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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization
THE COMMUNITY FOUNDATION OF HARRISONBURG & ROCKINGHAM COUNTY

Doing business as

Number and street (or P O box if mail is not delivered to street address) PO BOX 1068

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
HARRISONBURG, VA 22803

F Name and address of principal officer
REVLAN HILL
PO BOX 1068
HARRISONBURG,VA 22803

H(a) Is this a group return for subordinates?
No ☐ Yes ☒

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

H(c) Group exemption number ▶

D Employer identification number
54-1920746

E Telephone number
(540) 432-3863

G Gross receipts \$ 15,704,620

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

J Website: ▶ HTTP //THE-COMMUNITY-FOUNDATION.ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1998

M State of legal domicile VA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
STRENGTHENING OUR COMMUNITIES THROUGH PURPOSEFUL GIVING AND ACTIVE ENGAGEMENT

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	20
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	7
6 Total number of volunteers (estimate if necessary)	6	40
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

Revenue

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	7,086,906	5,850,909
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	81,403	78,739
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,272,349	731,307
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	537	0
	9,441,195	6,660,955

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,858,962	3,612,033
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	224,064	258,002
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶44,490		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	228,230	265,468
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	4,311,256	4,135,503
19 Revenue less expenses Subtract line 18 from line 12	5,129,939	2,525,452

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	29,696,588	31,936,373
21 Total liabilities (Part X, line 26)	9,001,497	8,624,211
22 Net assets or fund balances Subtract line 21 from line 20	20,695,091	23,312,162

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

2017-04-27

Date

REVLAN HILL EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name
KEVIN HUMPHRIES

Preparer's signature
KEVIN HUMPHRIES

Date

Check ☒ if self-employed

PTIN
P00168667

Firm's name ▶ PBMARES LLP

Firm's EIN ▶ 54-0737372

Firm's address ▶ 558 SOUTH MAIN STREET

Phone no (540) 434-5975

HARRISONBURG, VA 22801

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

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

STRENGTHENING OUR COMMUNITIES THROUGH PURPOSEFUL GIVING AND ACTIVE ENGAGEMENT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code)	(Expenses \$ 1,922,942	including grants of \$ 1,788,200	(Revenue \$)
GRANTS TO STRENGTHEN OUR COMMUNITY THE COMMUNITY FOUNDATION DISTRIBUTED \$1,788,200 TO NONPROFIT AGENCIES AND CHARITABLE ORGANIZATIONS BASED LOCALLY OR WITH A SIGNIFICANT CONNECTION TO OUR LOCAL COMMUNITY TO IMPROVE THE HEALTH AND HAPPINESS OF OUR LOCAL COMMUNITY INCLUDING FAITH BASED INITIATIVES, CIVIC GROUPS, HEALTH AND HUMAN SERVICE ORGANIZATIONS, AND OTHER CHARITABLE ORGANIZATIONS WITH A FOCUS ON ARTS AND CULTURE, ENVIRONMENTAL INITIATIVES, HISTORICAL PRESERVATION, HEALTHCARE, ANIMAL WELFARE, AND RECREATION THE COMMUNITY FOUNDATION SUCCESSFULLY CONNECTED NONPROFIT ORGANIZATIONS MAKING A DIFFERENCE IN OUR COMMUNITY WITH OVER \$1 78 MILLION IN FUNDING FROM LOCAL SOURCES				

4b	(Code)	(Expenses \$ 913,828	including grants of \$ 913,828	(Revenue \$)
EDUCATION PROGRAM SERVICE AREATHE COMMUNITY FOUNDATION DISTRIBUTED \$913,828 FOR EDUCATION PROGRAMS AND SCHOLARSHIPS RECIPIENTS INCLUDED PUBLIC AND PRIVATE SCHOOLS, COLLEGES, LIBRARIES, CHILDREN'S MUSEUMS AND LITERACY ORGANIZATIONS, ALL OF WHICH RAN EDUCATIONAL PROGRAMMING THE COMMUNITY FOUNDATION IS ALSO A VIRGINIA SCHOLARSHIP FOUNDATION AND DISTRIBUTED \$323,738 TO LOCAL PRIVATE SCHOOLS THROUGH THE STATE'S TAX CREDIT PROGRAM				

4c	(Code)	(Expenses \$ 1,026,943	including grants of \$ 910,005	(Revenue \$ 78,739)
ADMINISTRATIVE SUPPORT & EDUCATION FOR LOCAL NONPROFIT AND CHARITABLE FUNDRAISING INITIATIVESTHE COMMUNITY FOUNDATION PARTNERS WITH LOCAL NONPROFITS TO RECEIPT, ACCOUNT FOR, AND INVEST FUNDS FOR AGENCIES, WITH LIMITED RESOURCES WITHIN THE ORGANIZATION, WANTING TO FOCUS THEIR RESOURCES ON MISSION-RELATED SERVICE DELIVERY BY MANAGING AND DISTRIBUTING OVER \$900,000 TO LOCAL NONPROFITS FUND HOLDERS IN CONNECTION WITH CAPITAL CAMPAIGNS, RAINY DAY FUNDS, OR ENDOWMENT DISTRIBUTIONS, THE COMMUNITY FOUNDATION IMPROVES THE CAPACITY OF LOCAL NONPROFIT SERVICE PROVIDERS WORKING HARD EVERY DAY TO MAKE OUR COMMUNITY A BETTER PLACE TO LIVE				

4d	Other program services (Describe in Schedule O)			
	(Expenses \$	including grants of \$	(Revenue \$)	

4e	Total program service expenses ▶	3,863,713
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> 	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> 	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> 	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> 	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> 	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response 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	13	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	7	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" 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		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c	Enter the amount of reserves on hand.	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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	20	
1b	Enter the number of voting members included in line 1a, above, who are independent	20	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ► MELISSA MAYHEW THE COMMUNITY FOUNDATION PO BOX 1068 HARRISONBURG, VA 22803 (540) 432-3863

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID W DRIVER GRANTS CO-CHAIR	1 00	X						0	0	0
(2) PHILLIP C STONE DIRECTOR	1 00	X						0	0	0
(3) JEFFREY ADAMS DIRECTOR	1 00	X						0	0	0
(4) TONI BENTEL BAILEY DIRECTOR	1 00	X						0	0	0
(5) STEPHANNE S BYRD CHAIR	2 00	X		X				0	0	0
(6) STEPHEN CAVANAUGH DIRECTOR	1 00	X						0	0	0
(7) MICHAEL FRAZIER DIRECTOR	1 00	X						0	0	0
(8) STEVEN GORDON IMMEDIATE PAST CHAIR	1 00	X						0	0	0
(9) DONNA HARPER DIRECTOR	1 00	X						0	0	0
(10) KAY HARRISON DIRECTOR	1 00	X						0	0	0
(11) JIM HOLLOWOOD DIRECTOR	1 00	X						0	0	0
(12) DALE HULVEY DIRECTOR	1 00	X						0	0	0
(13) DALE LAM AUDIT CHAIR	1 00	X						0	0	0
(14) JOSEPH S PAXTON GRANTS CO-CHAIR	1 00	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) BILLY R ROBINSON DIRECTOR	1 00	X						0	0	0
(16) AMY L RUSH DIRECTOR	1 00	X						0	0	0
(17) BRIAN SHULL DIRECTOR	1 00	X						0	0	0
(18) DAPHYNE S THOMAS DIRECTOR	1 00	X						0	0	0
(19) LAURA TONI-HOLSINGER DIRECTOR	1 00	X						0	0	0
(20) DANIEL O URIBE DIRECTOR	1 00	X						0	0	0
(21) ELLEN H BRODERSEN TREASURER	1 00			X				0	0	0
(22) REVLAN S HILL EXECUTIVE DIRECTOR	40 00			X				83,700	0	2,511
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							83,700	0		2,511

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 ► 0		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year		
	(A) Name and business address	(B) Description of services	(C) Compensation
	GRAVES LIGHT WEALTH MANAGEMENT GROUP 2011 EVELYN BYRD AVE HARRISONBURG, VA 22801	INVESTMENT MANAGEMENT	154,236
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 ► 1		

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					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,850,909				
	g	Noncash contributions included in lines 1a-1f \$		3,731,118				
	h	Total. Add lines 1a-1f			5,850,909			
Program Service Revenue			Business Code					
	2a	ADMINISTRATIVE FEES	561000	77,556	77,556			
	b	EDUCATIONAL EVENTS	900099	1,183	1,183			
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			78,739			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		789,360			789,360	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		8,961,094		24,518				
		9,019,147		24,518				
		-58,053		0				
	d	Net gain or (loss)		-58,053			-58,053	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		a				
	b	Less direct expenses		b				
	c	Net income or (loss) from fundraising events . . .						
	9a	Gross income from gaming activities See Part IV, line 19		a				
	b	Less direct expenses		b				
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances		a				
b	Less cost of goods sold		b					
c	Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions			6,660,955	78,739	0	731,307	

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 domestic organizations and domestic governments. See Part IV, line 21.	3,612,033	3,612,033		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	87,551	21,888	43,775	21,888
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	148,389	83,735	58,250	6,404
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	3,549	2,106	1,358	85
9	Other employee benefits.	545	245	235	65
10	Payroll taxes.	17,968	8,082	7,756	2,130
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.	23,589		21,626	1,963
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	155,917	116,938	38,979	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion.	4,730			4,730
13	Office expenses.	10,076		10,076	
14	Information technology.	23,105	6,769	14,553	1,783
15	Royalties.				
16	Occupancy.	15,471	6,478	7,287	1,706
17	Travel.	1,236		1,236	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	10,401	5,439	1,226	3,736
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	4,034		4,034	
23	Insurance.	2,662		2,662	
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	STAFF DEVELOPMENT	8,546		8,546	
b	DUES & MEMBERSHIPS	2,646		2,646	
c	SMALL EQUIPMENT REPAIRS	2,626		2,626	
d	TAXES AND LICENSES	429		429	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	4,135,503	3,863,713	227,300	44,490
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)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		494,496	1	915,464
	2	Savings and temporary cash investments		2,762,599	2	2,811,496
	3	Pledges and grants receivable, net		248,996	3	478,353
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	270,599
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	12,106
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	18,503		
	b	Less: accumulated depreciation	10b	0	10c	18,503
	11	Investments—publicly traded securities		24,873,419	11	26,373,792
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets		12,103	14	8,069
	15	Other assets. See Part IV, line 11		1,304,975	15	1,047,991
16	Total assets. Add lines 1 through 15 (must equal line 34)		29,696,588	16	31,936,373	
Liabilities	17	Accounts payable and accrued expenses		6,326	17	13,684
	18	Grants payable		14,730	18	8,176
	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		8,980,441	25	8,602,351
	26	Total liabilities. Add lines 17 through 25		9,001,497	26	8,624,211
	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		19,443,472	27	21,778,433
28		Temporarily restricted net assets		1,251,619	28	1,533,729
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		20,695,091	33	23,312,162
34		Total liabilities and net assets/fund balances		29,696,588	34	31,936,373

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,660,955
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,135,503
3	Revenue less expenses Subtract line 2 from line 1	3	2,525,452
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,695,091
5	Net unrealized gains (losses) on investments	5	-194,779
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	286,398
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,312,162

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 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both		No
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	Yes	
	☐ 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization THE COMMUNITY FOUNDATION OF HARRISONBURG & ROCKINGHAM COUNTY	Employer identification number 54-1920746
---	--

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 (Form 990 or 990-EZ))

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☒

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

8

☐

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

9

☐

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

10

☐

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

11

☐

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

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

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 (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	1,375,298	3,054,196	6,370,056	7,086,679	5,850,909	23,737,138
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,375,298	3,054,196	6,370,056	7,086,679	5,850,909	23,737,138
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)						7,890,155
6 Public support. Subtract line 5 from line 4						15,846,983

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	1,375,298	3,054,196	6,370,056	7,086,679	5,850,909	23,737,138
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	438,008	379,095	458,143	706,518	789,360	2,771,124
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	4,790	6,968	23,856	537		36,151
11 Total support. Add lines 7 through 10						26,544,413
12 Gross receipts from related activities, etc (see instructions)					12	360,533
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 2015 (line 6, column (f) divided by line 11, column (f))	14	59 700 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	63 870 %
16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
b 33 1/3% support test—2014. 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—2015. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. 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—2014. 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	☐ The organization satisfied the Activities Test. Complete line 2 below.		
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

☐

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) ☐		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization
THE COMMUNITY FOUNDATION OF HARRISONBURG
& ROCKINGHAM COUNTY

Employer identification number
54-1920746

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	91	130
2 Aggregate value of contributions to (during year)	2,365,940	3,604,604
3 Aggregate value of grants from (during year)	1,925,257	1,832,970
4 Aggregate value at end of year	14,671,036	17,265,337

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on 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 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, handling of violations, and enforcing conservation easements during the year
►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
(i) Revenue included on 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 Revenue included on 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" on 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, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

Endowment Funds.

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	9,574,265	9,370,838	6,261,953	5,417,419	5,693,351
b Contributions	1,891,613	510,034	2,608,392	694,228	197,742
c Net investment earnings, gains, and losses	198,515	152,685	1,028,979	446,680	-42,939
d Grants or scholarships	465,175	322,578	361,707	163,670	321,033
e Other expenditures for facilities and programs			8,589	1,700	200
f Administrative expenses	139,664	136,714	158,190	131,004	109,502
g End of year balance	11,059,554	9,574,265	9,370,838	6,261,953	5,417,419

2

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

a Board designated or quasi-endowment ▶ 100 000 %

b Permanent endowment ▶

c Temporarily restricted endowment ▶

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

3a

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

(i) unrelated organizations

(ii) related organizations

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

4

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

Part VI

Land, Buildings, and Equipment.

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		18,503		18,503
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				18,503

Part II

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	5,686,652
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-194,779	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	-194,779
3	Subtract line 2e from line 1		3	5,881,431
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	155,917	
b	Other (Describe in Part XIII)	4b	623,607	
c	Add lines 4a and 4b		4c	779,524
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)		5	6,660,955

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,069,581
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	0
3	Subtract line 2e from line 1		3	3,069,581
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	155,917	
b	Other (Describe in Part XIII)	4b	910,005	
c	Add lines 4a and 4b		4c	1,065,922
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	4,135,503

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.

Return Reference	Explanation
PART V, LINE 4	ENDOWMENT FUNDS ARE USED FOR SCHOLARSHIPS AND ONGOING SUPPORT FOR SCHOOLS, CHURCHES, AND NONPROFIT ORGANIZATIONS IMPORTANT TO DONORS IN OUR COMMUNITY. ANNUAL DISTRIBUTIONS PROVIDE SUPPORT TO THE LOCAL FREE MEDICAL CLINIC, ARTS ORGANIZATIONS IN OUR COMMUNITY, LOCAL STREAM CLEAN UP, BIG BROTHERS/SISTERS, CHURCHES, PUBLIC LIBRARIES, EDUCATION IN VARIOUS WAYS, HISTORICAL PRESERVATION, ANIMAL AND WILDLIFE ORGANIZATIONS, AND PUBLIC EVENTS LIKE FIRST NIGHT AMONG OTHERS.

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	AGENCY ACCOUNT CONTRIBUTIONS 573,101 INVESTMENT INCOME ALLOCATED TO AGENCY ACCOUNTS 50,506
PART XII, LINE 4B - OTHER ADJUSTMENTS	GRANTS MADE FROM AGENCY ACCOUNTS 910,005

2015

**Open to Public
Inspection**

54-1920746

Schedule I (Form 990) 2015

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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

Part IV

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

Return Reference	Explanation
PART I, LINE 2	GRANTS ARE ISSUED PRIMARILY TO LOCAL 501(C)(3) ORGANIZATIONS WITH A DETAILED LIST OF RESTRICTIONS ON THE USE OF THE FUNDS AND WITH A CLEAR LANGUAGE RESTRICTING THE PROVISION OF BENEFITS, GOODS, OR SERVICES TO A DONOR IN CONNECTION WITH A GRANT FROM THE COMMUNITY FOUNDATION THE FOUNDATION MAINTAINS A CLOSE RELATIONSHIP WITH NONPROFITS ORGANIZATIONS TO ENSURE GRANTS FUNDS ARE USED APPROPRIATELY AND IN COMPLIANCE WITH APPLICABLE REGULATIONS AND DONOR RESTRICTIONS

Additional Data

Software ID:
Software Version:
EIN: 54-1920746
Name: THE COMMUNITY FOUNDATION OF HARRISONBURG
& ROCKINGHAM COUNTY

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
BLUE RIDGE AREA FOOD BANK PO BOX 937 VERONA,VA 24482	52-1202644	501(C)(3)	27,439				GENERAL SUPPORT & ANNUAL DISTRIBUTION
BLUE RIDGE COMMUNITY COLLEGE - FINANCIAL AID PO BOX 80 WEYERS CAVE,VA 24486	54-1268283	501(C)(3)	22,313				SCHOLARSHIPS & GENERAL SUPPORT
BRIDGEWATER COLLEGE 402 EAST COLLEGE STREET BOX 33 BRIDGEWATER,VA 22812	54-0506306	501(C)(3)	11,000				OFFICE OF INSTITUTIONAL ADVANCEMENT, & BRIDGEWATER FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
CITY OF HARRISONBURG 345 S MAIN ST HARRISONBURG, VA 22801	54-6001343	170(C)(1)	51,497				SUPPORT OF BLACKS RUN CLEAN-UP AND PLAN OUR PARK
COVENANT PRESBYTERIAN CHURCH 32 SOUTHGATE COURT STE 101 HARRISONBURG, VA 22801	54-1270644	501(C)(3)	12,450				GENERAL SUPPORT
DAYTON CHURCH OF THE BRETHREN PO BOX 236 DAYTON, VA 22821	54-1098380	501(C)(3)	19,445				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
EASTERN MENNONITE UNIVERSITY 1200 PARK RD HARRISONBURG, VA 22802	54-0575812	501(C)(3)	6,100				RESTRICTED UNIVERSITY FUND, SEMINARY, BACH FESTIVAL
EXPLORE MORE DISCOVERY 150 S MAIN ST HARRISONBURG, VA 22801	16-1683676	501(C)(3)	162,512				GENERAL SUPPORT, IMAGINATION PLAYTROUND AND SCHOLARSHIP FUND
FELLOWSHIP OF CHRISTIAN ATHLETES HBVALLEY 1866-C EAST MARKET ST STE 3232 HARRISONBURG, VA 22802	44-0610626	501(C)(3)	22,000				GENERAL SUPPORT, SUMMER PROGRAMS, MINISTRY, OFFICE EQUIPMENT, SPRING INTERN PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST PRESBYTERIAN CHURCH 17 NORTH COURT SQUARE HARRISONBURG, VA 22801	54-0576303	501(C)(3)	5,600				LOCAL CHURCH USE & GENERAL SUPPORT
FRIENDSHIP INDUSTRIES INC 801 FRIENDSHIP DR HARRISONBURG, VA 22802	54-6073412	501(C)(3)	8,222				GENERAL SUPPORT, RACK BINS, OPERATIONS IN HONOR OF GEORGE HOMAN
GENERATIONS CROSSING 3765 TAYLOR SPRING LANE HARRISONBURG, VA 22801	54-2061192	501(C)(3)	7,000				RESTRICTED DESIGNATED ITEMS AS DIRECTED IN LETTER, ADULT RECLINER, PEDESTAL TABLE, 2 SENACALM BLANKET & PADS, & GENERAL SUPPORT

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GLOBAL DISCIPLES 315 W JAMES ST SUITE 202 LANCASTER, PA 17603	52-1437518	501(C)(3)	17,250				GENERAL SUPPORT
HARRISONBURG MENNONITE CHURCH 1552 S HIGH ST HARRISONBURG, VA 22801	54-1001338	501(C)(3)	29,110				SALT CLASS, COMPASSION FUND, OPEN CIRCLE S S CLASS MISSION PROJECT, AND GENERAL SUPPORT
HARRISONBURG- ROCKINGHAM FREE CLINIC 25 W WATER ST HARRISONBURG, VA 22801	54-1568909	501(C)(3)	91,427				MARDI GRAS GALA, GOLDEN CIRCLE & GENERAL SUPPORT

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JMU FINANCIAL AID MCS 3516 WARREN HALL HARRISONBURG, VA 22807	23-7156305	501(C)(3)	25,000				SCHOLARSHIPS
JMU FOUNDATION MSC 3603 800 SOUTH MAIN ST HARRISONBURG, VA 22807	23-7156305	501(C)(3)	57,400				RESTRICTED
MASSANUTTEN REGIONAL LIBRARY 174 S MAIN ST HARRISONBURG, VA 22801	54-0548703	501(C)(3)	18,622				GENERAL SUPPORT

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MT HOREB PRESBYTERIAN CHURCH 4517 ROCKFISH RD GROTTOES,VA 24441	54-0576303	501(C)(3)	8,667				GENERAL SUPPORT
SENTARA RMH FOUNDATION 2010 HEALTH CAMPUS DR HARRISONBURG,VA 22801	54-0506331	501(C)(3)	77,250				HARRISONBURG-ROCKINGHAM COUNTY AREA CARE, COMPASSIONATE FUND, GENERAL SUPPORT, NURSING SCHOLARSHIPS
SHENANDOAH AREA COUNCIL BOY SCOUTS OF AMERICA 107 YOUTH DEVELOPMENT COURT WINCHESTER,VA 22602	54-0505874	501(C)(3)	20,000				ANNUAL CONTRIBUTION TO THE COUNCIL'S OPERATING FUND

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SHENANDOAH CIVIL WAR ASSOCIATES 104 MIRANDY COURT BRIDGEWATER,VA 22812	54-2054804	501(C)(3)	7,500				GENERAL SUPPORT
SHENANDOAH UNIVERSITY 1460 UNIVERSITY DR WINCHESTER,VA 22601	54-0525605	501(C)(3)	25,000				DAYTON ALUMNI SCHOLARSHIP FUND, PLECKER SCHOLARSHIP, ANNE HUGHES VISITING ARTIST SERIES, HILL SCHOLARSHIP, GLOBAL CITIZENSHIP PROJECT
SHENANDOAH VALLEY DISCOVERY MUSEUM 54 S LOUDON STREET WINCHESTER,VA 22601	54-1692942	501(C)(3)	120,000				CAPITAL CAMPAIGN & GENERAL SUPPORT

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SHENANDOAH VALLEY ECONOMIC EDUCATION INC 418 FAIRWAY DR HARRISONBURG, VA 22802	54-1168566	501(C)(3)	69,432				GENERAL SUPPORT
UNITED WAY OF HARRISONBURG ROCKINGHAM PO BOX 326 HARRISONBURG, VA 22803	54-0632716	501(C)(3)	137,100				GENERAL SUPPORT
VIRGINIA MENNONITE MISSIONS 901 PARKWOOD DR HARRISONBURG, VA 22802	54-0793291	501(C)(3)	19,750				RAMELLA, HMC OPEN CIRCLE SUNDAY SCHOOL CLASS MISSION PROJECT, GENERAL SUPPORT

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VIRGINIA TECH UNIVERSITY - FINANCIAL AID OFFICE 200 STUDENT SERVICE BLDG BLACKSBURG,VA 24061	54-0721690	501(C)(3)	9,000				SCHOLARSHIPS, GENERAL SUPPORT
BIBLE STUDY FELLOWSHIP HARRISONBURG 546 MOSBY ROAD HARRISONBURG,VA 22801	94-1514010	501(C)(3)	7,000				GENERAL SUPPORT
BLUE RIDGE CHRISTIAN SCHOOL PO BOX 207 BRIDGEWATER,VA 22812	35-2229096	501(C)(3)	42,089				VDOE & UNRESTRICTED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOSTON UNIVERSITY SCHOOL OF MEDICINE BOSTON MEDICAL CAMPUS OFFICE OF DEAN OF DEVELOPMENT BOSTON, MA 021882526	04-2103547	501(C)(3)	5,000				SCHOLARSHIPS
BOYS & GIRLS CLUBS OF HARRISONBURG PO BOX 1223 HARRISONBURG, VA 22803	54-1652418	501(C)(3)	16,750				GENERAL SUPPORT, & BEFORE SCHOOL PROGRAM
CATHOLIC DIOCESE OF ARLINGTON 200 N GLEBE ROAD STE 811 ARLINGTON, VA 22203	54-0967542	501(C)(3)	210,000				LEADERSHIP INITIATIVE OF 2015, BISHOP'S LENTEN APPEAL

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EASTERN MENNONITE SCHOOL 801 PARKWOOD DRIVE HARRISONBURG, VA 22802	54-1194342	501(C)(3)	207,663				VDOE, GENERAL SUPPORT
FIRST STEP 129 FRANKLIN STREET HARRISONBURG, VA 22801	51-0243177	501(C)(3)	7,500				KITCHEN APPLIANCES, ANNUAL DISTRIBUTION, & GENERAL SUPPORT
FREEDOM FELLOWSHIP PO BOX 384 BROADWAY, VA 22815	32-0409727	501(C)(3)	8,000				GENERAL SUPPORT

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HERITAGE MUSEUM PO BOX 716 DAYTON,VA 22821	54-1017712	501(C)(3)	8,750				DAYTON LOCATION OPERATIONS & GENERAL SUPPORT
HARRISONBURG-ROCKINGHAM CHAMBER OF COMMERCE 800 COUNTRY CLUB ROAD HARRISONBURG,VA 22802	54-0241485	501(C)(6)	12,499				VISION 20/20, BOLD, PUBLIC POLICY, BUSINESS SMARTS, LEADERSHIP HR, AND SCHOLARSHIPS
MASSANUTTEN PRESBYTERIAN CHURCH 50 INDIAN TRAIL ROAD PENN LAIRD,VA 22846	54-1117956	501(C)(3)	12,100				LET THERE BE LIGHT PROJECT & GENERAL SUPPORT

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RISE UNITED METHODIST FAITH COMMUNITY 690 S MASON STREET HARRISONBURG, VA 22801	30-0624442	501(C)(3)	8,900				FOOD ASSISTANCE & GENERAL SUPPORT
SADIE ROSE FOUNDATION PO BOX 382 DAYTON, VA 22821	26-1662289	501(C)(3)	11,000				EDUCATION & GENERAL SUPPORT
SALVATION ARMY - HARRISONBURG PO BOX 468 HARRISONBURG, VA 228030468	13-5562351	501(C)(3)	27,300				HOMELESS SHELTER, FOOD, SHELTER, & GENERAL SUPPORT

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SONSHINE MINISTRIES PO BOX 731 HARRISONBURG, VA 228030731	52-1437518	501(C)(3)	6,750				GENERAL SUPPORT
WAKE FOREST UNIVERSITY PO BOX 7227 WINSTONSALEM, NC 27109	56-0532138	501(C)(3)	45,000				COLLEGE FUND, SCHOOL OF BUSINESS FUND, SMITH SCHOLARSHIP
WINGFIELD MINISTRIES 2389 GRACE CHAPEL ROAD HARRISONBURG, VA 22801	54-1437764	501(C)(3)	7,700				GENERAL SUPPORT

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YOUNG LIFE - HARRISONBURG ROCKINGHAM COUNTY PO BOX 1433 HARRISONBURG, VA 228031433	84-0385934	501(C)(3)	36,500				GENERAL SUPPORT
CENTRAL VALLEY HABITAT FOR HUMANITY PO BOX 425 BRIDGEWATER, VA 228120245	54-1441871	501(C)(3)	8,489				GENERAL SUPPORT, ANNUAL DISTRIBUTION GRANT, 638 VIRGINIA AVENUE PROJECT, BANK FROM THE BRINK - AFFORDABLE HOME RENOVATION
AMERICAN ENTERPRISE INSTITUTE 1150 17TH STREET NW WASHINGTON, DC 200364603	53-0218495	501(C)(3)	5,000				IN HONOR OF AEI SCHOLARS WHO ARE MAKING A DIFFERENCE IN DISSEMINATING CONSERVATIVE PRINCIPLES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AVA CARE 833 MARTIN LUTHER KING JR WAY HARRISONBURG,VA 22801	52-1327965	501(C)(3)	5,700				GENERAL SUPPORT
BETHANY UNITED METHODIST CHURCH 3700 LEE HIGHWAY WEYERS CAVE,VA 24486	54-1244180	501(C)(3)	8,500				FRIENDS OF LASARUS
BLUE RIDGE COMMUNITY COLLEGE FOUNDATION PO BOX 80 WEYERS CAVE,VA 244860080	54-1328809	501(C)(3)	13,900				ANNUAL FUND, STUDENT FOCUS COMMUNITY IMPROVEMENT, CAPITAL CAMPAIGN, EDUCATIONAL SCHOLARSHIPS, ENACTUS PROGRAM, GIRLS EMBRACING TECHNOLOGY

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BRIDGE OF HOPE HARRISONBURG- ROCKINGHAM PO BOX 535 HARRISONBURG, VA 22803	81-0555073	501(C)(3)	8,500				GENERAL SUPPORT
BRIDGEWATER HEALTHCARE FOUNDATION INC 302 NORTH SECOND STREET BRIDGEWATER, VA 22812	54-6043653	501(C)(3)	7,500				ADVANCING THE VISION, & GENERAL SUPPORT
CASA FOR CHILDREN 119 W FREDERICK STREET STAUNTON, VA 24401	54-1721227	501(C)(3)	5,100				SERVICES FOR HARRISONBURG & ROCKINGHAM COUNTY

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CORNERSTONE CHRISTIAN SCHOOL 197 CORNERSTONE LANE HARRISONBURG, VA 22802	38-3821029	501(C)(3)	70,213				VIRGINIA DEPARTMENT OF EDUCATION
ELKTON AREA UNITED SERVICES PO BOX 383 ELKTON, VA 22827	54-1020432	501(C)(3)	11,890				EMERGENCY ASSISTANCE PROGRAM & GENERAL SUPPORT
ELKTON EVANGELICAL METHODIST CHURCH 513 E SPOTSWOOD AVENUE ELKTON, VA 22827	54-1254833	501(C)(3)	5,000				GENERAL SUPPORT

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HARRISONBURG POLICE FOUNDATION 100 S MAIN STREET HARRISONBURG, VA 22801	27-2495254	501(C)(3)	6,000				CANINE PROGRAM AND VIDEO/TRAINING INSTRUCTION
KERUS GLOBAL EDUCATION-HARRISONBURG 245 NEWMAN AVE SUITE B HARRISONBURG, VA 22801	53-0204604	501(C)(3)	9,550				GENERAL SUPPORT
LANDMARK TABERNACLE PO BOX 115 MCGAHEYSVILLE, VA 22840	54-1840097	501(C)(3)	15,000				MISSION WORK

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MERCY HOUSE PO BOX 1478 HARRISONBURG, VA 228031478	54-1476187	501(C)(3)	8,756				GENERAL SUPPORT
MT OLIVET CHRISTIAN CHURCH 38 MT OLIVET CHURCH ROAD ELKTON, VA 22827	54-6046379	501(C)(3)	5,000				GENERAL SUPPORT
ON THE ROAD COLLABORATIVE 373 BLUESTONE DRIVE HARRISONBURG, VA 22801	47-1261317	501(C)(3)	11,672				GENERAL SUPPORT

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OPEN DOORS 176 W MARKET STREET HARRISONBURG, VA 22801	11-3835381	501(C)(3)	18,676				GENERAL SUPPORT
OTTERBEIN UNITED METHODIST CHURCH 176 W MARKET STREET HARRISONBURG, VA 22801	36-2167731	501(C)(3)	19,500				GENERAL SUPPORT
PLAINS DISTRICT MEMORIAL MUSEUM PO BOX 601 TIMBERVILLE, VA 228530601	34-2023317	501(C)(3)	5,250				LECTURE HALL PROJECT, CAPITAL FUND

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ST THOMAS EPISCOPAL CHURCH 119 CAROLINE STREET ORANGE, VA 22960	54-0608307	501(C)(3)	7,500				GENERAL SUPPORT
SUNRISE CHURCH OF THE BRETHREN 1496 S MAIN STREET HARRISONBURG, VA 22801	54-1098380	501(C)(3)	5,000				2015 CARPET FUND
TRUTH & GRACE 414 GOLD DRIVE BROADWAY, VA 22815	27-0795120	501(C)(3)	5,000				GENERAL SUPPORT

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UVA ATHLETICS FOUNDATION 1815 STADIUM ROAD 260 CHARLOTTESVILLE, VA 22903	54-0517188	501(C)(3)	7,750				GENERAL SUPPORT
VIRGINIA MENNONITE RETIREMENT COMMUNITY FOUNDATION 1491 VIRGINIA AVENUE HARRISONBURG, VA 22802	54-0249313	501(C)(3)	64,000				COMPASSIONATE FUND, THE FARM, GOOD SAMARITAN FUND, AND GENERAL SUPPORT
WAY TO GO 3142 LANIER LANE MASSANUTTEN, VA 22840	61-1487268	501(C)(3)	11,500				MOBILITY THE KEY TO SELF SUFFICIENCY

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WINCHESTER EDUCATION FOUNDATION WINCHESTER PUBLIC SCHOOLS WINCHESTER, VA 22601	54-2009704	501(C)(3)	100,000				ENGLISH PROGRAMS AND ENGLISH DEPARTMENT
WMRA 983 RESEVOIR STREET HARRISONBURG, VA 22801	54-6001756	501(C)(3)	6,150				NEWS & INFORMATION FUND, GENERAL SUPPORT
ARTS COUNCIL OF THE VALLEY 311 S MAIN STREET HARRISONBURG, VA 22801	54-2025348	501(C)(3)	5,000				GENERAL SUPPORT

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ASBURY UNITED METHODIST CHURCH 205 S MAIN STREET HARRISONBURG, VA 22801	54-0519596	501(C)(3)	449,493				CATALYST FOR MINISTRIES CAPITAL PROJECT, SACRED ARTS PROGRAM, GENERAL SUPPORT
CAMP TEJAS 1038 PRIVATE ROAD 2191 GIDDINGS, TX 78942	74-2155970	501(C)(3)	5,000				FOR BUILDING AND IMPROVEMENT PROJECTS
FAMILY RESEARCH COUNCIL PO BOX 1769 HOLLAND, MI 494221679	52-1762320	501(C)(3)	12,000				GENERAL SUPPORT

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FIRST TEE HARRISONBURG 690 GARBERS CHURCH ROAD HARRISONBURG,VA 22801	26-3826410	501(C)(3)	11,500				IMPROVE TEACHING AND CLASSROOM CAPABILITIES, AND GENERAL SUPPORT
GROFFDALE MENNONITE CHURCH 168 N GRAFFDALE ROAD LEOLA,PA 17540	54-1001338	501(C)(3)	15,000				WENGERS IN CA MISSION
HARRISONBURG FIRST CHURCH OF THE NAZARENE 1871 BOYERS ROAD HARRISONBURG,VA 22801	54-6134186	501(C)(3)	20,000				GENERAL FUND, BUILDING FUND, AND HOPE DISTRIBUTED FOOD BANK

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HARRISONBURG RESCUE SQUAD P O BOX 1477 HARRISONBURG, VA 22803	23-7061809	501(C)(3)	7,250				GENERAL SUPPORT
INDUSTRIAL AND COMMERCIAL MINISTRIES 57 S MAIN STREET SUITE 612 HARRISONBURG, VA 228013703	54-0995038	501(C)(3)	8,000				GENERAL SUPPORT
JAMES MADISON UNIVERSITY DIVISION OF UNIVERSITY ADVANCEMENT HARRISONBURG, VA 22807	54-6001756	501(C)(3)	56,000				BRIDGEFORTH EXPANSION, GIVING DAY CAMPAIGN CHALLENGE, NPI SPONSORSHIPS

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LIGONIER MINISTRIES 421 LIGONIER CT SANFORD, FL 32771	25-1298611	501(C)(3)	55,000				RBC SCHOLARSHIP FUND, REFORMATION BIBLE COLLEGE BUILDING CAMPAIGN
MILL CREEK CHURCH OF THE BRETHREN 7600 PORT REPUBLIC ROAD PORT REPUBLIC, VA 24471	54-0578800	501(C)(3)	5,000				GENERAL SUPPORT
NATIONAL DANCE SOCIETY 852 LINCOLN DRIVE FREDERICKSBURG, VA 22407	47-1601530	501(C)(3)	10,000				GENERAL SUPPORT

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NATIONAL MULTIPLE SCLEROSIS SOCIETY - BLUE RIDGE CHAPTER 1020 CARRINGTON PLACE CHARLOTTESVILLE, VA 22901	54-0834654	501(C)(3)	5,000				IN HONOR OF SENTARA RMH WELLNESS CENTER
NORTHEAST NEIGHBORHOOD ASSOCIATION PO BOX 1026 HARRISONBURG, VA 22803	80-0337045	501(C)(3)	5,122				NENA COMMUNITY GARDEN
REDEEMER CLASSICAL SCHOOL PO BOX 737 HARRISONBURG, VA 22803	74-3071696	501(C)(3)	6,052				VDOE SCHOLARSHIPS, & GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
ROBERTA WEBB CHILD CENTER 400 KELLEY STREET HARRISONBURG, VA 22802	54-1700223	501(C)(3)	9,000				BRIDGING THE GAP AND GENERAL SUPPORT
ROCKINGHAM-HARRISONBURG SPCA P O BOX 413 HARRISONBURG, VA 228030413	54-0935739	501(C)(3)	5,577				INDUSTRIAL STEEL SHELVING UNITS, SAVE MORE FELINES PROJECT, AND GENERAL SUPPORT
SKYLINE LITERACY COALITION 975 SOUTH HIGH STREET HARRISONBURG, VA 22801	54-1589682	501(C)(3)	7,000				COMPUTER/TABLETS, & MY FIRST ENGLISH BOOK PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
SOUTHEAST NEW HAMPSHIRE HABITAT FOR HUMANITY PO BOX 4428 PORTSMOUTH, NH 03802	02-0475356	501(C)(3)	10,000				ASK MATCH CAMPAIGN
THE CHURCH OF THE INCARNATION 57 S MAIN STREET SUITE 609 HARRISONBURG, VA 22801	27-3453966	501(C)(3)	10,200				GENERAL SUPPORT
UNIVERSITY OF VIRGINIA GIFT ACCOUNTING PO BOX 400807 CHARLOTTESVILLE, VA 22904	54-6001796	501(C)(3)	10,000				DR PETER LOBO RENAL RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
VALLEY PROGRAM FOR AGING SERVICES 800 S MAIN ST HARRISONBURG,VA 22807	54-0958526	501(C)(3)	9,500				MEALS ON WHEELS
VIRGINIA FOUNDATION FOR COMMUNITY COLLEGE EDUCATION 101 NORTH 14TH ST 15TH FLOOR RICHMOND,VA 23219	23-7004354	501(C)(3)	30,000				OPERATING FUND, RURAL VIRGINIA HORSESHOE INITIATIVE
WARWICK RIVER CHRISTIAN SCHOOL 252 LUCAS CREEK ROAD NEWPORT NEWS,VA 23602	54-0565003	501(C)(3)	15,390				VDOE SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
WORLD RESOURCES GROUP 456 MYERS AVE HARRISONBURG, VA 22801	65-0970260	501(C)(3)	182,000				GENERAL MINISTRY, SPONSORSHIP, & GENERAL SUPPORT
YOUNG LIFE INTERNATIONAL P O BOX 7053 ARLINGTON, VA 22207	84-0385934	501(C)(3)	10,500				RESTRICTED FOR X2178 RAMSEY & GENERAL SUPPORT
BIG BROTHERS BIG SISTERS OF ROCKINGHAM COUNTY 225 N HIGHT ST SUITE 1 HARRISONBURG, VA 22802	51-0209104	501(C)(3)	44,486				GENERAL SUPPORT, YOUNG WOMEN'S LEADERSHIP PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
DAYTON UNITED METHODIST CHURCH 215 ASHBY ST DAYTON, VA 22821	54-1304918	501(C)(3)	27,000				GENERAL SUPPORT
ROCKINGHAM COUNTY FAIR ASSOCIATION 4808 S VALLEY PIKE HARRISONBURG, VA 22801	54-0580300	501(C)(3)	6,000				POULTRY PAVILION, FARM CROPS/HORTICULTURE PROJECT
THE KENNEDY CENTER 2700 F STREET EDUCATION DIVISION WASHINGTON, DC 20566	53-0245017	501(C)(3)	5,000				HARRISONBURG ANY GIVEN CHILD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
UNITED WAY OF FRONT ROYAL - WARREN COUNTY 128 N ROYAL AVE FRONT ROYAL, VA 22630	54-0741011	501(C)(3)	15,505				GENERAL SUPPORT

SCHEDULE M

(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- 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

Name of the organization THE COMMUNITY FOUNDATION OF HARRISONBURG & ROCKINGHAM COUNTY	Employer identification number 54-1920746
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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	181	3,441,415	AVERAGE HI/LOW PRICE
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 ► (NOTE RECEIVABLE SECURED BY FARM PROPERTY)	X	1	289,703	FMV
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	
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30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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?	Yes	No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b	If "Yes," describe in 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.

Return Reference	Explanation
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**SCHEDULE O
(Form 990 or
990-EZ)**Department of the
Treasury
Internal Revenue
Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 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.

OMB No 1545-0047

2015**Open to Public
Inspection**Name of the organization
THE COMMUNITY FOUNDATION OF HARRISONBURG
& ROCKINGHAM COUNTY

Employer identification number

54-1920746

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS POSTED TO A SECURE WEB PORTAL FOR REVIEW & COMMENTS BY THE BOARD OF DIRECTORS PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	THE FOUNDATION MONITORS THE POTENTIAL AND ACTUAL CONFLICTS OF INTEREST THE EXECUTIVE DIRECTOR AND CHAIR OF THE BOARD SPEAK WITH APPROPRIATE INDIVIDUALS AND TAKE NECESSARY ACTION WHEN A CONFLICT SURFACES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	ALL SALARY REVIEWS ARE CONDUCTED BY PERSONS AT LEAST ONE LEVEL HIGHER THAN THE PERSON IN QUESTION MUCH COMPARATIVE AND BENCH MARK DATA IS OBTAINED FROM THE COUNCIL ON FOUNDATIONS THE EXECUTIVE DIRECTOR'S PERFORMANCE AND SALARY IS REVIEWED ANNUALLY BY A COMMITTEE OF THE BOARD OF DIRECTORS ALL COMPENSATION PACKAGES ARE CALIBRATED TO LOCAL CONDITIONS
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC VIA THE ORGANIZATION'S WEBSITE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	INVESTMENT INCOME AGENCY FUNDS -50,507 AMOUNTS RECEIVED FOR AGENCY ACCOUNTS -573,101 GRANTS MADE FROM AGENCY ACCOUNTS 910,005 ROUNDING 1
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

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.▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE COMMUNITY FOUNDATION OF HARRISONBURG
& ROCKINGHAM COUNTY

Employer identification number
54-1920746

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) THE VALLEY RESPONDS LLC PO BOX 1068 HARRISONBURG, VA 22803	RELIEF WORK	VA	0	0	SOLE MEMBERMANAGER
(2) SHOWKER MEMORIAL GARDENS LLC PO BOX 1068 HARRISONBURG, VA 22803 20-0726547	MANAGE HISTORIC CEMETERY	VA	0	31,450	SOLE MEMBERMANAGER
(3) TCF HOLDING LC PO BOX 1068 HARRISONBURG, VA 22803	HOLD REAL ESTATE/PRIVATE STOCK	VA	1,042	0	SOLE MEMBERMANAGER
(4) EASTHAM LLC PO BOX 1068 HARRISONBURG, VA 22803	REAL ESTATE HOLDING COMPANY	VA	0	0	SOLE MEMBERMANAGER

Part II

Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

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

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

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

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) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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?		Yes	No
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b	Gift, grant, or capital contribution to related organization(s)	1b		
c	Gift, grant, or capital contribution from related organization(s)	1c		
d	Loans or loan guarantees to or for related organization(s)	1d		
e	Loans or loan guarantees by related organization(s)	1e		
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1g		
h	Purchase of assets from related organization(s)	1h		
i	Exchange of assets with related organization(s)	1i		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o	Sharing of paid employees with related organization(s)	1o		
p	Reimbursement paid to related organization(s) for expenses	1p		
q	Reimbursement paid by related organization(s) for expenses	1q		
r	Other transfer of cash or property to related organization(s)	1r		
s	Other transfer of cash or property from related organization(s)	1s		

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

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.

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation
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