	Grants or scholarships	425,665	381,997	450,159	246,418	586,956
e	Other expenditures for facilities and programs	384,778	366,069	345,121	293,435	379,946
f	Administrative expenses					
g	End of year balance	21,627,138	18,989,704	19,865,356	17,650,131	13,833,157

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

9 000 %

b

Permanent endowment

91 000 %

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐

☐

4

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

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

Description of property	(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	23,100		3,850	19,250
d Equipment	46,167		36,858	9,309
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				28,559

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

1	Total revenue, gains, and other support per audited financial statements	1	4,623,489
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,039,595
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	2,039,595
3	Subtract line 2e from line 1	3	2,583,894
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 XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	2,583,894

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

1	Total expenses and losses per audited financial statements	1	1,485,157
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 XIII)	2d	49,975
e	Add lines 2a through 2d	2e	49,975
3	Subtract line 2e from line 1	3	1,435,182
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 XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	1,435,182

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
ESCROW LIABILITY ARRANGEMENT EXPLANATION	SCHEDULE D, PAGE 2, PART IV, LINE 2B	THE FOUNDATION HOLDS AND INVESTS FUNDS THAT OTHER 501(C)(3) ORGANIZATIONS HAVE DESIGNATED FOR CAPITAL PROJECTS. THESE AMOUNTS ARE RECORDED AS A CUSTODIAL ACCOUNT LIABILITY.
INTENDED USES FOR ENDOWMENT FUNDS	SCHEDULE D, PAGE 2, PART V, LINE 4	NET INCOME SHALL BE DISTRIBUTED FROM THE FUND FOR THE CHARITABLE PURPOSE OF THE FUND. THE TERM "NET INCOME" MEANS THE AMOUNT AVAILABLE FOR DISTRIBUTION FROM THE FUND UNDER THE FOUNDATION'S SPENDING POLICY IN EFFECT FROM TIME TO TIME. THE PRINCIPAL OF THE FUND SHALL REMAIN INTACT AND NOT BE SUBJECT TO DISTRIBUTION, ABSENT UNUSUAL CIRCUMSTANCES.
EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	DISTRIBUTIONS ON SPLIT INTEREST AGREEMENTS 49,975

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

38-3033739

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

(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
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827,304

SEE ATTACHED
SCHEDUL

[illegible]

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	48
3	Enter total number of other organizations listed in the line 1 table	

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.
Part III can be duplicated 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
(1) EDUCATIONAL INSTITUTIONS	90	112,873			

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	THERE ARE A NUMBER OF CHECK POINTS IN THE LIFE OF A GRANT TO HELP MONITOR THAT THE GRANT WAS USED BY AND ORGANIZATION FOR ITS INTENDED PURPOSE -AFTER THE FOUNDATION APPROVES A GRANT FOR DISTRIBUTION TO AN ORGANIZATION, IT SENDS EACH GRANTEE A GRANT NOTIFICATION LETTER, A GRANT AGREEMENT, A FINANCIAL REPORT FORM AND/OR A FINAL REPORT FORM THE PURPOSE OF THESE FORMS IS TO SPECIFY THE AMOUNT AND PURPOSE OF THE GRANT, AND THE SPECIFIC REPORTING REQUIREMENTS OF THE GRANTEE AT THE END OF THE GRANT PERIOD AS TO HOW THE FUNDS WERE USED -IF THE GRANT IS FOR THE PURCHASE OF A SPECIFIC ITEM, THE FOUNDATION WILL REQUIRE THE GRANTEE PROVIDE A RECEIPT AS PROOF OF PURCHASE THE FOUNDATION STAFF USES THE MEETING OF THE GRANTEES' GOVERNING BOARD AS AN OPPORTUNITY TO PRESENT THE GRANT AWARD CHECK THIS SERVES AS PUBLIC NOTICE AND EXPECTATION OF THE GRANT AND HOW THE FUNDS ARE INTENDED TO BE USED -THE FOUNDATION AND THE GRANTEE DISSEMINATE NEW RELEASES TO THE PRINT AND ELECTRONIC MEDIA ANNOUNCING THE GRANT AND ITS PURPOSE TO THE PUBLIC -FOUNDATION STAFF CONDUCT SITE VISITS TO THE GRANTEE ORGANIZATION TO "SEE" THE GRANT IN ACTION

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization CHARLEVOIX COUNTY COMMUNITY FOUNDATION	Employer identification number 38-3033739
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			Yes	No		Yes	No
Total ▶ \$											

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) LAURA HANSEN	MARRIED TO PRES	45,374	WAGES FOR EMPLOYMENT		No

Part V Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
ADDITIONAL INFORMATION	SCHEDULE L PART V	LAURA HANSEN IS MARRIED TO THE PRESIDENT OF THE FOUNDATION

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

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

Name of the organization
CHARLEVOIX COUNTY COMMUNITY
FOUNDATION

Employer identification number
38-3033739

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 noncash 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	9	727,867	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other	X	1	95,000	
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (_____)				
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement29

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?

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

No

Yes

Yes

Part II

Supplemental Information.

Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS	SCHEDULE M, PAGE 1, PART I, LINE 32B	THE FOUNDATION USES A BROKERAGE FIRM TO SELL PUBLICLY TRADED SECURITIES IT RECEIVES AS NONCASH CONTRIBUTIONS

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

2012

**Open to Public
Inspection**

Name of the organization CHARLEVOIX COUNTY COMMUNITY FOUNDATION	Employer identification number 38-3033739
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Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE PRESIDENT REVIEWS THE COMPLETED FORM 990 FOR COMPATIBILITY WITH THE FINANCIAL AUDIT THE 990 IS INCLUDED AS AN AGENDA ITEM AT THE NEXT JOINT MEETING OF THE EXECUTIVE AND FINANCE COMMITTEES EACH MEMBER OF THE COMMITTEE RECEIVES A COPY IN ADVANCE OF THE MEETING A RECOMMENDATION FOR ACCEPTANCE IS BROUGHT TO THE BOARD OF TRUSTEES WITH COPIES MADE AVAILABLE FOR THE ENTIRE BOARD THE JOINT COMMITTEES, IN THEIR ROLE AS THE AUDIT COMMITTEE, MEET WITH THE AUDITOR TO DISCUSS THE AUDIT, FORM 990, AND RELATED FINANCIAL REPORTS AND PROCESSES

Identifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	EACH TRUSTEE RECEIVES A COPY OF THE CONFLICT OF INTEREST POLICY IN THEIR ORIENTATION MANUAL, WHICH THEY REVIEW WITH THE PRESIDENT. THEY ARE ALSO GIVEN A "TRUSTEE DISCLOSURE STATEMENT" TO COMPLETE AND SIGN. THE DISCLOSURE STATEMENT IDENTIFIES ANY BUSINESS OR AVOCATIONAL INTEREST, OR CHARITABLE OR CIVIC INVOLVEMENT WHICH MIGHT GIVE RISE TO A POSSIBLE CONFLICT OF INTEREST OR DUALITY OF INTEREST WITH THE COMMUNITY FOUNDATION. THIS PROCESS IS REPEATED EVERY YEAR IN JANUARY. THE COMPLETED STATEMENTS ARE KEPT ON FILE IN THE FOUNDATION OFFICE. ALSO ON FILE, ARE COMPLETED CONFLICT OF INTEREST FORMS FOR MEMBERS OF THE YOUTH ADVISORY COMMITTEE, AND SCHOLARSHIP SELECTION COMMITTEE MEMBERS. DURING THE COURSE OF A MEETING, A TRUSTEE DECLARES A CONFLICT OF INTEREST AND ABSTAINS FROM VOTING ON MATTERS THAT PRESENT A POTENTIAL OR PERCEIVED CONFLICT. THEIR ABSTENTION IS NOTED IN THE MINUTES OF THE MEETING.

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE FOUNDATION'S PRESIDENT IS EVALUATED BY THE EXECUTIVE COMMITTEE ACCORDING TO A "COMPENSATION REVIEW PROCESS " USING A COMBINATION OF THE EVALUATION RESULTS AND INFORMATION OBTAINED FROM THE SALARY AND BENEFITS SURVEYS, THE EXECUTIVE COMMITTEE MAKES A COMPENSATION RECOMMENDATION FOR THE PRESIDENT TO THE BOARD OF TRUSTEES, THE PRESIDENT IS NOT PRESENT DURING THE DISCUSSION, NOR DOES HE PARTICIPATE IN THE VOTE

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	THE FOUNDATION ADHERES TO THE "RECOMMENDED BEST PRACTICES IN DETERMINING REASONABLE EXECUTIVE AND STAFF COMPENSATION" AS PUT FORTH BY THE COUNCIL ON FOUNDATIONS GENERALLY, REASONABLE COMPENSATION IS DEFINED AS WHAT SIMILAR PERSONS IN SIMILAR POSITIONS WITH SIMILAR DUTIES AT SIMILAR ORGANIZATIONS ARE PAID TO DETERMINE REASONABLE LEVELS OF COMPENSATION THE FOUNDATION RELIES ON SALARY AND COMPENSATION SURVEYS, AND COMPARISONS WITH SIMILAR ORGANIZATIONS IN RELATIVE GEOGRAPHIC PROXIMITY, SPECIFICALLY, WE USE INFORMATION OBTAINED FROM -THE COUNCIL ON FOUNDATION'S ANNUAL GRANTMAKERS SALARY AND BENEFITS REPORT -THE COUNCIL ON FOUNDATION'S ANNUAL COMPENSATION, SUMMARY FOR THE COUNCIL OF MICHIGAN FOUNDATIONS-COMMUNITY FOUNDATIONS -THE COUNCIL OF MICHIGAN FOUNDATION'S ANNUAL MICHIGAN & OHIO COMMUNITY FOUNDATIONS SALARY SURVEY THE PROCEEDINGS OF ALL COMMITTEE AND BOARD MEETINGS ARE DOCUMENTED IN WRITING AND FILED WITH THE FOUNDATION'S PERMANENT RECORDS THE COMPENSATION DETERMINATION PROCESS AND SALARY AND BENEFITS RESEARCH OCCURS IN THE LAST QUARTER OF THE FISCAL YEAR BOARD APPROVED SALARY AND BENEFIT PAYMENTS BEGIN WITH THE START OF THE NEXT FISCAL YEAR THE PRESIDENT IS RESPONSIBLE FOR EVALUATING AND RECOMMENDING COMPENSATION FOR STAFF FOLLOWING THE SAME PROCESS USED TO DETERMINE THE PRESIDENT'S COMPENSATION THE PRESIDENT AND STAFF ARE THE ONLY EMPLOYEES/OFFICERS OF THE ORGANIZATION THAT RECEIVE COMPENSATION

Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	IT IS THE POLICY AND PRACTICE OF THE FOUNDATION TO COMPLY WITH ALL INTERNAL REVENUE SERVICE LAWS AND REQUIREMENTS FOR PUBLIC DISCLOSURE FOR TAX-EXEMPT ORGANIZATIONS THIS INCLUDES PROVIDING COPIES OF OUR EXEMPTION APPLICATION (FORM 1023), AND THE THREE MOST RECENTLY FILED ANNUAL INFORMATION RETURNS (FORM 990) TO INDIVIDUALS MAKING A REQUEST IN PERSON OR IN WRITING FORM 990 AND A CONSOLIDATED FINANCIAL STATEMENT ARE ALSO AVAILABLE ON THE FOUNDATION'S WEBSITE. THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMETNS ARE AVAILABLE UPON REQUEST TO THE FOUNDATION PRESIDENT

Identifier	Return Reference	Explanation
RECONCILIATION OF CHANGES - OTHER	FORM 990, PART XI, LINE 9	DISTRIBUTIONS ON SPLIT INTEREST AGREEMENTS -49,975

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS EXPLANATION	FORM 990, PART XI, LINE 9	XXAA 10,000

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Charlevoix County Community Foundation

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Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2012
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Adrian College 110 S Madison Street Adrian, MI 49221		501(C)(3)	30,000				for the Veteran Scholarship Fund		
American Express Box 0001 Los Angeles, CA 90096		501(C)(3)	5,602				to purchase clothing for EJPS students		
Beaver Island Cultural Arts Association PO Box 326 Beaver Island, MI 49782	30-0349542	501(C)(3)	5,500				to expand the Baroque on Beaver music festival to include an additional weekend		
Beaver Island Cultural Arts Association PO Box 326 Beaver Island, MI 49782	30-0349542	501(C)(3)	500				for general operations		
Boyne City Public Schools Early Childhood Bldg 321 S Park Street Boyne City, MI 49712		501(C)(3)	1,500				to purchase and refurbish pottery equipment		
Boyne City Public Schools Early Childhood Bldg. 321 S Park Street Boyne City, MI 49712		501(C)(3)	4,428				for equipment for the BCPS machine shop in 2012-2013		
Boyne Falls Public Schools PO Box 356 Boyne Falls, MI 49713		501(C)(3)	5,000				to establish a farm to table program & build a hoop house		
Camp Daggett 03001 Church Road Potoskey, MI 49770	38-1617980	501(C)(3)	5,000				for general operations		
Camp Daggett 03001 Church Road Potoskey, MI 49770	38-1617980	501(C)(3)	3,040				for scholarships for 8 students to attend the summer program		
Charlevoix Area Community Pool 11905 US 31 North Charlevoix, MI 49720	38-3219489	501(C)(3)	7,000				for a hydraulic lift for the pool		

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Charlevoix County Community Foundation

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Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more
 Tax Year 2012
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Charlevoix Area Community Pool 11905 US 31 North Charlevoix, MI 49720	38-3219489	501(C)(3)	500				for general operations		
Charlevoix Area Community Pool 11905 US 31 North Charlevoix, MI 49720	38-3219489	501(C)(3)	14,000				for general operations		
Charlevoix Area Community Pool 11905 US 31 North Charlevoix, MI 49720	38-3219489	501(C)(3)	4,498				for Phase II overhead pool lights		
Charlevoix Area Hospital 14700 Lake Shore Drive Charlevoix, MI 49720		501(C)(3)	1,000				for general operations		
Charlevoix Area Hospital 14700 Lake Shore Drive Charlevoix, MI 49720		501(C)(3)	6,400				for general operations		
Charlevoix Area Hospital Foundation 14700 Lake Shore Dr Charlevoix, MI 49720	75-3078034	501(C)(3)	100				for general operations		
Charlevoix Area Hospital Foundation 14700 Lake Shore Dr Charlevoix, MI 49720	75-3078034	501(C)(3)	4,000				for Circle of Strength breast cancer awareness educational materials in 2012-2013		
Charlevoix Area Hospital Foundation 14700 Lake Shore Dr Charlevoix, MI 49720	75-3078034	501(C)(3)	10,000				towards the principal of the fund		
Charlevoix Area Hospital Foundation 14700 Lake Shore Dr Charlevoix, MI 49720	75-3078034	501(C)(3)	5,000				for unrestricted purposes		

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Charlevoix County Community Foundation

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Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more
 Tax Year 2012
 Region All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Charlevoix Historical Society P O Box 525 Charlevoix, MI 49720	38-2636672	501(C)(3)	5,750				for general operations		
Charlevoix Historical Society P.O. Box 525 Charlevoix, MI 49720	38-2636672	501(C)(3)	1,000				for general operations		
Charlevoix Public Library 220 W. Clinton Street Charlevoix, MI 49720	03-0474720	501(C)(3)	1,000				for general operations, to honor Lynne & Mason Rosenthal, 2012 recipients of the Margaret Duerr Award		
Charlevoix Public Library 220 W Clinton Street Charlevoix, MI 49720	03-0474720	501(C)(3)	2,500				to expand the JATL Big Band Dance Party		
Charlevoix Public Library 220 W Clinton Street Charlevoix, MI 49720	03-0474720	501(C)(3)	2,500				for the Jazz at the Library program		
Charlevoix Public Library 220 W Clinton Street Charlevoix, MI 49720	03-0474720	501(C)(3)	3,000				for the circle & children's gardens at the library		
Charlevoix Public Schools 104 E St. Marys Drive Charlevoix, MI 49720	38-6027952	501(C)(3)	-4,250				for a 11 match to support Perspectives: Understanding through Education community forums		
Charlevoix Public Schools 104 E. St. Marys Drive Charlevoix, MI 49720	38-6027952	501(C)(3)	2,160				for the class trip to the presidential inauguration Jan 2013		
Charlevoix Public Schools 104 E. St. Marys Drive Charlevoix, MI 49720	38-6027952	501(C)(3)	2,000				for the Generous Hearts Fund at CHS		
Charlevoix Public Schools 104 E. St. Marys Drive Charlevoix, MI 49720	38-6027952	501(C)(3)	4,000				for a literacy program for the ES & MS		

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Charlevoix County Community Foundation

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Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2012
 Region. All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponsor	Sponsor's EIN
Charlevoix Public Schools 104 E. St. Marys Drive Charlevoix, MI 49720	38-6027952	501(C)(3)	23,097				for reimbursement for fall 2012 grant awards		
Charlevoix Public Schools 104 E. St. Marys Drive Charlevoix, MI 49720	38-6027952	501(C)(3)	300				for equipment, uniforms, & fees for students in the wrestling program		
Charlevoix Schools Enrichment Foundation PO Box 730 Charlevoix, MI 49720	38-2768057	501(C)(3)	26,651				to reimburse for the spring 2012 grant awards		
Charlevoix Schools Enrichment Foundation PO Box 730 Charlevoix, MI 49720	38-2768057	501(C)(3)	6,100				for general operations		
Christ Episcopal Church PO Box 385 Charlevoix, MI 49720		501(C)(3)	9,000				for five community programs on religious beliefs		
City of Charlevoix 210 State Street Charlevoix, MI 49720	38-6004543	501(C)(3)	5,000				to continue Leadership Charlevoix County		
City of Charlevoix 210 State Street Charlevoix, MI 49720	38-6004543	501(C)(3)	1,700				for 20 scholarships for children to attend Camp McSaub		
City of East Jordan PO Box 499 East Jordan, MI 49727	38-6033590	501(C)(3)	35				to support the playground at Tourist Park, in honor of Geraldine Carrel		
City of East Jordan PO Box 499 East Jordan, MI 49727	38-6033590	501(C)(3)	5,635				for six picnic tables for Memorial Park		
City of East Jordan PO Box 499 East Jordan, MI 49727	38-6033590	501(C)(3)	325				for registration fees to attend an entrepreneurial conference		

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Charlevoix County Community Foundation

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Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more
 Tax Year 2012
 Region: All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Community Foundation for Northeast Michigan 111 Water Street PO Box 495 Alpena, MI 49707	23-7384822	501(C)(3)	10,000				to support the St Helena Lighthouse Endowment Fund		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	5,000				for general operations		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	500				to support the dance scholarship fund		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	1,000				to support the Path to the Future campaign		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	625				for general operations		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	1,000				to renovate and construct an outdoor plaza		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	500				to support the Renaissance Society		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	1,000				for the D'Art for Art 2012 Event		
Crooked Tree Arts Center 461 E Mitchell Street Petoskey, MI 49770	23-7187264	501(C)(3)	2,000				to fund the Beginning Strings Program		
Crooked Tree District Library PO Box 518 2203 Walloon Street Walloon Lake, MI 49796	38-2167002	501(C)(3)	29,100				for general operations		

Grantee 990 - Part 2 Organizations
 Grantees receiving \$5000 or more.
 Tax Year 2012
 Region All Regions

Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Crooked Tree District Library PO Box 518 2203 Walloon Street Walloon Lake, MI 49796	38-2167002	501(C)(3)	1,450				for general operations		
East Jordan Ecumenical Ministerial Association c/o Lighthouse Missionary Church 7824 Rogers Road East Jordan, MI 49727		501(C)(3)	375				for emergency fuel & utility payments for low income residents		
East Jordan Ecumenical Ministerial Association c/o Lighthouse Missionary Church 7824 Rogers Road East Jordan, MI 49727		501(C)(3)	5,000				for various human service needs in 2012-2013		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	2,000				to hire a band for the first day of school 2012		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	10,000				for general operations at the community pool		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	1,825				for college site visits for Shoe Club members		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	2,000				for 2 video surveillance systems for buses at EJPS		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	2,125				for video production equipment for the Shoe Club		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	5,000				for fall 2012 grade level readers for the ES		

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East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	12,000				for the EBLI literacy program training & computer support 2012-2013		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	10,400				for the 2012 agency distribution		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	3,500				for the 2012 agency distribution		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	5,500				for the fall 2012 ES Big Box of Books Family Literacy Program		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	-2				for a bookstore trip for HS students in 2011-2012		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	-31				for student camperships in 2011-2012		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	2,267				for clothing for EJPS students		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	1,508				for the summer school community garden		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	408				for clothing for ES students		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	500				for EJ Middle School Pride activities in 2012-2013		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	1,200				to purchase drug & alcohol assessment kits		

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East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	5,922				for large instruments for the high school band		
East Jordan Public Schools PO Box 399 East Jordan, MI 49727	38-2137029	501(C)(3)	5,000				for registration & hotel fees for the 2013 Chicago Leadership Training Conference		
Ellsworth Community Schools 9467 Park Street Ellsworth, MI 49729	38-6000402	501(C)(3)	21,741				for stage and audio/visual technology upgrades		
First Congregational Church 101 State Street Charlevoix, MI 49720	23-7098809	501(C)(3)	6,000				for the annual stewardship campaign		
First Congregational Church 101 State Street Charlevoix, MI 49720	23-7098809	501(C)(3)	500				for the Hurricane Sandy Relief Fund		
Friends of the Boyne River PO Box 186 Boyne City, MI 49712	38-3422635	501(C)(3)	30,000				for improvements to a nature trail on the Boyne River		
Friends of the Boyne River PO Box 186 Boyne City, MI 49712	38-3422635	501(C)(3)	6,500				for improvements to a nature trail on the Boyne River		
Good Samaritan Family Services PO Box 206 Ellsworth, MI 49729	38-3469219	501(C)(3)	5,000				to purchase cribs, and car & booster seats for the Moms & Tots Center		
Good Samaritan Family Services PO Box 206 Ellsworth, MI 49729	38-3469219	501(C)(3)	5,000				for emergency fuel & utility bill assistance in 2012-2013		
Good Samaritan Family Services PO Box 206 Ellsworth, MI 49729	38-3469219	501(C)(3)	525				for Charlevoix County client services including food pantry purchases, emergency fuel, & utility shutoffs		

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Grand Traverse Regional Community Foundation 250 E. Front St., Suite 310 Traverse City, MI 49684-2552	38-3056434	501(C)(3)	10,000				to add to the endowment of the Serendipity Fund		
Grand Traverse Regional Land Conservancy 3860 N Long Lk. Rd , #D Traverse City, MI 49684	38-2994229	501(C)(3)	5,000				for unrestricted purposes		
Hayes Township 09195 N Old US-31 Charlevoix, MI 49720		501(C)(3)	10,000				for the capital campaign to purchase Camp Seagull		
Health Department of Northwest Michigan 220 W. Garfield Street Charlevoix, MI 49720	30-0168590	501(C)(3)	3,500				for mental health consultations for children ages 0-5		
Health Department of Northwest Michigan 220 W Garfield Street Charlevoix, MI 49720	30-0168590	501(C)(3)	12,500				to develop Safe Route to School action plans		
Health Department of Northwest Michigan 220 W. Garfield Street Charlevoix, MI 49720	30-0168590	501(C)(3)	1,700				for breast cancer education and outreach activities in 2012-2013		
Jordan River Arts Council PO Box 1178 301 Main Street East Jordan, MI 49727	38-2861979	501(C)(3)	1,250				to create a sketchbook library		
Jordan River Arts Council PO Box 1178 301 Main Street East Jordan, MI 49727	38-2861979	501(C)(3)	6,000				for unrestricted purposes		
Jordan River Arts Council PO Box 1178 301 Main Street East Jordan, MI 49727	38-2861979	501(C)(3)	1,490				to repair and repaint the gallery		

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Jordan River Arts Council PO Box 1178 301 Main Street East Jordan, MI 49727	38-2861979	501(C)(3)	675				for the School Bead Project for fifth grade students		
Land Information Access Association 324 Munson Ave Traverse City, MI 49686	38-3135600	501(C)(3)	6,000				for a non-motorized trail marketing initiative		
Little Forks Conservancy 105 Post Street Midland, MI 48640	38-3353122	501(C)(3)	25,000				for the property auction purchase		
Little Traverse Conservancy 3264 Powell Road Harbor Springs, MI 49740	23-7267810	501(C)(3)	10,000				for unrestricted purposes		
Little Traverse Conservancy 3264 Powell Road Harbor Springs, MI 49740	23-7267810	501(C)(3)	30,000				for the Davidson property purchase on Marquette Island		
Little Traverse Conservancy 3264 Powell Road Harbor Springs, MI 49740	23-7267810	501(C)(3)	750				for a nature preserve smart phone app		
Little Traverse Conservancy 3264 Powell Road Harbor Springs, MI 49740	23-7267810	501(C)(3)	130				for unrestricted purposes		
Little Traverse Conservancy 3264 Powell Road Harbor Springs, MI 49740	23-7267810	501(C)(3)	37,500				to apply to the purchase of the VandeCar property on Horton Creek		
Manhattan Theatre Club 311 West 43rd. St , 8th Floor New York, NY 10036	23-7086643	501(C)(3)	5,000				for general operations		
Manna Project 8791 McBride Park Drive Harbor Springs, MI 49740	38-2764533	501(C)(3)	250				for general operations		

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Manna Project 8791 McBride Park Drive Harbor Springs, MI 49740	38-2764533	501(C)(3)	5,000				for supplies for the backpacks for kids program		
Mayo Clinic Siebens Building, Ninth Floor 200 First Street SW Rochester, MN 55905-0001	41-601172	501(C)(3)	10,000				for the President's Strategic Initiative Fund		
McLaren Northern Michigan Foundation 360 Connable Street Potoskey, MI 49770	38-2445611	501(C)(3)	5,000				for unrestricted purposes		
McLaren Northern Michigan Foundation 360 Connable Street Potoskey, MI 49770	38-2445611	501(C)(3)	10,000				towards the principal of the General Endowment Fund		
MSU Extension Charlevoix County 4-H 319B North Lake Street Boyne City, MI 49712	38-6005984	501(C)(3)	1,000				to support the Emmet-Charlevoix market livestock program		
MSU Extension Charlevoix County 4-H 319B North Lake Street Boyne City, MI 49712	38-6005984	501(C)(3)	5,000				to provide scholarships for low income youth		
MSU Extension Charlevoix County 4-H 319B North Lake Street Boyne City, MI 49712	38-6005984	501(C)(3)	750				for general operations		
Nature Conservancy 601 South Figueroa St Suite 1425 Los Angeles, CA 90017		501(C)(3)	10,000				Environmental		
Northern Lakes Economic Alliance 1313 Boyne Avenue PO Box 8 Boyne City, MI 49712	38-2616982	501(C)(3)	5,000				for a East Jordan business marketing program		

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Northern Lakes Economic Alliance 1313 Boyne Avenue PO Box 8 Boyne City, MI 49712	38-2616982	501(C)(3)	3,060				for an economic gardening program		
Petoskey-Harbor Springs Area Community Foundation 616 Petoskey Street, Suite 203 Petoskey, MI 49770	38-3032185	501(C)(3)	5,000				for the Jerolene & Lewis Brown Charitable Youth Fund		
Planned Parenthood/W&N MI 425 Cherry Street SE Grand Rapids, MI 49503	38-1782520	501(C)(3)	5,442				for a sexual education program		
Planned Parenthood/W&N MI 425 Cherry Street SE Grand Rapids, MI 49503	38-1782520	501(C)(3)	14,500				for access to reproductive health care for low income women		
Planned Parenthood/W&N MI 425 Cherry Street SE Grand Rapids, MI 49503	38-1782520	501(C)(3)	3,525				for general operations		
Planned Parenthood/W&N MI 425 Cherry Street SE Grand Rapids, MI 49503	38-1782520	501(C)(3)	3,000				for general operations		
Preservation Association of Beaver Island PO Box 494 Beaver Island, MI 49782	38-3192993	501(C)(3)	25,000				for the BI Community Center capital campaign		
Preservation Association of Beaver Island PO Box 494 Beaver Island, MI 49782	38-3192993	501(C)(3)	20,000				for the BI Community Center capital campaign		
Preservation Association of Beaver Island PO Box 494 Beaver Island, MI 49782	38-3192993	501(C)(3)	5,000				for the capital campaign for the community center		

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Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	3,000				to support the Blurred Boundries program		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	6,000				for unrestricted purposes		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	2,000				to support the 2nd Saturday program		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	1,100				for general operations		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	4,000				for the GUT-SEE girls program		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	80				for four 2012 student scholarships		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	500				for program reimbursement for Feb 2012		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	1,500				for general operations		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	5,000				for construction of the Evolving Technologies Building		
Raven Hill Discovery Center 04737 Fuller Road East Jordan, MI 49727	38-3032707	501(C)(3)	5,000				for a career program for ES & MS students		
San Diego Social Venture Partners 12555 High Bluff Drive,		501(C)(3)	5,000				to support partner membership efforts		

Suite 180
San Diego, CA 92130

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St Paul's Episcopal Church 401 Duval Street PO Box 1014 Key West, FL 33040		501(C)(3)	9,000				for the stained glass window restoration project		
The Community Foundation Serving Boulder County 1123 Spruce Street Boulder, CO 80302	84-1171836	501(C)(3)	10,000				to add to grantmaking of the Serendipity Fund		
Tip of the Mitt Watershed Council The Freshwater Center 426 Bay Street Petoskey, MI 49770	38-2361745	501(C)(3)	300				for general operations		
Tip of the Mitt Watershed Council The Freshwater Center 426 Bay Street Petoskey, MI 49770	38-2361745	501(C)(3)	100				for unrestricted purposes		
Tip of the Mitt Watershed Council The Freshwater Center 426 Bay Street Petoskey, MI 49770	38-2361745	501(C)(3)	7,000				to conduct a Lake Charlevoix shoreline survey		
Tip of the Mitt Watershed Council The Freshwater Center 426 Bay Street Petoskey, MI 49770	38-2361745	501(C)(3)	955				for general operations		
Tip of the Mitt Watershed Council The Freshwater Center 426 Bay Street Petoskey, MI 49770	38-2361745	501(C)(3)	4,500				to produce 10 educational environmental videos		
University Musical Society Burton Memorial Tower 881 North University Avenue	38-1545881	501(C)(3)	5,000				for general operations		

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Walloon Lake Trust and Conservancy PO Box 621 Petoskey, MI 49770	38-3608004	501(C)(3)	2,000				for interpretive signage at the Postle Farm Preserve		
Walloon Lake Trust and Conservancy PO Box 621 Petoskey, MI 49770	38-3608004	501(C)(3)	19,870				for general operations		
Women's Resource Center 423 Porter Street Petoskey, MI 49770	38-2302164	501(C)(3)	500				for general operations		
Women's Resource Center 423 Porter Street Petoskey, MI 49770	38-2302164	501(C)(3)	8,000				for educational scholarships for low income women		
Women's Resource Center 423 Porter Street Petoskey, MI 49770	38-2302164	501(C)(3)	9,368				to add a drop off station to the Goldmine North resale shop		
Totals			827,304	000					