See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public.
► Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 7/01 , 2013, and ending 6/30 , 2014

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

C
COMMUNITY FOUNDATION OF CENTRAL GA, INC.
277 MARTIN LUTHER KING, JR BLVD #303
MACON, GA 31201-7917

D Employer Identification Number
58-2053465

E Telephone number
478-750-9338

G Gross receipts $ 51,939,796.

F Name and address of principal officer KATHRYN H DENNIS
SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No
H(b) Are all subordinates included? [ ] Yes [ ] No
If 'No,' attach a list (see instructions)

I Tax-exempt status [X] 501(c)(3) [ ] 501(c) ( )◄ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ► WWW.CFCGA.ORG

H(c) Group exemption number ►

K Form of organization [X] Corporation [ ] Trust [ ] Association [ ] Other ► L Year of formation 1993 M State of legal domicile GA

Part I Summary

1 Briefly describe the organization's mission or most significant activities TO ENHANCE THE QUALITY OF LIFE FOR THE PEOPLE OF CENTRAL GEORGIA.

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	27
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	5
6	Total number of volunteers (estimate if necessary)	6	26
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	6,014,739.	21,686,331.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,034,871.	6,622,909.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-21,515.	-50,448.
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,028,095.	28,258,792.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,340,513.	5,706,362.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	476,376.	491,120.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ► 216,922.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	757,265.	813,373.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	5,574,154.	7,010,855.
19	Revenue less expenses Subtract line 18 from line 12	2,453,941.	21,247,937.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	69,296,540.	107,950,009.
21	Total liabilities (Part X, line 26)	10,097,431.	25,549,344.
22	Net assets or fund balances Subtract line 21 from line 20	59,199,109.	82,400,665.

Part II Signature Block

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

Sign Here

► Signature of officer — Date 11/21/14

► KATHRYN H. DENNIS — PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
JAMES H. WANSLEY	James H. Wansley	11/13/14		P00159914

Firm's name ► BUTLER WILLIAMS & WYCHE, LLP
Firm's address ► 915 HILL PARK, MACON, GA 31201
Firm's EIN ► 58-0653763
Phone no (478) 742-3676

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

BAA For Paperwork Reduction Act Notice, see the separate instructions. TEEA0113L 11/08/13 Form **990** (2013)

917 12

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission

TO ENHANCE THE QUALITY OF LIFE FOR THE PEOPLE OF CENTRAL GEORGIA.

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

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

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

If 'Yes,' describe these changes on Schedule O

4 Describe the 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses $ 6,012,542. including grants of $ 5,706,362.) (Revenue $ _____)

WE ARE A COMMUNITY FOUNDATION,OFFERING OUR DONORS THE OPPORTUNITY TO CREATE A LASTING LEGACY BY ESTABLISHING THEIR OWN CHARITABLE FUNDS AND TO SUPPORT THE CAUSES IN WHICH THEY BELIEVE. OUR ASSETS ARE ADMINISTERED EXCLUSIVELY FOR CHARITABLE PURPOSES,PRIMARILY FOR THE BENEFIT OF THE TWENTY COUNTIES COMPRISING THE CENTRAL GEORGIA REGION. WE SUPPORT AREA NON-PROFITS THROUGH OUR COMMUNITY GRANT PROGRAM AND AREA STUDENTS THROUGH OUR SCHOLARSHIP PROGRAMS.

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 ► 6,012,542.

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	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
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		X
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		X
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		X
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	X	
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
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		X
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	X	
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	X	
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		X
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		X
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	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11e	X	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI, and XII*	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	16		X
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		X
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	X	
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		X
20a	Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H*	20		X
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)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III*	22	X	
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? *If 'Yes,' complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		X
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? *If 'Yes,' complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? *If 'Yes,' complete Schedule R, Part I*	33	X	
34	Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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)? *If 'Yes,' complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	37		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 18		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X
b	If 'Yes' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O*	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If 'Yes,' enter the name of the foreign country ►			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	X	
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	**Section 501(c)(7) organizations.** Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	**Section 501(c)(12) organizations.** Enter			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b		
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c	Enter the amount of reserves on hand	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*	14b		

Part VI **Governance, Management and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI [X]

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. 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	1a 27		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 26		
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X

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	X	
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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O			
12a	Did the organization have a written conflict of interest policy? *If 'No,' go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* SEE SCHEDULE O	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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 SEE SCHEDULE O	15a	X	
b	Other officers of key employees of the organization SEE SCHEDULE O	15b	X	
	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		X
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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

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

[X] Own website [X] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► HAZLE HAMILTON 277 MLK JR BLVD STE 303 MACON GA 31201 478-750-9338

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a 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, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (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) CAMILLE HOPE	2									
BOARD MEMBER	0	X		X				0.	0.	0.
(2) JULIA G BALDWIN	0.5									
BOARD MEMBER	0	X						0.	0.	0.
(3) MALCOLM S BURGESS, JR	2									
BOARD MEMBER	0	X						0.	0.	0.
(4) J MARC ALBERTSON	0.5									
BOARD MEMBER	0	X						0.	0.	0.
(5) BILLY PITTS	1									
BOARD MEMBER	0	X						0.	0.	0.
(6) DAVE CARTY	1									
BOARD MEMBER	0	X						0.	0.	0.
(7) RONNIE D ROLLINS	1									
BOARD MEMBER	0	X						0.	0.	0.
(8) JACQUELINE G SCOTT	1									
BOARD MEMBER	0	X						0.	0.	0.
(9) ALBERT P REICHERT JR	1									
BOARD MEMBER	0	X						0.	0.	0.
(10) W JOHN O'SHAUGHNESSEY,	1									
BOARD MEMBER	0	X						0.	0.	0.
(11) ELEANOR A LANE	0									
BOARD MEMBER	0	X						0.	0.	0.
(12) RUTH A KNOX	1									
BOARD MEMBER	0	X						0.	0.	0.
(13) F TREDWAY SHURLING	2									
BOARD MEMBER	0	X						0.	0.	0.
(14) PATRICIA W BASS	1									
SECRETARY	0	X		X				0.	0.	0.

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

(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			
(15) DONALD J CORNETT, SR	4									
TREASURER	0	X		X				0.	0.	0.
(16) J JOSEPH EDWARDS, SR	1									
BOARD MEMBER	0	X						0.	0.	0.
(17) NEAL L TALTON	1									
BOARD MEMBER	0	X						0.	0.	0.
(18) BEVERLY BLAKE	1									
BOARD MEMBER	0	X						0.	0.	0.
(19) TIENA FLETCHER	1									
BOARD MEMBER	0	X						0.	0.	0.
(20) JAMES A MANLEY, III	1									
BOARD MEMBER	0	X						0.	0.	0.
(21) CHRIS R SHERIDAN, JR	1									
BOARD MEMBER	0	X						0.	0.	0.
(22) G BOONE SMITH, III	1									
BOARD MEMBER	0	X						0.	0.	0.
(23) SCOTT W SPIVEY	1									
BOARD MEMBER	0	X						0.	0.	0.
(24) KATHRYN H DENNIS	40									
PRES & BD MEMB	0	X		X				147,092.	0.	19,999.
(25) CHARLOTTE B BOGLE	2									
BOARD MEMBER	0	X						0.	0.	0.
1 b Sub-total							►	147,092.	0.	19,999.
c Total from continuation sheets to Part VII, Section A							►	103,832.	0.	19,884.
d Total (add lines 1b and 1c)							►	250,924.	0.	39,883.

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 ► 2

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes' complete Schedule J for such individual*	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*		X

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) Name and business address	(B) Description of services	(C) Compensation
NONE ,		

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 ► 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	16,960.			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	21,669,371.			
	g Noncash contributions included in lines 1a-1f	$	1,504,879.			
	h **Total.** Add lines 1a-1f		21,686,331.			
PROGRAM SERVICE REVENUE		Business Code				
	2a NONE					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f					
	3 Investment income (including dividends, interest and other similar amounts)		2,334,598.			2,334,598.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	27907167.				
	b Less cost or other basis and sales expenses	23618856.				
	c Gain or (loss)	4,288,311.				
	d Net gain or (loss)		4,288,311.			4,288,311.
OTHER REVENUE	8a Gross income from fundraising events (not including $ 16,960. of contributions reported on line 1c) See Part IV, line 18	a 11,700.				
	b Less direct expenses	b 62,148.				
	c Net income or (loss) from fundraising events		-50,448.			-50,448.
	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		28,258,792.	0.	0.	6,572,461.

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 or note to any line 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	5,471,224.	5,471,224.		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	235,138.	235,138.		
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	259,500.	63,700.	113,700.	82,100.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	150,813.	84,702.	44,852.	21,259.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	32,906.	11,901.	12,716.	8,289.
9 Other employee benefits	19,415.	8,348.	7,572.	3,495.
10 Payroll taxes	28,486.	10,303.	11,007.	7,176.
11 Fees for services (non-employees)				
a Management				
b Legal	15,372.	6,610.	5,995.	2,767.
c Accounting	24,622.	10,588.	9,602.	4,432.
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	481,323.		481,323.	
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	70,968.	30,517.	27,677.	12,774.
12 Advertising and promotion				
13 Office expenses	9,090.	3,852.	3,494.	1,744.
14 Information technology	28,178.	12,117.	10,989.	5,072.
15 Royalties				
16 Occupancy	22,700.	9,761.	8,853.	4,086.
17 Travel	15,924.	6,847.	6,211.	2,866.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,528.	1,947.	1,766.	815.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,981.	6,872.	6,232.	2,877.
23 Insurance	9,654.	541.	8,736.	377.
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 COMMUNICATIONS	61,473.	25,555.		35,918.
b DUES & PUBLICATIONS	16,814.	7,230.	6,558.	3,026.
c DONOR DEVELOPMENT	15,243.			15,243.
d PROPERTY TAX	9,095.		9,095.	
e All other expenses	12,408.	4,789.	5,013.	2,606.
25 Total functional expenses Add lines 1 through 24e	7,010,855.	6,012,542.	781,391.	216,922.
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 or note to any line in this Part X ☐

				(A) Beginning of year		(B) End of year
ASSETS	1	Cash — non-interest-bearing		6,377.	1	10,933.
	2	Savings and temporary cash investments		6,055,309.	2	5,905,929.
	3	Pledges and grants receivable, net			3	
	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		73,500.	7	73,500.
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		20,531.	9	22,315.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 319,484.			
	b	Less accumulated depreciation	10b 274,513.	56,335.	10c	44,971.
	11	Investments — publicly traded securities		55,780,797.	11	71,381,011.
	12	Investments — other securities See Part IV, line 11			12	
	13	Investments — program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		7,303,691.	15	30,511,350.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		69,296,540.	16	107,950,009.
LIABILITIES	17	Accounts payable and accrued expenses		471.	17	1,246.
	18	Grants payable		393,432.	18	490,888.
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	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		9,703,528.	25	25,057,210.
	26	**Total liabilities.** Add lines 17 through 25		10,097,431.	26	25,549,344.
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		57,193,069.	27	69,561,225.
	28	Temporarily restricted net assets		2,006,040.	28	12,839,440.
	29	Permanently restricted net assets			29	
		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		59,199,109.	33	82,400,665.
	34	Total liabilities and net assets/fund balances		69,296,540.	34	107,950,009.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	28,258,792.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,010,855.
3	Revenue less expenses Subtract line 2 from line 1	3	21,247,937.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	59,199,109.
5	Net unrealized gains (losses) on investments	5	3,423,607.
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) SEE SCHEDULE O	9	-1,469,988.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	82,400,665.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	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			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	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			
c	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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

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.**

► **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
COMMUNITY FOUNDATION OF CENTRAL GA, INC.	58-2053465

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

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

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

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

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

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

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

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

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

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

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

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

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 is a Type I, Type II or Type III supporting organization, check this box ☐

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

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants ')	8,139,590.	5,922,381.	3,935,982.	6,014,739.	21686331.	45,699,023.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 **Total.** Add lines 1 through 3	8,139,590.	5,922,381.	3,935,982.	6,014,739.	21686331.	45,699,023.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,587,715.
6 **Public support.** Subtract line 5 from line 4						42,111,308.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	8,139,590.	5,922,381.	3,935,982.	6,014,739.	21686331.	45,699,023.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,015,592.	1,458,811.	1,677,815.	1,621,402.	2,334,598.	8,108,218.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV	-9,485.	-14,910.	-14,828.	-21,515.	-50,448.	-111,186.
11 **Total support.** Add lines 7 through 10						53,696,055.

12 Gross receipts from related activities, etc (see instructions)	12	0.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	78.43 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	77.42 %

16a **33-1/3% support test – 2013.** If the organization did not check the box on line 13, and the 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 – 2012.** 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 – 2013.** 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 – 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization ► ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 lns 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 section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33-1/3% support tests – 2013.** 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 – 2012.** 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.** 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).

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number

58-2053465

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	107	4
2	Aggregate contributions to (during year)	9,831,804.	
3	Aggregate grants from (during year)	2,590,254.	33,300.
4	Aggregate value at end of year	40,988,411.	770,185.

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? [X] 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? [X] 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)
[ ] Protection of natural habitat
[ ] Preservation of open space
[ ] Preservation of an historically important land area
[ ] Preservation of a certified historic structure

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 Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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.

1 a 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 ►$

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

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

b If 'Yes,' explain the arrangement in Part XIII Check here if the explantion 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	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	59,995,733.	53,113,402.	54,413,280.	43,601,079.	36,253,203.
b Contributions	12,387,644.	3,976,860.	3,283,130.	3,615,981.	5,342,715.
c Net investment earnings, gains, and losses	10,277,186.	6,109,215.	-991,398.	10,151,301.	4,381,936.
d Grants or scholarships	-3,013,322.	-2,728,234.	-3,120,324.	-2,624,440.	-2,006,735.
e Other expenditures for facilities and programs	-1,314,061.	-43,387.	-66,033.	-30,550.	-27,653.
f Administrative expenses	-504,524.	-432,123.	-405,254.	-300,091.	-342,386.
g End of year balance	77,828,656.	59,995,733.	53,113,402.	54,413,280.	43,601,079.

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

- a Board designated or quasi-endowment ► 100.00 %
- b Permanent endowment ► _____ %
- 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

	Yes	No
(i) unrelated organizations (3a(i))		X
(ii) related organizations (3a(ii))		X
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 SEE PART XIII

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. 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				
d Equipment				
e Other		319,484.	274,513.	44,971.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))*			►	44,971.

Part VII Investments – Other Securities. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total *(Column (b) must equal Form 990, Part X, column (B) line 12)* ►		

Part VIII Investments – Program Related. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total *(Column (b) must equal Form 990, Part X, column (B) line 13)* ►		

Part IX Other Assets.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) ASSETS HELD IN SPLIT INTEREST AGREEMENTS	4,927,700.
(2) COLLECTIONS	12,000.
(3) CONTRIBUTIONS RECEIVABLE	24,484,635.
(4) INTEREST & DIVIDENDS RECEIVABLE	165,015.
(5) PROPERTY HELD FOR RESALE	922,000.
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B), line 15)* ►	30,511,350.

Part X Other Liabilities.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED ANNUAL LEAVE	6,891.
(3) AGENCY ENDOWMENTS	8,480,209.
(4) LIABILITIES UNDER SPLIT INT. AGREEM	16,570,110.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total *(Column (b) must equal Form 990, Part X, column (B) line 25)* ►	25,057,210.

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	29,224,507.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	3,423,607.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII) SEE PART XIII	2d	402,768.		
e	Add lines 2a through 2d			2e	3,826,375.
3	Subtract line 2e from line 1			3	25,398,132.
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.) SEE PART XIII	4b	2,860,660.		
c	Add lines 4a and 4b			4c	2,860,660.
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	28,258,792.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	6,022,951.
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			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	6,022,951.
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) SEE PART XIII	4b	987,904.		
c	Add lines 4a and 4b			4c	987,904.
5	Total expenses Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18)*			5	7,010,855.

Part XIII Supplemental Information.

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

PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

ENDOWMENT FUNDS ARE TO BE USED FOR CHARITABLE GRANTS IN ACCORDANCE WITH FOUNDATION'S MISSION OF ENHANCING THE QUALITY OF LIFE FOR THE PEOPLE OF CENTRAL GEORGIA.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.
► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number
58-2053465

Part I **Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- a ☐ Mail solicitations
- b ☐ Internet and email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total			►				0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 20TH ANNIVERSI (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1 Gross receipts	26,700.			26,700.
	2 Less Charitable contributions	15,900.			15,900.
	3 Gross income (line 1 minus line 2)	10,800.			10,800.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	673.			673.
	7 Food and beverages	37,551.			37,551.
	8 Entertainment	2,323.			2,323.
	9 Other direct expenses	5,918.			5,918.
	10 Direct expense summary Add lines 4 through 9 in column (d)			►	46,465.
	11 Net income summary Subtract line 10 from line 3, column (d)			►	-35,665.

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes % No	Yes % No	Yes % No	
	7 Direct expense summary Add lines 2 through 5 in column (d)			►	
	8 Net gaming income summary Subtract line 7 from line 1, column (d)			►	

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If 'No,' explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain

11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ►

Address ►

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If 'Yes,' enter the amount of gaming revenue received by the organization ► $ _____ and the amount of gaming revenue retained by the third party ► $ _____

c If 'Yes,' enter name and address of the third party

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► $ _____

Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

► **Attach to Form 990.**

► **Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number

58-2053465

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC 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
(1) SCHEDULE ATTACHED			5,139,516.	11,413.			
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► 0

3 Enter total number of other organizations listed in the line 1 table ► 1

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 COLLEGE SCHOLARSHIPS	63	75,192.			
2 COMM DEVEL GRANT PROGRAM	11	151,446.			
3 COMMUNITY AWARD	7	3,500.			
4 MEDICAL ASSISTANCE	1	5,000.			
5					
6					
7					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

THE COMMUNITY FOUNDATION OF CENTRAL GA CONDUCTS DUE DILIGENCE ON ALL POTENTIAL GRANTEES TO ENSURE THE ELIGIBILITY FOR APPLICATION OR RECEIPT OF FUNDS, THE TAX EXEMPTION OF THE ORGANIZATION, THE CHARITABLE NATURE OF THE ORGANIZATION, THE CHARITABLE NATURE OF THE GRANT REQUEST, AND THE FINANCIAL HEALTH AND REPUTATION OF THE ORGANIZATION. TELEPHONE INQUIRIES ARE ALSO MADE ON A REGULAR BASIS TO OBTAIN CURRENT INFORMATION ON THE ORGANIZATION AS PART OF DUE DILIGENCE. PRIOR TO FUNDS BEING DISBURSED TO A POTENTIAL GRANTEE ORGANIZATION, REQUESTS FOR DISBURSEMENT MUST BE APPROVED BY THE EXECUTIVE COMMITTEE OR THE BOARD OF DIRECTORS OF THE COMMUNITY FOUNDATION OF CENTRAL GA. AFTER APPROVAL, GRANTEES RECEIVE THEIR GRANT PAYMENT ALONG WITH AN AWARD LETTER SPECIFICALLY STATING HOW THE FUNDS ARE TO BE USED. FINAL REPORTS

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► **Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.**
► **Attach to Form 990.** ► **See separate instructions.**
► **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number

58-2053465

Part I Questions Regarding Compensation

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
KATHRYN H DENNIS	(i)	147,092.	0.	0.	11,920.	8,079.	167,091.	0.
1 PRES & BD MEMB	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
► Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open To Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number

58-2053465

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	100	1,504,879.	
10	Securities – Closely held stock				
11	Securities – Partnership, LLC, or trust interests				
12	Securities – Miscellaneous				
13	Qualified conservation contribution – Historic structures				
14	Qualified conservation contribution – Other				
15	Real estate – Residential				
16	Real estate – Commercial				
17	Real estate – Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (_____)				
26	Other ► (_____)				
27	Other ► (_____)				
28	Other ► (_____)				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If 'Yes,' describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If 'Yes,' describe in Part II	SEE PART II		
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			

Part II **Supplemental Information.** 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.

PART I, LINE 32 - HIRE AND USE OF THIRD PARTIES

THE FOUNDATION USES STOCK BROKERS TO HANDLE THE SALE OF CONTRIBUTED PUBLICLY TRADED SECURITIES AND LICENSED REAL ESTATE AGENTS TO SELL CONTRIBUTED REAL ESTATE.

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-EZ	OMB No 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.	2013 Open to Public Inspection

Name of the organization	Employer identification number
COMMUNITY FOUNDATION OF CENTRAL GA, INC.	58-2053465

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FOLLOWING PREPARATION OF THE FORM 990 AND REVIEW BY THE PRESIDENT AND BY THE CHIEF ADMINISTRATIVE OFFICER, THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. THE FOUNDATION'S EXTERNAL ACCOUNTING FIRM ATTENDS THIS MEETING ALONG WITH THE PRESIDENT AND THE CHIEF ADMINISTRATIVE OFFICER OF THE FOUNDATION TO ANSWER QUESTIONS AND PROVIDE FURTHER INFORMATION OR DETAILS. AT THIS TIME THE COMMITTEE REVIEWS THE RETURN AND, BY VOTE, APPROVES THE RETURN FOR FILING.

A COPY OF THE FORM 990 IS THEN PROVIDED ELECTRONICALLY TO EACH BOARD MEMBER. AT THE REGULARLY SCHEDULED MEETING OF THE BOARD OF DIRECTORS, THE CHIEF ADMINISTRATIVE OFFICER PRESENTS HIGHLIGHTS OF THE RETURN AND IS AVAILABLE TO ANSWER ANY QUESTIONS OR CONCERNS THAT DIRECTORS MAY HAVE. WHEN THIS PRESENTATION IS SUCCESSFULLY COMPLETED, THE FORM 990 IS FILED.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

BOARD AND STAFF MEMBERS COVERED BY THE CONFLICT OF INTEREST POLICY ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST ANNUALLY BY COMPLETING A QUESTIONNAIRE LISTING THE ORGANIZATIONS THEY OR THEIR SPOUSE SERVE, ARE EMPLOYED BY, OR WITH WHICH THEY HAVE A BUSINESS RELATIONSHIP.

ANNUALLY, COVERED INDIVIDUALS ARE ALSO REQUIRED TO SIGN A STATEMENT INDICATING THEY HAVE RECEIVED A COPY OF THE POLICY, HAVE READ AND UNDERSTAND IT, AGREE TO COMPLY WITH THE POLICY, AND AGREE TO DISCLOSE A POTENTIAL CONFLICT PRIOR TO PARTICIPATING IN ANY RELATED DELIBERATIONS OR MAKING ANY RELATED DECISIONS. IF THE BOARD DETERMINES THAT THERE IS A CONFLICT OR THE APPEARANCE OF A CONFLICT, THE INDIVIDUAL AGREES TO ABSTAIN FROM VOTING AND WILL NOT PARTICIPATE IN THE DISCUSSIONS OTHER THAN TO PROVIDE INFORMATION OF A TECHNICAL NATURE OR ANSWER SPECIFIC QUESTIONS THAT MAY BE RAISED BY

Name of the organization: COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number: 58-2053465

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS (CONTINUED)

OTHER BOARD MEMBERS.

CONFLICTS OF INTEREST BROUGHT TO THE ATTENTION OF THE BOARD OR ITS COMMITTEES DURING MEETINGS ARE IDENTIFIED IN THE OFFICIAL MINUTES OF THAT MEETING.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO, TOP MANAGEMENT

THE PRESIDENT IS THE TOP MANAGEMENT OFFICIAL OF THE COMMUNITY FOUNDATION. SHE RECEIVES A PERFORMANCE AND COMPENSATION REVIEW ANNUALLY FROM THE CHAIR AND THE TREASURER OF THE BOARD OF DIRECTORS. THEY DETERMINE COMPENSATION BASED ON PERFORMANCE AND ON THE RESULT OF COMPARISONS WITH COMPENSATION OF OTHERS IN SIMILAR POSITIONS TO DETERMINE IF HER COMPENSATION IS FAIR AND REASONABLE.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

CHIEF ADMINISTRATIVE OFFICER RECEIVES A PERFORMANCE REVIEW FROM THE PRESIDENT. HER COMPENSATION IS DETERMINED BY THE PRESIDENT BASED UPON THE PERFORMANCE REVIEW AND WITHIN THE BUDGETARY GUIDELINES APPROVED BY THE BOARD OF DIRECTORS. AS PART OF THIS PROCESS VARIOUS OUTSIDE SALARY SURVEYS ARE USED TO ASSIST IN DETERMINING ANY ADJUSTMENTS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE GOVERNING DOCUMENTS , AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND THE FORM 990 ARE AVAILABLE TO THE PUBLIC ONLINE AT WWW.CFCGA.ORG (THE FOUNDATION'S WEBSITE).

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer identification number

58-2053465

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CFCG HOLDINGS LLC 277 MLK JR BLVD, SUITE 303 MACON, GA 31201 NO EIN	REAL ESTATE HOLDINGS	GA	0.	0.	CFCG INC
(2) CFCG JENNIFER DR LLC 277 MLK JR BLVD, SUITE 303 MACON, GA 31201 NO EIN	REAL ESTATE HOLDINGS	GA	0.	242,000.	CFCG HOLDINGS LLC
(3) DOVER HALL TRACT 100 LLC 227 MLK JR BLVD, SUITE 303 MACON, GA 31201 NO EIN	REAL ESTATE HOLDINGS	GA	0.	680,000.	CFCG HOLDINGS LLC

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity? Yes	(g) No
(1)							
(2)							
(3)							
(4)							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)												
(2)												
(3)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity? Yes	(i) No
(1)									
(2)									
(3)									

Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

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

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

Form 990

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

OMB No 1545-0047

2013

Name of the Organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC.

Employer Identification number

58-2053465

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
TERRY A HENDERSON	1									
BOARD MEMBER	0	X						0.	0.	0.
JOHN D HOUSER	1									
BOARD MEMBER	0	X						0.	0.	0.
HARRIET W HAMILTON	40									
CAO	0			X				103,832.	0.	19,884.

COMMUNITY FOUNDATION OF CENTRAL GA, INC. 58-2053465

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2013	2012	2011	2010	2009
SPECIAL EVENTS	$ -50,448.	$ -21,515.	$ -14,828.	$ -14,910.	$ -9,485.
TOTAL	$ -50,448.	$ -21,515.	$ -14,828.	$ -14,910.	$ -9,485.

COMMUNITY FOUNDATION OF CENTRAL GA, INC. 58-2053465

SCHEDULE D, PART XI, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

CHANGE IN SPLIT INTEREST TRUST	$ 402,768.
TOTAL	$ 402,768.

SCHEDULE D, PART XI, LINE 4B
OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

ASC BOOK \ TAX DIFFERENCE	$ 2,860,660.
TOTAL	$ 2,860,660.

SCHEDULE D, PART XII, LINE 4B
OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

ASC BOOK \ TAX DIFFERENCE	$ 987,904.
TOTAL	$ 987,904.

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
21st Century Partnership Foundation	804 Park Drive	Warner Robins	GA	31088	582562671	501c(3)	$ 2,500 00				Unrestricted gift
							$ 100,000 00				for daily operations of the 21st Century Partnership Foundation and to initiate a series of follow up studies to support the results of the Foundation's initial studies accomplished by the Middle Georgia Regional Commission
							$ 100,000 00				Support operations of the 21st Century Partnership Foundation
Abundant Life Soup Kitchen, Inc	132 North Tenth Street	Griffin	GA	30223	59-3762964	501c(3)	$ 7,000 00				General contribution
Alzheimer's Association - Central Georgia	886 Mulberry Street	Macon	GA	31201	58-1492046	501c(3)	$ 1,000 00				Support for Dancing with the Stars event
							$ 5,000 00				General contribution
Annandale Village	3500 Annandale Lane	Suwanee	GA	30024	58-6081470	501c(3)	$ 800,000 00				For the construction of a 16 bed assisted living center for people with developmental disabilities
Beall's Hill Neighborhood Association	1256 Shamrock Street	Macon	GA	31201			$ 1,250 00				Design and oversight of the Beall's Hill Pedestrian Bridge Project
							$ 10,000 00				implementation of the Beall's Hill Pedestrian Bridge improvements
							$ 353 86				Signs for the Pedestrian Bridge in Beall's Hill
							$ 33,350 00				Pavilion and rain collection system
Bibb County School District	484 Mulberry Street	Macon	GA	31201	58 6000191	Government Entity	$ 500 00				to help send the local Robo-Bibb team to a competition in St Louis on April 22
							$ 1,000 00				to help send the local Robo-Bibb team to a competition in St Louis on April 22
							$ 1,500 00				Joining community support for Team Robo-Bibb for their remarkable performance, qualifying them for attendance at the World Championship
							$ 3,462 00				Field trips to the Tubman Museum
Big Brothers Big Sisters of the Heart of Georgia	2720 Riverside Drive, Suite 123	Macon	GA	31204	58-0707593	501c(3)	$ 2,000 00				School Based Mentoring
							$ 15,000 00				Promise Mentoring
							$ 1,300 00				Mentoring children of prisoners program
							$ 500 00				General Contribution
							$ 3,000 00				General contribution
							$ 2,500 00				Georgia Gives Day Award
							$ 12,000 00				General support
							$ 5,000 00				General support
							$ 9,768 48				General support
Boy Scouts of America - Central GA Council	4335 Confederate Way	Macon	GA	31217	58-0633976	501c(3)	$ 100 00				General contribution
							$ 1,000 00				General contribution
							$ 1,000 00				Support Scouting programs for underserved youth
							$ 5,000 00				General contribution
							$ 500 00				General contribution
Boys and Girls Clubs of Central Georgia	277 MLK Jr Blvd, Suite 202	Macon	GA	31201	58-0621444	501c(3)	$ 5,000 00				In honor of Boys and Girls Clubs of Central Georgia's 75th Anniversary
							$ 1,000 00				Project Learn
							$ 500 00				General contribution
							$ 3,000 00				General contribution
							$ 2,500 00				Georgia Gives Day Award
							$ 1,000 00				General contribution
							$ 15,000 00				Project Learn
Bragg Jam, Inc	P O Box 136	Macon	GA	31212	11-3749741	501c(3)	$ 25,000 00				The Bragg Jam 2nd Sunday Sustainment Fund The Beat Goes ON in the Corridor
							$ 50 00				General contribution
							$ 250 00				General contribution

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Brave Meadows Therapeutic Riding Center	1094 Eatonton Hwy	Gray	GA	31032	20-3199462	501c(3)	$ 1,000 00				$1,000 match $1 for $1 funds raised for the Therapeutic Riding Horse's Welfare
							$ 1,000 00				To provide therapeutic lessons to people of all ages who have physical or emotional problems and to help feed and care for rescued animals
							$ 1,000 00				To provide therapeutic lessons to people of all ages who have physical or emotional problems and to help feed and care for rescued animals
							$ 1,500 00				Farrier for 15 horses, hay and feed
							$ 1,000 00				To provide therapeutic lessons to people of all ages who have physical or emotional problems and to help feed and care for rescued animals
Campus Clubs, Inc	2193 Vineville Avenue	Macon	GA	31204	58-2373761	501c(3)	$ 1,400 00				General contribution
							$ 2,500 00				Georgia Gives Day Award
							$ 1,200 00				General contribution
							$ 500 00				General Contribution
							$ 10,000 00				Camp and Scholarships
							$ 15,000 00				Separation of gas and electrical meters from Strong Tower Fellowship
							$ 2,100 00				Ten campership for Bob Hoffman Basketball Camp June 16-19, 2014
Catholic University of America	620 Michigan Avenue, N E Aquinas 106	Washington	DC	20064	53-0196583	501c(3)	$ 10,000 00				Endowment Fund for the Center for the Advancement of Children, Youth, and Families at CUA
							$ 60,000 00				Endowment Fund
Centenary Community Ministries, Inc	1290 College Street	Macon	GA	31201	80-0307351	501c(3)	$ 1,330 00				*Death Café - to facilitate discussions on death and dying*
							$ 600 00				Transitional House - Christmas Offering
							$ 8,000 00				Transitional housing
Choral Society of Middle Georgia	Post Office Box 5478	Macon	GA	31208	58-1396969	501c(3)	$ 6,134 00				Support performance of Handel's Messiah
							$ 1,000 00				to support the concert on April 29 at Mulberry Methodist Church
							$ 5,000 00				General contribution
Christ Episcopal Church	582 Walnut Street	Macon	GA	31201	58-0593393	501c(3)	$ 1,200 00				General contribution
							$ 5,000 00				General contribution
							$ 3,000 00				General contribution
							$ 1,200 00				General contribution
							$ 50 00				General contribution
							$ 1,000 00				Operating expenses
							$ 1,200 00				General contribution
							$ 1,200 00				General contribution
City of Macon	City of Macon 700 Poplar Street	Macon	GA	31201	58-600012	Government Entity	$ 12,740 00				Downtown Signage
Congregation Sha'arey Israel	611 First Street	Macon	GA	31201	23-7210538	501c(3)	$ 3,000 00				General contribution
							$ 10,400 00				Endowment Fund of Congregation Sha'arey Israel
							$ 3,500 00				General contribution
							$ 3,000 00				General Contribution
Crisis Line - Safe House of Middle Georgia	487 Cherry Street Third Floor Cherry Street Tower	Macon	GA	31201	58-1329248	501c(3)	$ 15,000 00				Client Assistance Fund
							$ 7,200 00				Work with children
Crossroads Counseling Center, Inc	144 Pierce Avenue	Macon	GA	31204	58-2370553	501c(3)	$ 10,000 00				Dollar for dollar match for the funds raised by Crossroads Counseling Center for operating expenses
							$ 15,000 00				Electronic Medical Records
Development Authority - City of Milledgeville/Baldwin County	130 South Jefferson Street	Milledgeville	GA	31061	58-1921875	Government Entity	$ 15,000 00				Milledgeville Community and Economic Development Plan
Douglas-Coffee County Industrial Authority	211 S Gaskin Avenue	Douglas	GA	31534	58-1191042	Government Entity	$ 172,855 93				Purchase of additional land for new Industrial Park
							$ 166,922 23				Purchase of additional land for new Industrial Park
Easter Seals Southern Georgia	1906 Palmyra Road	Albany	GA	31701	58-1915733	501c(3)	$ 59,000 00				Annual distribution

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Family Advancement Ministries	570 High Place	Macon	GA	31201	581941915	501c(3)	$ 11,000 00				Sewing seeds for the future
							$ 500 00				Georgia Gives Day Award
							$ 10,000 00				General Contribution
							$ 500 00				General Contribution
First Baptist Church of Christ	511 High Place	Macon	GA	31201	58-0593398	501c(3)	$ 8,279 00				Capital Improvements TLC Project
First Presbyterian Church of Highlands, NC	P O Box 548	Highlands	NC	28741	56-1260777	501c(3)	$ 10,000 00				General Contribution
							$ 1,000 00				Support
First Tee of Macon	588 Billingswood Drive	Macon	GA	31210	04-3692728	501c(3)	$ 2,000 00				Instruction costs
							$ 2,000 00				Golf instruction for at risk youth
							$ 1,000 00				College prep tutoring
							$ 2,000 00				Golf instruction for at risk youth
							$ 2,000 00				Golf instruction for at risk youth
Five Loaves & Two Fish Food Pantry	409 West Solomon Street	Griffin	GA	30223	58-1883884	501c(3)	$ 14,000 00				General contribution
							$ 14,000 00				General contribution
Flannery O'Connor - Andalusia Foundation	P O Box 947	Milledgeville	GA	31059	58-2601728	501c(3)	$ 15,000 00				Cow Barn Roof Replacement at Andalusia
Forsyth United Methodist Church	68 West Johnston Street	Forsyth	GA	31029	58-1376056	501c(3)	$ 12,000 00				Church Sidewalk Restoration
Friends of Tattnall Square Park	1073 Ash Street	Macon	GA	31201	46-0960667		$ 3,220 00				Installation of trashcans in Tattnall Square Park
							$ 10,411 93				Water fountain, bench, tree maintenance, etc
							$ 1,230 50				Full color decals for the Big Belly trash cans
Georgia Center for Nonprofits, Inc	100 Peachtree Street Suite 1500	Atlanta	GA	30303	58-2554789	501c(3)	$ 10,000 00				Support for 5 Macon arts organizations to participate in the Momentum program to learn management skills
Georgia Department of Natural Resources	2 Martin Luther King, Jr Drive, S E Suite 1252 East	Atlanta	GA	30334	27-3489565	501c(3)	$ 20,000 00				for the production of a Georgia Outdoors TV show through Georgia Public Television
Georgia Industrial Children's Home, a campus of Twin Cedars	4690 North Mumford Road	Macon	GA	31210	58-0593405	501c(3)	$ 15,000 00				McCommon Renovations
							$ 1,500 00				General contribution
							$ 500 00				General contribution to support the Macon campus
							$ 300 00				General contribution
							$ 2,500 00				Dining Hall Furnishings
Georgia Public Broadcasting	260 14th Street NW	Atlanta	GA	30318	58-1510475	501c(3)	$ 150 00				General contribution
							$ 15,000 00				Central Georgia Challenge
							$ 10,200 00				Macon Conversations Dinners from College Hill
							$ 5,000 00				Support of the Statewide Broadcast of A Grand Mercer Christmas on GPB December 17, 20 and 24, 2013
							$ 20,000 00				Challenge grant for inaugural GPB Macon fundraising campaign
							$ 150 00				Georgia Public Television
Georgia Research Alliance	50 Hurt Plaza Suite 1220	Atlanta	GA	30303	58-1901815	501c(3)	$ 10,000 00				General Contribution
Girl Scouts of Historic Georgia, Inc	6869 Columbus Road	Uzella	GA	31052	58-0566191	501c(3)	$ 13,080 00				Direct Delivery of Girl Scout Program
							$ 1,000 00				Scouting Direct Delivery
							$ 250 00				General contribution
Goodwill Industries of Middle Georgia, Inc	5171 Eisenhower Parkway	Macon	GA	31206	58-1249683	501c(3)	$ 15,000 00				Goodwill's Job Connection Downtown Relocation
Gordon State College Foundation	419 College Drive	Barnesville	GA	30204	23-7271047	501c(3)	$ 50,000 00				Scholarship Fund

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Grand Opera House	c/o Mercer University Office of Advancement 1400 Coleman Avenue	Macon	GA	31207	58-0566167	501c(3)	$ 1,000 00				Annual Distribution
							$ 1,000 00				General contribution
							$ 19,000 00				Maintenance, operational, and capital improvement needs of the Grand Opera House
							$ 1,000 00				Endowment distribution
							$ 500 00				for membership in the League of Historic Theatres
Griffin-Spalding County United Way	P O Box 83	Griffin	GA	30224	58-6044667	501c(3)	$ 80,000 00				General contribution
Habitat for Humanity Milledgeville / Baldwin County	PO Box 1659	Hardwick	GA	31034	58-2125349	501c(3)	$ 6,500 00				Georgia Gives Day Award
Hay House	934 Georgia Avenue	Macon	GA	31201	23-7357226	501c(3)	$ 1,000 00				Institutional advancement and Restoration
							$ 500 00				In grateful appreciation of the hospitality shown during CFCG's 20th Anniversary
							$ 250 00				Annual Fund
							$ 1,000 00				Annual Support
							$ 650 00				General contribution
							$ 1,250 00				Support for Hay House staff participation in Leadership Macon 2014 program
							$ 5,400 00				Support for exhibit "The Art of Diplomacy", original works of art by Winston Churchill
Highlands-Cashiers Hospital Foundation	P O Box 742	Highlands	NC	28741	56-1165833	501c(3)	$ 10,000 00				campaign for Community Healthcare Excellence
							$ 1,000 00				General contribution
							$ 2,000 00				Annual gift
Historic Macon Foundation, Inc	P O Box 13358	Macon	GA	31208	51-0200143	501c(3)	$ 500 00				Sidney Lanier Cottage Operating Fund
							$ 90 66				Repairs to information kiosk
							$ 200 00				General Endowment
							$ 3,000 00				General contribution
							$ 8,100 00				Executive Director Search
							$ 3,500 00				Georgia Gives Day Award
							$ 250 00				General contribution
							$ 5,000 00				Costs associated with finding a new Executive Director
							$ 50 00				General contribution
							$ 12,500 00				Sharing our Stories
							$ 1,200 00				Attendance for the Doable Cities Conference in Chicago
							$ 4,000 00				Care and maintenance of the Sidney Lanier Cottage
							$ 6,000 00				Appliances needed for Cottage Renovation
							$ 700 00				RoseHillCemetery com data conversion
							$ 32 10				Rose Hill Ramble Signs
							$ 3,685 50				RoseHillCemetery org/directory
							$ 400 00				Rose Hill data input project
							$ 324 00				Premium shared web hosting
							$ 100 00				Rose Hill Cemetery Website
							$ 100 00				Rose Hill Cemetery Website
							$ 30 15				Rose Hill Cemetery
							$ 100 00				Rose Hill Cemetery Website
Historic Riverside Cemetery Conservancy	P O Box 373 1301 Riverside Drive	Macon	GA	31202	20-3562569	501c(3)	$ 2,000 00				General contribution
							$ 20,000 00				Support for enhanced marketing and communications for 2013-14 community events to engage regional residents in learning about our shared history and to raise awareness of Riverside Cemetery as a cultural resource
Hope Health Clinic	409 West Solomon Street	Griffin	GA	30223	20-0719396	501c(3)	$ 17,500 00				General contribution
							$ 500 00				Georgia Gives Day Award
Hospital Authority of Monroe County Georgia	88 Martin Luther King Jr Drive	Forsyth	GA	31029	58-6010602	501c(3)	$ 25,000 00				the Hospital Foundation

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Houston County Association for Exceptional Citizens,	202 North Davis Drive PMB 164	Warner Robins	GA	31093	58-0687548	501c(3)	$ 15,000 00				Workshop IV Renovations
Houston County Habitat for Humanity	P O Box 7506	Warner Robins	GA	31095	58-1934945	501c(3)	$ 8,000 00				HoCo Habitat Information Technology Upgrade
Houston County Volunteer Clinic	125 Russell Parkway	Warner Robins	GA	31088	201859450	501c(3)	$ 12,619 00				Equipment Needs for Houston County Volunteer Medical Clinic
Howard High School Band Boosters, Inc	6400 Forsyth Road	Macon	GA	31210	30-0695427	501c(3)	$ 7,500 00				Marching Band Uniforms
InTown Macon Neighborhood Association	Post Office Box 4811	Macon	GA	31208	58-7702130	501c(3)	$ 5,800 00				Coleman Hill Reclamation Community Project
							$ 30,000 00				Coleman Hill Natural Playground & Slide
							$ 15,000 00				Coleman Hill Revival Walking Trail
							$ 37,250 00				Lights of Macon - A walking/Driving Tour
Jewish Federation of Macon & Middle Georgia	Post Office Box 5276	Macon	GA	31208	58-1995040	501c(3)	$ 1,000 00				General contribution
							$ 3,500 00				General contribution
							$ 6,000 00				General contribution
							$ 1,000 00				General contribution
Junior League of Macon, Inc	2055 Vineville Avenue	Macon	GA	31204	58-0526317	501c(3)	$ 4,500 00				Georgia Gives Day Award
							$ 500 00				General contribution
							$ 3,600 00				Endowment distribution
Macon Area Habitat for Humanity	690 Holt Avenue	Macon	GA	31204	58-1674696	501c(3)	$ 15,000 00				Lynmore Estates Revitalization Project
							$ 500 00				General Contribution
							$ 250 00				for the work with animals in Lynmore Estates
Macon Arts Alliance, Inc	486 First Street	Macon	GA	31201	58-1546962	501c(3)	$ 1,300 00				Support of Momentum Arts informational luncheon 9/10/2013 with Georgia Center for Nonprofits and Arts Roundtable
							$ 500 00				General Contribution
							$ 250 00				General contribution
							$ 1,250 00				General contribution
							$ 750 00				General contribution
							$ 3,000 00				Georgia Gives Day Award
							$ 15,000 00				Support for administrative, organizational, logo design and communications for Momentum Arts Macon 2014-2016 Momentum Arts is a partnership of Macon Arts Alliance, Georgia Center for Nonprofits and Georgia Council for the Arts/National Endowment for the Arts
							$ 2,000 00				Start up expenses for launch of Macon Chapter of the League of Creative Interventionists
							$ 1,000 00				Support for the Arts Advocacy Breakfast June 19, 2014
Macon Economic Development Commission, Inc	305 Coliseum Drive	Macon	GA	31217	58-1160285	501c(6)	$ 8,335 48				Support for the Macon Now Economic Development Campaign
							$ 8,952 49				Support for the Macon Now Economic Development Campaign
							$ 9,767 68				Support for the Macon Now Economic Development Campaign
							$ 17,476 92				Support for the Macon Now Economic Development Campaign
							$ 8,872 04				Support for the Macon Now Economic Development Campaign
							$ 4,860 00				Support for the Macon Now Economic Development Campaign
Macon Film Festival, Inc	P O Box 929	Macon	GA	31202	27-0615076	501c(3)	$ 13,400 00				9th Annual Macon Film Festival
							$ 50 00				General contribution
Macon Georgia Cherry Blossom Festival, Inc	794 Cherry Street	Macon	GA	31201	58-1648127	501c(3)	$ 15,000 00				Community Outreach Free Concerts
							$ 750 00				General unrestricted contribution

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Macon Rescue Mission	P O Box 749	Macon	GA	31203	58-6011446	501c(3)	$ 250 00				Thanksgiving/Christmas Fund
							$ 2,000 00				Battered women's program
							$ 1,500 00				Play equipment and mulch
							$ 400 00				General contribution
							$ 3,000 00				General contribution
Macon Symphony Orchestra, Inc	400 Poplar Street	Macon	GA	31201	58-1309733	501c(3)	$ 1,000 00				General contribution
							$ 50 00				General contribution
							$ 1,000 00				General Contribution
							$ 10,000 00				General Contribution
Macon Volunteer Clinic, Inc	376 Rogers Avenue	Macon	GA	31204	74-3055376	501c(3)	$ 7,400 00				patient visits
							$ 250 00				General contribution
							$ 1,000 00				General contribution
							$ 10,000 00				Renovations
							$ 10,160 00				Dental Clinic Expansion and Remodel Project
							$ 5,000 00				Free primary medical, dental, and eye care to Bibb County, GA's working, uninsured population who live at or below 200% of the federal poverty level
							$ 50 00				General contribution
							$ 500 00				General contribution
Macon-Bibb County Parks and Recreation Department	Post Office Box 247	Macon	GA	31298	58-6000612	Government Entity	$ 5,064 53				Triple Triangle Parks Master Plan
							$ 5,100 08				Triple Triangle Parks Master Plan
Meals on Wheels of Macon & Bibb County, Inc	Post Office Box 6333	Macon	GA	31208	23-7412434	501c(3)	$ 250 00				General contribution
							$ 300 00				General contribution
							$ 500 00				Georgia Gives Day Award
							$ 500 00				Provide meals
							$ 5,000 00				The Hope Project
							$ 2,500 00				Help further the mission of Meals on Wheels
Medcen Community Health Foundation, Inc	858 High Street	Macon	GA	31201	23-7363555	501c(3)	$ 500 00				For Pine Pointe Hospice
							$ 2,000 00				In support of Pine Pointe Hospice's Summer's Night Picnic & Dance
							$ 500 00				For the Children's Hospital
							$ 500 00				for the Cancer Center
							$ 15,000 00				Cancer Center
Mercer University	1400 Coleman Avenue	Macon	GA	31207	58-0566167	501c(3)	$ 2,200 00				Support of CCJ gathering Information Needs of People in Poverty
							$ 38,825 00				To support Sphinx Virtuosi Grant Opera House performances and community outreach October 29-30, 2013
							$ 250 00				the McDuffie Center for Strings
							$ 1,000 00				Otis Redding Endowed Scholarship Fund at Mercer University's Walter F George School of Law
							$ 10,000 00				Support for inaugural CCJ Dissection workshop 1/30-1/31 of 50 key actors in journalism, documentary film, academia, industry and foundations to form a community of practice to critically assess (and possibly redefine) journalism's role in building healthy communities
							$ 500 00				Townsend School of Music - Robert McDuffie School of Strings at Mercer University
							$ 850 00				installation of lighted wayfaring map at corner of Bond Street and Georgia Avenue
							$ 1,200 00				Attendance for the Doable Cities Conference in Chicago
							$ 20,000 00				To fund a strategic planning process for the Grand Opera House
							$ 2,000 00				For the School of Medicine
							$ 500 00				W D Hazlehurst Scholarship
							$ 1,014 00				Annual contribution to the Medical School
Middle Georgia Regional Library	P O Box 6334	Macon	GA	31208	58-6001921	501c(3)	$ 14,000 00				Updating of website, branding and collateral materials

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Middle Georgia State College Foundation	100 College Station Drive, A-217	Macon	GA	31206	23-7066010	501c(3)	$ 1,000 00				Foundation Gift
							$ 6,462 72				End of Life Seminar for 2013
Middle Georgia Technical College Foundation	80 Cohen Walker Drive	Warner Robins	GA	31088	58-1838977	501c(3)	$ 13,163 00				Learning-Challenged Student Population
							$ 1,500 00				Peach County High School Dual Enrollment
Milledgeville In Motion	137 W Hancock Street	Milledgeville	GA	31061	20-4803521	501c(3)	$ 2,400 00				Attendance for the Doable Cities Conference in Chicago
							$ 20,000 00				Our Great American Main Street
							$ 350 00				Attendance for the Doable Cities Conference in Chicago
Milledgeville Players	P O Box 1452	Milledgeville	GA	31059	52-2372923	501c(3)	$ 8,254 39				For the construction or acquisition of a community theater space
Milledgeville/Baldwin County Habitat for Humanity	P O Box 605	Milledgeville	GA	31059	58-2125349	501c(3)	$ 15,000 00				Roof Renovation
Montgomery County Schools Charitable Trust	P O Box 315	Mount Vernon	GA	30445	74-6528324	501c(3)	$ 3,500 00				General Contribution
							$ 75,000 00				Athletic Complex
Mulberry Street United Methodist Church	P O Box 149	Macon	GA	31202	58-0648689	501c(3)	$ 500 00				Mulberry Garden
							$ 8,000 00				General contribution
Museum of Arts and Sciences	4182 Forsyth Road	Macon	GA	31210	58-0806933	501c(3)	$ 2,600 00				Support from endowment fund
							$ 200 00				General contribution
							$ 1,000 00				2013 Festival of Trees
							$ 1,300 00				Support from endowment fund
							$ 1,500 00				Support of Art Matters symposium on October 22, 2013
							$ 1,000 00				William P Simmons Arts Fund
							$ 1,300 00				Support from endowment fund
							$ 1,000 00				General contribution
							$ 1,300 00				Support from endowment fund
							$ 50 00				General contribution
							$ 1,000 00				General contribution
							$ 5,000 00				General Contribution
							$ 600 00				Festival of Trees
							$ 200 00				General contribution
							$ 1,000 00				Presidents Roundtable
							$ 250 00				General contribution

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
NewTown Macon	479 Cherry Street	Macon	GA	31201	58-2273893	501c(3)	$ 1,000 00				General contribution
							$ 94,800 00				Fort Hawkins
							$ 100,000 00				Support for downtown development in Macon
							$ 2,500 00				Ocmulgee Trail
							$ 150,000 00				Fort Hawkins
							$ 100,000 00				General contribution
							$ 150,000 00				Fort Hawkins
							$ 62,000 00				Support for downtown development in Macon
							$ 4,000 00				Georgia Gives Day Award
							$ 100,000 00				Support for downtown development in Macon
							$ 6,000 00				Public Education
							$ 5,000 00				Trail project
							$ 500 00				Trail project
							$ 75,000 00				general contribution
							$ 5,000 00				Trail project
							$ 100,000 00				Fort Hawkins
							$ 1,200 00				Attendance for the Doable Cities Conference in Chicago
							$ 41,050 00				Macon Pops
							$ 100,000 00				Fort Hawkins
							$ 50,000 00				Support for downtown development in Macon
							$ 50,000 00				Support for downtown development in Macon
North Macon Presbytenan Church	5707 Rivoli Drive	Macon	GA	31210	58-1761731	501c(3)	$ 10,000 00				Building Fund
Northside Baptist Church	1001 N Jefferson Street, NE	Milledgeville	GA	31061	581527926	501c(3)	$ 10,000 00				Update and Improve the Office Building for Church Staff
							$ 2,000 00				Repair sheetrock damage
Ocmulgee Land Trust, Inc	c/o NewTown Macon 479 Cherry Street	Macon	GA	31201	20-1260225	501c(3)	$ 40,000 00				To purchase land that will ultimately become a part of the Ocmulgee Mounds
Ocmulgee National Park & Preserve Initiative (ONPPI)	502 Mulberry Street	Macon	GA	31201	45-3622788	501c(3)	$ 5,900 00				Creation of new website, mobile, social media and hosting to build awareness and support of ONPPI's efforts for National Park status
							$ 250 00				general contribution
Oconee River Greenway Foundation, Inc	1641 N Jefferson St	Milledgeville	GA	31061	20-0440767	501c(3)	$ 4,500 00				Georgia Gives Day Award
							$ 1,200 00				Attendance for the Doable Cities Conference in Chicago
Peachtree Road United Methodist Church	3180 Peachtree Road, NW	Atlanta	GA	30305	58-0655363	501c(3)	$ 2,500 00				General contribution
							$ 500 00				General contribution
							$ 9,980 00				General contribution
							$ 6,000 00				For Annual Gift and Youth Capital Campaign
Presbytenan College	P O Box 975	Clinton	SC	29325	57-1021640	501c(3)	$ 1,000 00				PC Annual Fund
							$ 8,333 33				Major Gifts
Prevent Blindness Georgia	455 E Paces Ferry Road Room 222	Atlanta	GA	30305	58-6050305	501c(3)	$ 15,000 00				Star Pupils
Ramah Church	1274 Ramah Church Road	Barnesville	GA	30204		501c(3)	$ 25,000 00				Provide additional funds for the perpetual maintenance of the church cemetery
Rebuilding Macon, Inc	3864 Lake Street	Macon	GA	31204	58-1978433	501c(3)	$ 3,000 00				Support for work in Pleasant Hill
							$ 15,000 00				Emergency Repairs Program
							$ 15,000 00				Caring for the Corridor
							$ 5,000 00				Youth Volunteer Youth Services Program
Rescue Mission of Middle Georgia	P O Box 749	Macon	GA	31203	58-6011446	501c(3)	$ 500 00				General Contribution
							$ 500 00				General contribution
							$ 6,500 00				For work with the children of the Dove Center

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
River Edge Foundation	175 Emery Highway	Macon	GA	31217	58-2109562	501c(3)	$ 3,400 00				Send one person to be trained in Mental Health First Aid
							$ 6,500 00				Substance abuse prevention program working with Bibb County Public and Private School Students
Rotary Club of Macon, Georgia	P O Box 4521	Macon	GA	31208	58-0333575	501c(4)	$ 78 00				General Contribution
							$ 14,193 73				In honor of the 100th Anniversary
Rotary Educational Foundation of Macon, Inc	c/o McNair, McLemore, Middlebrooks P O Box One	Macon	GA	31201	58-6034632	501c(3)	$ 7,000 00				Scholarships for college students
Saint Paul A M E Church, Inc	2501 Shurling Drive	Macon	GA	31211	58-2021625	501c(3)		$ 11,413 00	Tax value	2 18 acres known as 2901 Shurling Drive (tax parcel U0620137204)	Property donation
Salvation Army - Griffin	P O Box 798	Griffin	GA	30224	58-0660607	501c(3)	$ 27,500 00				General contribution
Salvation Army of Central Georgia	P O Box 13386	Macon	GA	31208	58-0660607	501c(3)	$ 250 00				General contribution
							$ 250 00				General contribution
							$ 250 00				Thanksgiving/Christmas Fund
							$ 2,000 00				Battered women's program
							$ 1,500 00				General contribution
							$ 400 00				General contribution
							$ 350 00				Feeding 32 families
							$ 2,500 00				Emergency Shelter Feeding Program
							$ 500 00				General contribution
							$ 400 00				Send two children to summer camp
Samaritan's Purse	P O Box 3000	Boone	NC	28607	58-1437002	501c(3)	$ 5,000 00				Typhoon disaster in the Philippines
							$ 500 00				Philippine Relief Efforts
Stepping Stones Educational Therapy Center, Inc	141 Futral Road	Griffin	GA	30224	58-1903238	501c(3)	$ 8,000 00				General contribution
Stratford Academy	6010 Peake Road	Macon	GA	31210	58-0831002	501c(3)	$ 1,000 00				general contribution
							$ 1,000 00				Loyalty Fund
							$ 350 00				Annual Fund
							$ 30,000 00				*Excellence Never Rests II Campaign*
							$ 2,500 00				Scholarship Fund
							$ 1,000 00				Loyalty Fund
							$ 10,000 00				*Phase Two "Excellence Never Rests" Campaign*
							$ 10,000 00				Excellence Never Rests Campaign - Phase II
Streetline Percussion, Inc	c/o Ms Charlene Waller 2961 Thornwood Drive	Macon	GA	31201	45-4393859	501c(3)	$ 400 00				Back to School Supplies
							$ 500 00				Jackets
							$ 7,500 00				Summer Camp Drums & Dreams
							$ 500 00				Trip to Wild Adventures
Strong Tower Fellowship	2193 Vineville Avenue	Macon	GA	31204	58-0637239	501c(3)	$ 14,500 00				Evangelical purposes
							$ 20,000 00				General Contribution-
							$ 1,400 00				General contribution
							$ 15,000 00				Evangelical purposes
							$ 500 00				Community Garden
							$ 500 00				To support the "Breakfast and a Book Club" ministry
							$ 5,000 00				General contribution
The 567/Center for Renewal, Inc	533 Cherry Street	Macon	GA	31201	27-1704878	501c(3)	$ 2,500 00				Georgia Gives Day Award
							$ 4,740 00				Support for Lunch Beat Macon monthly events February-May 2014
The Carolina Academy	351 North Country Club Road	Lake City	SC	29560	57-6036661	501c(3)	$ 7,500 00				General contribution

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of Valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of Grant or Assistance
The CART Fund, Inc	P O Box 1916	Sumter	SC	29151	31-1466051	501c(3)	$ 2,599 00				Dollar for dollar match for the funds raised by the Rotary Club of Macon
							$ 4,000 00				Dollar for dollar match for the funds raised by the Rotary Club of Macon
							$ 500 00				Matching grant for The CART Funds raised by the Rotary Club of Macon
The Fuller Center for Housing of Macon, GA, Inc	P O Box 18148	Macon	GA	31209	27-4732443	501c(3)	$ 10,000 00				SAVE A HOUSE-MAKE A HOME
							$ 3,000 00				Georgia Gives Day Award
The Medical Center Foundation	2150 Limestone Parkway, Suite 115	Gainesville	GA	30501	58-1694820	501c(3)	$ 200,000 00				Teaching Center and Demonstration Kitchen within the future Woody Stewart Heart Failure Treatment Unit at Northeast Georgia Medical Center
The Mentors Project of Bibb County, Inc	P O Box 13750	Macon	GA	31208	58-1937624	501c(3)	$ 10,000 00				Summer Program
							$ 250 00				General contribution
							$ 2,800 00				General contribution
							$ 500 00				Georgia Gives Day Award
							$ 500 00				General Contribution
							$ 2,500 00				Mentors Project
The Methodist Home for Children and Youth	304 Pierce Avenue	Macon	GA	31204	58-0622971	501c(3)	$ 1,300 00				General contribution
							$ 500 00				General contribution
							$ 500 00				General contribution
							$ 1,014 00				Annual Contribution
							$ 2,500 00				Georgia Gives Day Award
							$ 100 00				General contribution
Theatre Macon, Inc	438 Cherry Street	Macon	GA	31201	58-1693192	501c(3)	$ 200 00				General contribution
							$ 2,500 00				Expenses
							$ 15,000 00				Youth Actor's Company programming 2013-14
							$ 250 00				Annual Fund
							$ 750 00				General contribution
							$ 100 00				General contribution
							$ 1,200 00				Endowment fund support
							$ 3,000 00				Support of summer musical production of Les Miserables
							$ 200 00				General contribution
Trinity United Methodist Church	129 S Houston Road	Warner Robins	GA	31088	58-0898380	501c(3)	$ 10,000 00				To support efforts of the Food Pantry
							$ 5,000 00				Purchase tablets for 100 children who attend the "Camp in the City" camp in June 2014
United in Pink	2550-A Northside Crossing	Macon	GA	31210	20-5848087	501c(3)	$ 14,850 00				Monthly Survivor and Family Programming
							$ 300 00				sponsor one child for summer camp June 2014
United Way of Central Georgia, Inc	P O Box 1302	Macon	GA	31202	58-0639811	501c(3)	$ 2,200 00				Loaned Executive Program
							$ 15,000 00				Building United Way of Central Georgia's community impact capacity
							$ 10,000 00				General contribution
							$ 1,400 00				General contribution
							$ 3,000 00				General contribution
							$ 10,000 00				General contribution
							$ 1,000 00				J Clay Murphey Society
							$ 3,000 00				General contribution
							$ 20,000 00				The de Tocqueville Society for 2013 and Promise Neighborhood Initiative
							$ 1,000 00				Unrestricted
University of Georgia Foundation	394 S Milledge Ave	Athens	GA	30602	58-6033837	501c(3)	$ 10,000 00				Medical School Scholarship
US Ski and Snow Board Team Foundation	1 Victory Lane Box 100	Park City	UT	84060	84-6030639	501c(3)	$ 25,000 00				General contribution
Vail Valley Foundation	P O Box 309	Vail	CO	81658	74-2215035	501c(3)	$ 25,000 00				General contribution

(a) Name of Organization	(a) Recipient Address Block	(a) Recipient City	(a) Recipient State	(a) Recipient Zip	(b) EIN	(c) IRC 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
Wesley Glen Ministries	4580 North Mumford Road	Macon	GA	31210	58-2400262	501c(3)	$ 1,250 00				Support for Ward Terrace Apartment Management
							$ 5,000 00				General contribution
							$ 1,000 00				Feeding 32 families
							$ 500 00				General contribution
							$ 5,000 00				General Contribution
							$ 5,000 00				General contribution
							$ 1,000 00				Capital Reserves
							$ 1,000 00				General contribution
							$ 2,500 00				Capital Reserves
							$ 10,000 00				Capital Reserves
							$ 2,500 00				Capital Reserves
							$ 1,000 00				Challenge grant
							$ 500 00				General contribution
Wesleyan College	4760 Forsyth Road	Macon	GA	31210	58-0593438	501c(3)	$ 3,200 00				refinish floor in Burden Parlor
							$ 1,000 00				Newsome Beautification Fund
							$ 3,000 00				Georgia Gives Day Award
							$ 10,000 00				New Chapel Endowment Fund
							$ 50,000 00				Annual Fund and the purchase of new tables and chairs for the Anderson Dining Hall

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. (CONTINUED)

ON HOW THE GRANT FUNDS ARE USED ARE REQUIRED FOR ALL GRANTS FROM COMMUNITY GRANT PROGRAMS OF THE COMMUNITY FOUNDATION OF CENTRAL GA AND ITS AFFILIATES.FINAL REPORTS MAY ALSO BE REQUIRED FOR ANY GRANTS FROM A DONOR-ADVISED,AGENCY,SCHOLARSHIP OR DESIGNATED FUND IF SO REQUESTED BY THE DONOR. SITE VISITS ARE CONDUCTED ON A REGULAR BASIS TO REVIEW AN ORGANIZATION AND ITS PROGRAMS; SPECIFICALLY IF AN ORGANIZATION IS NEW, OR IF THE ORGANIZATION HAS NOT PREVIOUSLY BEEN AWARDED A GRANT FROM THE COMMUNITY FOUNDATION OF CENTRAL GA.

COMMUNITY FOUNDATION OF CENTRAL GA, INC. 58-2053465

FORM 990, PART XI, LINE 9
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

ASC BOOK/TAX DIFFERENCE - EXPENSES	$ 987,904.
ASC BOOK/TAX DIFFERENCE - REVENUES	-2,860,660.
CHANGE IN SPLIT INTEREST TRUSTS	402,768.
TOTAL	$ -1,469,988.