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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2012

Open to Public Inspection

For calendar year 2012, or tax year beginning 11-01-2012 , and ending 10-31-2013

Name of foundation NORTHERN OHIO GOLF CHARITIES FOUNDATION INC		A Employer identification number 34-1712857	
Number and street (or P O box number if mail is not delivered to street address) 440 EAST WARNER ROAD		B Telephone number (see instructions) (330) 644-2299	
City or town, state, and ZIP code AKRON, OH 44319		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ☒ \$ 364,460		J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,028,075			
	2 Check ☒ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	930	930	930	
	4 Dividends and interest from securities.				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV , line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	 83	0	83	
	12 Total. Add lines 1 through 11	1,029,088	930	1,013	
	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	 150	0	0	0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	 26,011	666	0	24,916
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	26,161	666	0	24,916
	25 Contributions, gifts, grants paid	962,712			962,712
	26 Total expenses and disbursements. Add lines 24 and 25	988,873	666	0	987,628
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	40,215			
	b Net investment income (if negative, enter -0-)		264		
	c Adjusted net income (if negative, enter -0-)			1,013	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	374,708	364,401	364,401
	2	Savings and temporary cash investments	60	59	59
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	374,768	364,460	364,460	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable	332		
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)	291,986	241,795	
	23	Total liabilities (add lines 17 through 22)	292,318	241,795	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	82,450	122,665	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see page 17 of the instructions)	82,450	122,665	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	374,768	364,460	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	82,450
2	Enter amount from Part I, line 27a	2	40,215
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	122,665
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	122,665

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	}	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	801,489	305,396	2 624425
2010	770,355	449,507	1 713778
2009	718,134	490,199	1 464985
2008	894,673	452,118	1 978848
2007	970,839	551,556	1 760182
2	Total of line 1, column (d).		2 9 542218
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		3 1 908444
4	Enter the net value of noncharitable-use assets for 2012 from Part X, line 5.		4 388,567
5	Multiply line 4 by line 3.		5 741,558
6	Enter 1% of net investment income (1% of Part I, line 27b).		6 3
7	Add lines 5 and 6.		7 741,561
8	Enter qualifying distributions from Part XII, line 4.		8 987,628
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions			

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1			
		Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b		1	3
c		All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3		Add lines 1 and 2.		3	3
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	3
6		Credits/Payments			
a		2012 estimated tax payments and 2011 overpayment credited to 2012	6a	36	
b		Exempt foreign organizations—tax withheld at source	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld	6d		
7		Total credits and payments Add lines 6a through 6d.		7	36
8		Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	33
11		Enter the amount of line 10 to be Credited to 2013 estimated tax ☒ 33	Refunded ☐	11	0

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?			No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?.	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☒ \$ 0 (2) On foundation managers ☒ \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☒ \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ☒ OH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ►WWW NOGCF ORG				
14	The books are in care of ►GLENDA BUCHANAN	Telephone no ►(330) 644-2299		
	Located at ►440 EAST WARNER ROAD AKRON OH	ZIP +4 ►44319		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ► ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ►	15		
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No
See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country ►				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here. ► ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? ☐ Yes ☒ No			
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.</i>)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions).

Yes No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total

number of other employees paid over \$50,000.

0

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 AKRON CANTON REGIONAL FOODBANK	44,000
2 CHILDREN'S HOSPITAL WOMEN'S BOARD	50,839
3 RONALD MCDONALD HOUSE CHARITIES OF NORTHEAST OHIO	47,858
4 THE FIRST TEE OF AKRON	75,000

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	394,484
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	394,484
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	394,484
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	5,917
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	388,567
6	Minimum investment return. Enter 5% of line 5.	6	19,428

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2012 from Part VI, line 5.	2a	
b	Income tax for 2012 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	987,628
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	987,628
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	3
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	987,625
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2012				
a From 2007.				
b From 2008.				
c From 2009.				
d From 2010.				
e From 2011.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ _____				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2012 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9				
a Excess from 2008. . . .				
b Excess from 2009. . . .				
c Excess from 2010. . . .				
d Excess from 2011. . . .				
e Excess from 2012. . . .				

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling.

2008-11-20

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2012	(b) 2011	(c) 2010	(d) 2009	
		1,013	1,362	1,976	4,016	8,367
b	85% of line 2a	861	1,158	1,680	3,414	7,112
c	Qualifying distributions from Part XII, line 4 for each year listed.	987,628	801,503	770,355	718,134	3,277,620
d	Amounts included in line 2c not used directly for active conduct of exempt activities.	0	0	0	0	0
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.	987,628	801,503	770,355	718,134	3,277,620
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	12,952	10,180	14,983	16,340	54,455
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or e-mail of the person to whom applications should be addressed

GLENDABUCHANAN
440 EAST WARNER ROAD
AKRON, OH 44319
(330) 644-2299

b

The form in which applications should be submitted and information and materials they should include

APPLICATION FORMS AVAILABLE UPON REQUEST FROM THE FOUNDATION

c

Any submission deadlines

REQUEST ACCEPTED ANNUALLY FROM JULY TO SEPTEMBER

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

LIMITED TO 501(C)(3) ORGANIZATIONS IN NORTHEAST OHIO

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	962,712
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments			14	930	
4	Dividends and interest from securities.					
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory.					
11	Other revenue a MISCELLANEOUS INCOME			01	83	
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e).		0		1,013	0
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13		1,013

[illegible]

1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash.	1a(1)		No
	(2) Other assets.	1a(2)		No
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
	(3) Rental of facilities, equipment, or other assets.	1b(3)		No
	(4) Reimbursement arrangements.	1b(4)		No
	(5) Loans or loan guarantees.	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

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

*****	2014-09-08	*****	May the IRS discuss this return with the preparer shown below (see instr.)? ☒ Yes ☐ No
Signature of officer or trustee	Date	Title	

May the IRS discuss this return with the preparer shown below (see instr)? ☒ **Yes** ☐ **No**

**Paid
Preparer
Use
Only**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☒	PTIN P00050877
	LAURA B CULP	LAURA B CULP			
	Firm's name ☐	BROCKMAN COATS GEDELIAN & CO 1735 MERRIMAN ROAD		Firm's EIN ☐	34-1526704
	Firm's address ☐	AKRON, OH 443139007		Phone no	(330) 864-6661

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHUCK ABRAHAM	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
BERNIE ANTONINO	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
GINI PAIGE	PRESIDENT 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
RICK BURKE	TREASURER 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
LEE DICOLA	VICE-PRESIDENT 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
BARBARA DIETERICH	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
LEONARD FOSTER	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
CONNIE HESKE	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
KAREN KEASLING	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
JOYCE LAGIOS	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
EMILY PETRARCA	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
CHERYL SCHLOSSER	SECRETARY 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				
PAM WILLIAMS	TRUSTEE 0 50	0	0	0
440 EAST WARNER ROAD AKRON, OH 44319				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AKRON REGIONAL DEVELOPMENT BOARD ONE CASCADE PLAZA 17TH FLOOR AKRON,OH 44308	NA	501 (C)(3)	EDUCATION FUND	15,000
AKRON ZOOLOGICAL PARK 500 EDGEWOOD AVE AKRON,OH 44307	NA	501 (C)(3)	GRIZZLY RIDGE EXHIBIT	10,000
BEACON JOURNAL CHARITY FUND 333 S MAIN STREET SUITE 319 AKRON,OH 44308	NA	501 (C)(3)	ORTHODONTIC TREATMENT AND EYE EXAMS FOR KIDS	35,000
CHILDREN'S HOSPITAL WOMEN'S BOARD ONE PERKINS SQUARE AKRON,OH 44308	NA	501 (C)(3)	IN-PATIENT REHAB UNIT	40,000
INTERVAL BROTHERHOOD HOME 3445 S MAIN STRET AKRON,OH 44319	NA	501 (C)(3)	CHARITABLE	15,000
METRO PARKS SERVING SUMMIT COUNTY 975 TREATY LINE ROAD AKRON,OH 443035898	NA	501 (C)(3)	CHARITABLE	12,500
RONALD MCDONALD HOUSE CHARITIES OF NORTHEASTERN OHIO 6611 ROCKSIDE ROAD SUITE 105 INDEPENDENCE,OH 44131	NA	501 (C)(3)	CHARITABLE	25,000
THE FIRST TEE OF AKRON 2000 S HAWKINS AVENUE AKRON,OH 44314	NA	501 (C)(3)	CHARITABLE	75,000
THE FIRST TEE OF CANTON 2525 25TH STREET NE CANTON,OH 44705	NA	501 (C)(3)	CORRECT DRAINAGE PROBLEMS	25,000
THE FIRST TEE OF CLEVELAND 3841 WASHINGTON PARK BLVD NEWBURGH HEIGHTS,OH 44105	NA	501 (C)(3)	PROGRAMMING IN SCHOOLS AND COMMUNITY	25,000
UNIVERSITY HOSPITALS-RAINBOW BABIES & CHILDREN'S HOSPITAL 11100 EUCLID AVENUE CLEVELAND,OH 44106	NA	501 (C)(3)	DRIVING PROGRAM	25,000
ADAPTIVE SPORTS PROGRAM OF OHIO 2829 CLEVELAND ROAD SUITE B WOOSTER,OH 44691	NA	501 (C)(3)	ADAPTIVE EQUIPMENT FOR DISABLED PERSONS	8,098
AKRON CANTON REGIONAL FOODBANK 350 OPPORTUNITY PARKWAY AKRON,OH 44307	NA	501 (C)(3)	SEMI-TRACTOR	44,000
AKRON CIVIC THEATRE 182 SOUTH MAIN STREET AKRON,OH 44308	NA	501 (C)(3)	FLAT SCREEN VIDEO SYSTEM	25,873
AKRON MARATHON CHARITABLE CORPORATION 453 SOUTH HIGH STREET SUITE 301 AKRON,OH 44311	NA	501 (C)(3)	ENHANCED SIGNAGE	9,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AKRON SYMPHONY ORCHESTRA 92 NORTH MAIN STREET AKRON, OH 44308	NA	501 (C)(3)	SERVERS, COMPUTERS, AND SOFTWARE	15,400
AMERICAN RED CROSS OF SUMMIT & PORTAGE COUNTIES 501 WEST MARKET STREET AKRON, OH 44321	NA	501 (C)(3)	TO HELP PURCHASE ONE CAR AND ONE VAN	16,938
BATTERED WOMEN'S SHELTER 759 WEST MARKET STREET AKRON, OH 44303	NA	501 (C)(3)	TO HELP RENOVATE BOARD ROOM	20,000
BOY SCOUTS OF AMERICA GREAT TRAIL COUNCIL 1601 SOUTH MAIN STREET AKRON, OH 44301	NA	501 (C)(3)	TO HELP PURCHASE TENTS	7,500
BOYS AND GIRLS CLUBS OF CLEVELAND 6114 BROADWAY AVENUE CLEVELAND, OH 44127	NA	501 (C)(3)	TO HELP PURCHASE A SCHOOL BUS	27,500
BOYS AND GIRLS CLUBS OF THE WESTERN RESERVE 889 JONATHON AVENUE AKRON, OH 44306	NA	501 (C)(3)	TO HELP PURCHASE A VEHICLE	32,500
BROKEN CHAINS JAIL AND PRISON MINISTRY 2233 25TH STREET SW AKRON, OH 44314	NA	501 (C)(3)	TO HELP PURCHASE A VEHICLE	16,750
CATHOLIC CHARITIES COMMUNITY SERVICES OF SUMMIT COUNTY 812 BIRUTA STREET AKRON, OH 44307	NA	501 (C)(3)	TO HELP PURCHASE A BUS	12,000
CHOICES A COMMUNITY SOCIAL CENTER 320 EAST SOUTH STREET AKRON, OH 44311	NA	501 (C)(3)	SEATING	1,450
THE CITY MISSION 5310 CARNEGIE AVENUE CLEVELAND, OH 44103	NA	501 (C)(3)	CONVECTION OVEN	12,000
CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVENUE CLEVELAND, OH 44195	NA	501 (C)(3)	TO HELP PURCHASE A VAN	27,232
CLEVELAND KIDS IN NEED RESOURCE CENTER 3631 PERKINS AVENUE CLEVELAND, OH 44114	NA	501 (C)(3)	TO HELP PURCHASE A FORKLIFT	13,000
COMMUNITY OUTREACH RESOURCES EXCHANGE 2900 STATE ROAD UNIT 3 PO BOX 1192 CUYAHOGA FALLS, OH 44223	NA	501 (C)(3)	TO HELP PURCHASE A TRUCK	25,000
COMMUNITY PREGNANCY CENTER 1058 WOOSTER ROAD WEST BARBERTON, OH 44203	NA	501 (C)(3)	CRIBS AND MATTRESSES	11,000
DOMESTIC VIOLENCE AND CHILD ADVOCACY CENTER PO BOX 5466 CLEVELAND, OH 44101	NA	501 (C)(3)	COMMPUTERS AND MONITORS	6,190

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
EARS TO YOU INC PO BOX 190 HINCKLEY,OH 44233	NA	501 (C)(3)	EARRINGS	6,000
ELVES AND MORE NORTHEAST OHIO PO BOX 95 CUYAHOGA FALLS,OH 44222	NA	501 (C)(3)	BICYCLES	10,000
FATHERS AND SONS OF NORTHEAST OHIO 19 NORTH HIGH STREET AKRON,OH 44308	NA	501 (C)(3)	VAN	17,500
HABITAT FOR HUMANITY OF SUMMIT COUNTY INC 2301 ROMING ROAD AKRON,OH 44320	NA	501 (C)(3)	TRUCK	25,000
MALACHI HOUSE INC 2810 CLINTON AVENUE CLEVELAND,OH 44113	NA	501 (C)(3)	ICE MACHINE	5,000
MATURE SERVICES INC 415 SOUTH PORTAGE PATH AKRON,OH 44320	NA	501 (C)(3)	DELIVERY TRUCK	39,982
NORTH COAST COMMUNITY HOMES INC 14221 BROADWAY AVENUE CLEVELAND,OH 44125	NA	501 (C)(3)	CONSTRUCT STAIRWAY	7,500
NORTH COAST HEALTH MINISTRY 16110 DETROIT AVENUE LAKEWOOD,OH 44107	NA	501 (C)(3)	REPLACE FLOOR	5,400
OHIO VETERNS' MEMORIAL PARK 8005 CLEVELAND-MASSILLON ROAD CLINTON,OH 44216	NA	501 (C)(3)	ASPHALT DRIVEWAY	19,858
OPEN-M 941 PRINCETON STREET AKRON,OH 44311	NA	501 (C)(3)	VAN	25,000
REGINA HEALTH CENTER 5232 BROADVIEW ROAD RICHFIELD,OH 44286	NA	501 (C)(3)	FURNISHINGS	8,000
ROTARY CAMP FOR CHILDREN WITH SPECIAL NEEDS 4460 REX LAKE DRIVE AKRON,OH 44319	NA	501 (C)(3)	FURNISHINGS	27,110
SALVATION ARMY 190 SOUTH MAPLE STREET AKRON,OH 44302	NA	501 (C)(3)	RENOVATION AT EMERGENCY SHELTER	12,000
SHELTER CARE INC 32 SOUTH AVENUE TALLMADGE,OH 44278	NA	501 (C)(3)	VAN	24,784
STEWART'S CARING PLACE 2955 WEST MARKET STREET SUITE R AKRON,OH 44333	NA	501 (C)(3)	TECHNOLOGY EQUIPMENT	8,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SUSAN G KOMEN BREAST CANCER FOUNDATION OF NEO 26210 EMERY ROAD SUITE 307 CLEVELAND, OH 44128	NA	501 (C)(3)	PHONE SYSTEM	6,500
VICTIM ASSISTANCE PROGRAM INC 150 FURNANCE STREET AKRON, OH 44314	NA	501 (C)(3)	BOILER AND ROOF	25,000
VICTORY GALLOP INC PO BOX 551 BATH, OH 44210	NA	501 (C)(3)	WINDOWS	5,000
YOUTH CHALLENGE 800 SHARON DRIVE WESTLAKE, OH 44145	NA	501 (C)(3)	EQUIPMENT FOR PROGRAM	9,450
CHILDREN'S HOSPITAL WOMEN'S BOARD ONE PERKINS SQUARE AKRON, OH 44308	NA	501 (C)(3)	BIRDIES FOR CHARITY CONTRIBUTION	10,839
RONALD MCDONALD HOUSE CHARITIES OF NORTHEASTERN OHIO 6611 ROCKSIDE ROAD SUITE 105 INDEPENDENCE, OH 44131	NA	501 (C)(3)	50/50 RAFFLE CONTRIBUTIONS	22,858
FAMILY PROMISE OF SUMMIT COUNTY 77 WEST MILLER AVENUE AKRON, OH 44301	NA	501 (C)(3)	GRANT AWARD	1,000
RONALD MCDONALD HOUSE OF AKRON 245 LOCUST STREET AKRON, OH 44302	NA	501 (C)(3)	MEDIA DAY SPONSOR	3,500
RONALD MCDONALD HOUSE OF CLEVELAND 10415 EUCLID AVENUE CLEVELAND, OH 44106	NA	501 (C)(3)	MEDIA DAY SPONSOR	3,500
Total  3a				962,712

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2012

Name of the organization NORTHERN OHIO GOLF CHARITIES FOUNDATION INC	Employer identification number 34-1712857
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization NORTHERN OHIO GOLF CHARITIES FOUNDATION INC	Employer identification number 34-1712857
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Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	NORTHERN OHIO GOLF CHARITIES INC 440 E WARNER ROAD AKRON, OH 44319	\$ 925,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
 		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

Name of organization NORTHERN OHIO GOLF CHARITIES FOUNDATION INC	Employer identification number 34-1712857
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Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization NORTHERN OHIO GOLF CHARITIES FOUNDATION INC	Employer identification number 34-1712857
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Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions) ▶ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
—			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
—			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
—			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
—			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee

TY 2012 Other Expenses Schedule**Name:** NORTHERN OHIO GOLF CHARITIES FOUNDATION INC**EIN:** 34-1712857

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS EXPENSES	429	0	0	0
FUNDRAISING EXPENSES	24,916	0	0	24,916
BANK SERVICE CHARGES	666	666	0	0

TY 2012 Other Income Schedule

Name: NORTHERN OHIO GOLF CHARITIES FOUNDATION INC

EIN: 34-1712857

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS INCOME	83		83

TY 2012 Other Liabilities Schedule

Name: NORTHERN OHIO GOLF CHARITIES FOUNDATION INC

EIN: 34-1712857

Description	Beginning of Year - Book Value	End of Year - Book Value
AFFILIATE PAYABLE	291,986	241,795

TY 2012 Taxes Schedule

Name: NORTHERN OHIO GOLF CHARITIES FOUNDATION INC

EIN: 34-1712857

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER TAXES	150	0	0	0