

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

20**17**

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

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2017 calendar year, or tax year beginning 2017, and ending 20 18 June 30 C Name of organization Kent State University Foundation D Employer identification number Check if applicable Address change Doing business as 34-6576307 Number and street (or P O box if mail is not delivered to street address) Boom/suite E Telephone number Name change Initial return P.O. Box 5190 330-672-2222 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Amended return Kent. OH 44242-0001 G Gross receipts \$ 85,473,504 F Name and address of principal officer Application pending Stephen G. Sokany H(a) Is this a group return for subordinates? Yes No PO Box 5190, Kent, OH 44242-0001 H(b) Are all subordinates included? Tyes No If "No," attach a list (see instructions) Tax-exempt status **✓** 501(c)(3) Website: ▶ www.kent.edu/advancement/ksufoundation H(c) Group exemption number Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 1965 M State of legal domicile ОН Part I Summary Briefly describe the organization's mission or most significant activities. The Kent State University Foundation receives gifts Activities & Governance restricted to benefit Kent State University. The Foundation makes grants to Kent State University for academic programs, public service, scholarships and fellowships, and research. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . 40 Number of independent voting members of the governing body (Part VI, line 1b) 4 40 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 45 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 7b Pnor Year **Current Year** Contributions and grants (Part VIII, line 1h) . 24,947,532 25,616,603 Program service revenue (Part VIII, line 2g) RECEIVED Investment income (Part VIII, column (A), lines 3, 4, and 10 () 11,454,021 9,801,248 מ Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 363 14.000 Total revenue—add lines 8 through 11 (must equal Partylli, Column (A), line 18) 36,401,916 35,431,851 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 16,577,206 15,217,351 Benefits paid to or for members (Part IX, column (A), line 14 15 Salaries, other compensation, employee benefits (Part IX-column A), lines 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,395,185 1,727,899 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 17,972,391 16,945,250 19 Revenue less expenses Subtract line 18 from line 12 18,429,525 18.486.601 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 213,393,880 239,169,333 21 Total liabilities (Part X, line 26) . 23,631,264 24,957,527 22 Net assets or fund balances. Subtract line 21 from line 20 189,762,616 214.211.806 Signature Block

true, correct, and complete Declaration of preparer (other than officer) is loaded on all information of which preparer has any knowledge Sign Signature Here Type of print name and title Print/Type preparer's name Preparer's signature Date Paid Check | if self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** Phone no Firm's address > May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2017) Cat No 11282Y

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

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	90 (2017)	Page 2
Part		
	Check if Schedule O contains a response or note to any line in this Part III	. Ц
1	Briefly describe the organization's mission:	
	The Kent State University Foundation provides leadership, private sector funding and stewardship of gifts to support Kent State	
	University meet its needs and achieve its priorities.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?] No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	no l
	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 measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported	
4a	(Code:) (Expenses \$ 15,217,351 including grants of \$ 15,217,351) (Revenue \$	
	The Kent State University Foundation provided grants to Kent State University to further the University's academic, research, a	d
	public service programs.	
	·	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	, (a-parises 4	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	

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	Officials of nequired schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
^	complete Schedule A	1 2	√	
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	•	1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
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		1
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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓	
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		1
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	✓	-
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
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	✓	
	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		1
	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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e	√	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	√	
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	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a b		14a		✓
	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		1
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		1
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		✓
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		\
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		1
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		1

rait	Checklist of Required Schedules (Continued)			
00	Did the consideration and the contract of the		Yes	No
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		✓
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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? If "Yes," complete Schedule I, Parts I and II	20b 21	✓	
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? If "Yes," complete Schedule I, Parts I and III	22	•	1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30	√	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	•	✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 .	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	√	<u>✓</u>
		Form	990	(2017)

Form **990** (2017)

Series the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 100 1b 1c 100 1c 1c 100 1c 1c	Part				_
Eiter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 10 10 10 10 10 10 10 10 10 10 10 10 10		Check if Schedule O contains a response or note to any line in this Part V			. L
b Enter the number of Forms W-26 included in line 1a. Enter -0- if not applicable. □ b c Old the organization comply with backing united for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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 I at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2c Note: If the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns? 2d Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Land and the sum of lines 1a and 2a is greater than 250,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," enter the name of the foreign country low as a bank account, securities account, or other financial account in a foreign country low flow and accounts. 5b If "Yes," enter the name of the foreign country low as a bank account, or other financial account or filing requirements for FinGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b If "Yes," enter the name of the foreign country low as a bank account, or other financial account or filing requirements for FinGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax shelter transaction? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt was account	10	Fastantha must be used in Day 2 of Form 1006 Febru 0 if not applicable		105	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2b If at least one is reported on line 2a, did the organization life all required foedral employment tax returns? 2b Note. If the sum of lines 1a and 2 a is greater than 250, you may be required to e-life (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If Yes, 1 has if filed a Form 990-T for this year? If 1 16 to 16 in a 3b, provide an explanation in Schedule 0. 3b If Yes, 2 the filed a Form 990-T for this year? If 16 to 16 in a 3b, provide an explanation in Schedule 0. 3b If Yes, 2 the filed a Form 990-T for this year? If 16 to 16 in a 3b, provide an explanation in Schedule 0. 3c 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)? 5c Enter the name of the foreign country (such as a bank account, securities account, or other financial accounts)? 5c See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 5c See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 5c See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 5c See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). 5c Did any taxable party notify the organization that If was or is a party to a prohibited tax shelter transaction of the tax well and the organization solicit any contributions that the was or is a party to a prohibited tax shelter transaction is contribution or giving the very solicitation and express st			i		
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Statements, filed for the calendar year ending with or within the year covered by this return 2 2	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a					
3a y 1 1 1 1 1 1 2 3 3 y 1 1 1 2 1 3 3 y 1 1 1 2 1 3 3 y 1 1 2 1 3 3 3 3 3 4 3 1 3 1 3 3 3 4 3 1 3 3 3 4 3 3 3 4 3 3	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 2b, provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5b 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? 5b Id any taxable party notify the organization file form 8886-17 6b 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 charable contributions? 6c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$76 made partly as a contribution and partly for goods and services provided to the payor? 9 b If "Yes," did the organization informs 8282? 10 b If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 b J Ord the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 b If the organization received a contribution of qualified intellectual property, did the organization file Form 898 as required? 13 b J Ord the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file Form 898 as required? 15 b If the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file Form 899 as required? 15 b If the organization have excess business holdings at any time during the					
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)? 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? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? d If "Yes," did the organization in the average and the organization solicit any contributions that were not tax deductible as chantable contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 10 If the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 10 If the organization notify the donor of the value of the goods or services provided? 10 If "Yes," did the organization notify the donor of the value of the goods or services provided? 10 If "Yes," indicate the number of Forms &282 filed during the year 10 If "Yes," indicate the number of Forms &282 filed during the year 11 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 12 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 13 If the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file Form 1098-C? 13 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund	За				✓
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b f"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? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c f"Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? of f"Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). b f"Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). b f"Yes," did the organization in express of \$75 made partly as a contribution of the value of the goods or services provided? Of the organization receive a payment in excess of \$75 made partly as a contribution of the value of the goods or services provided? If the organization excessed in excess of \$75 made partly as a contribution of which it was required to file Form 8888 are required to file organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organizati	_		3b		_
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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? 5 Did any taxable party notify the organization file Form 8886-17 5 Did any taxable party notify the organization file Form 8886-17 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" 6 Did the organization sheld that were not tax deductible as charitable contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided? 1 If "Yes," indicate the number of Forms 8282 filed during the year 2 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 If "Yes," indicate the number of Forms 8282 filed during the year 1 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8898 as required? 1 If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file Form 8898 as required for the property of the progranization file Form 8898 as required for the property of the progranization file form 8898 as required for the property of the progranization file form 8898 as required for the property of the progranization file form 8898 as required for the property of the progranization file form 8898 as required for the property of the progranization file form 8898 as required for the property of the progranization file for			12		1
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a	h		70		-
FBAR . Sa	-	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ļ		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c if "Yes" to line 5a or 5b, did the organization file Form 886-T? 6 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? d if "Yes," did the organization include with every solicitation an express statement that such contributions or giffs were not tax deductible? 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? b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization flee from 1039-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Sponsoring organization make any taxable distributions under section 4966? b did the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(29) organizations. Enter: Intitution fees and capital contributions included on Part VIII, line 12 Gross income from members or shareholders Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(29) qu					
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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	struct	
Secti	on A. Governing Body and Management		•	<u> </u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 40			
	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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 40 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	✓	
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓	L
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		/
6 7a	Did the organization have members or stockholders?	6		✓
10	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			<u> </u>
8	stockholders, or persons other than the governing body?	7b		✓
•	the year by the following:			
а	The governing body?	8a	✓	
р	Each committee with authority to act on behalf of the governing body?	8b	✓_	
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		/
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
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	✓_	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	- /-	
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	<u> </u>	
13	Did the organization have a written whistleblower policy?	13	•	1
14	Did the organization have a written document retention and destruction policy?	14		1
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?			
а	The organization's CEO, Executive Director, or top management official	15a		✓
b	Other officers or key employees of the organization	15b		✓
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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		✓,
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		J
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► Ohio Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	501(c)(3)s	only)
	☐ 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 inte financial statements available to the public during the tax year	erest (oolicy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords	•	
	Jessica Vargo, PO Box 5190, Kent, OH 44242-0001; 330-672-0432			

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Form 990 (20

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

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

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

(2) James Bailey		any relate	d orga	anız	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(2) James Bailey 1		Average hours per week (list any hours for related organizations below dotted	box, i	unles er and	Pos neck ss pe d a d	more rson lirect	is both or/trust	an tee)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
(2) James Bailey 1	(1) Lawrence Armstrong	11	*						0	0	0
(3) Harvey J. Bazaar 1	(2) James Bailey	11	1								0
(4) Heather Cerbone 1	(3) Harvey J. Bazaar	11	,								رم
(5) Edmund Cooke 1	(4) Heather Cerbone	11	,							·	
(6) R Douglas Cowan 1	(5) Edmund Cooke	1	1								/2. 0
(7) Todd Diacon 1 (8) Barbara Donaho 1 (9) Robert DiDiano 1 (10) Timothy D. Eippert 1 √ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(6) R Douglas Cowan	1									1.)
(8) Barbara Donaho 1	(7) Todd Diacon	1							-		7
(9) Robert DiDiano 1	(8) Barbara Donaho	1									0
(10) Timothy D. Eippert 1 0 0 0	(9) Robert DiDiano	11	<u> </u>								
	(10) Timothy D. Eippert	1									
	(11) Barry Fetterman	1									
(12) Richard Frenchie 1	(12) Richard Frenchie	1	_								0
(13) Catherine Hackney 1	(13) Catherine Hackney	1									0
(14) Cathy D. Hemming 1	(14) Cathy D. Hemming	1									0

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

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

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

Check this box if neither the organization	nor any relate	d org	anız			ompe	ensa	ated any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per	box,	not ch unles	Pos eck s pe	rson	e than e	n an	(D) Reportable compensation	(E) Reportable compensation from	
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) (26) Lorı Randorf	1	1						0	0	0
(2) (27) Amy Reynolds	1	1						0	0	0
(3) (28) Joseph Rich	1	1						0	0	0
(4) (29) Rob Risman	1	1						0	0	0
(5) (30) Robert E Ross	1	1						0	0	0
(6) (31) Richard Selip	1	1						0	0	0
(7) (32) David J Sibits	1	1						0	0	. 0
(8) (33) Michael Solomon	1	1						0	0	, 0
(9) (34) Buzz Starner	1	1						0	0	0
(10) (35) Diana Strongosky	1	1		-				0	0	0
(11) (36) Beverly Warren	1	1						0	0	0
(12) (37) Daniel Wolfe	1	1						0	0	0
(13) (38) Robert Woolf	1	1						0	0	0
(14) (39) Gary L Brahler Director, Immediate Past Chair	2	, √		✓				0	0	0

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Part VII	Compensation of Officers, D	Directors, Trustees	s, Key Employees	Highest Compens	ated Employee	es, and
	Independent Contractors			•		

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

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

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

Check this box if heither the organization no	i any relate	u org	ai IIZ	allC	JII C	ombe	1156	ated any currer	it officer, director	, or trustee
					C)					
(A)	(B)	.			ition			(D)	(E)	(F)
Name and Title	Average					e than d is both		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any	2 2	5	ō	Ž	e I	ק	from	related	other
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	ള	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ect d	흉	4	ğ) yet c	٩	(W-2/1099-MISC)		organization
	below dotted	2 5	nal		ò	wä				and related
	line)	ıste	ĝ		å	Pen				organizations
		e e	tee			Highest compensated employee				
						<u> </u>				
(1) (40) Nora Jacobs	2									
Director, Board Chair		✓		✓				0	0	0
(2) (41) John Elliot	2									
Director, Board Chair Elect		✓		✓				0	0	0
(3) (42) Michelle Thomas	2									
Director, Board Secretary		✓		1				0	0	0
(4) (43) Stephen Sokany	4									
Director, Executive Director		1		1				0	0	0
(5) (44) Jessica Vargo	4									·
Director, Assistant Treasurer		1		1	1			0	0	0
(6) (45) Gregory Long	2									
Director, Treasurer		✓		✓	l			0	0	0
(7)										
(8)			_	<u> </u>		-				
(0)	 									
(9)					ļ	·····			***************************************	
				_						
(10)	 									
(11)										
(4.2)		_								
(12)	 									
(13)										
(14)	-							-		
	T	l i	1	l	ı	1	ŀ	1	l	

Form 990 (2017)



Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(4)	Position						(E)			(D			
	(A) Name and title	(B) Average			neck	more	than o		(D) Reportable	(E) Reportab	le	Fst	(F) mated	
	Name and the	hours per					ıs both or/trusi		compensation	compensation		am	ount of	
		week (list any	ek (list any 익글 등 등 음.;				육포	تر	from the	related organizatio	nos		ther ensatio	nn .
		related	dire	stitut	Officer	y en	ghes	Former	organization	(W-2/1099-N		fro	m the	
		organizations below dotted		Institutional trustee	`	Key employee	/ee	`	(W-2/1099-MISC)			-	nızatıo relatec	
		line)	rust	ã) ee	npe						nization	
			8	stee			Highest compensated employee							
(15)	Peter Holway	1	_							<u>.</u>				
(16)	Candice A. Hughes	1	✓			_								
	Richard Krumel	ļ	✓									-		
			1											
(18)	ludie Fall Lasser	11	1											
(19)	Dale Leppo	11	1											
(20)	Mark Lucas	11	1											
(21)	Steffany Matticola Larkins	1	-											
(22)	Margaret May	1	✓											
	<u> </u>		1		_									
(23)	Stephen Milkovich	1	1											
(24) (inda Neiheiser/Noelle	11	1											
(25)	Mark Polatajko	1	1							<u>-</u> .				
1b	Sub-total			•				<u>►</u>				•		_
С	Total from continuation sheets to Part	VII, Sectio	n A					▶						
<u>d</u>								<u> </u>						
2	Total number of individuals (including but reportable compensation from the organic		l to th	ose	list	ed a	above	e) w	ho received me	ore than \$10	00,000	of		
3	Did the organization list any former of	ficer direc	tor c	r tr	ucto		kov. c		alovoo or high	ost sampa	nnatad	[Yes	No
3	employee on line 1a? If "Yes," complete s											3		7
4	For any individual listed on line 1a, is the							n a	nd other comp	ensation fro	om the			
	organization and related organizations													
	ındıvıdual			•	•		•					4		✓
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or ind				
Section	on B. Independent Contractors	, ,, .	Jpi	3.0				<i>-</i> , 3	aut person	· · ·	• •	5		<u> </u>
1	Complete this table for your five highest of	compensate	ed inc	depe	ende	ent	contr	acto	ors that receive	d more that	n \$100	.000 of		
	compensation from the organization. Repyear.	ort compe	nsatio	on fo	or th	ne c	alend	ar y	ear ending wit	h or within t	he orga	anızatio	on's t	ax
	(A) Name and business add	ress			_		_		(B) Description of se	ervices		(C) Compens	ation	-
										_				
							, .							
2	Total number of independent contractor							th	ose listed abo	ve) who				
	received more than \$100,000 of compens	ation from t	ne or	ganı	ızatı	on I			0					

Par	VIII	Statement of Reve							_
		Check if Schedule O	contains	<u>a res</u>	ponse or note to			<u>.</u>	
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts ıts	1a	Federated campaigns	·	1a					
ran La	b	Membership dues .		1b					
, Ĕ	С	Fundraising events .		1c					
ar /	d	Related organizations		1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (con		1e					
ion	f	All other contributions, gi				İ			
but	ļ	and similar amounts not inc		1f	25,616,603				.
وق	g	Noncash contributions includ	ied in lines 1a		2,166,574				
Col	h	Total. Add lines 1a-1	f		•	25,616,603			
					Business Code	29/010/000			
/en	2a					· · · · ·			
Re	b								
<u>ic</u>	c						_		
ēr	d								
E	e							•	
Program Service Revenue	f	All other program sen							
Pro	g	Total. Add lines 2a-2			▶				
	3	Investment income							
		and other similar amo	unts) .		•	7,674,145	7,674,145		
	4	Income from investment	t of tax-exei	npt be	ond proceeds ▶				
	5	Royalties			. ` . ▶ !				
			(ı) Real		(II) Personal				
	6a	Gross rents							
	b	Less: rental expenses							
	С	Rental income or (loss)					.		
	d	Net rental income or (loss) .		•				
	7a	Gross amount from sales of	(ı) Securit	es	(II) Other	1			
		assets other than inventory	52,16	8,756					
	b	Less. cost or other basis							
		and sales expenses	50,04	1,653	3				
	С	Gain or (loss)	2,12	7,103					
	d	Net gain or (loss) .			▶	2,127,103	2,127,103		
6)									
venue	8a	Gross income from fu	ndraising						
		events (not including \$							
Other Re		of contributions reporte				:			
Jer		See Part IV, line 18 .				·			
E	b	Less: direct expenses							
	C				events .				
	9a	Gross income from ga							
		See Part IV, line 19 .							
		Less: direct expenses							
		Net income or (loss) fi	-	_	vities ▶				· ·
	10a	Gross sales of in							
		returns and allowance							
		Less: cost of goods s							
	С	· · · · · · · · · · · · · · · · · · ·		ot inve			_		
	4.4	Miscellaneous R			Business Code				
		Trust tax return prepar				14,000	14,000		
	b								
	С	All all and an arrangement							
	d	All other revenue .				11.400			
	e	Total. Add lines 11a-			,	14,600			
	12	Total revenue. See in	structions		▶	35,431,851	9,815,248		

	90 (2017) IX Statement of Functional Expenses			. <u>.</u>	Page 10
Section	on 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon				
	nt include amounts reported on lines 6b, 7b, o, 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	15,217,351	15,217,351		
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees		1		
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10 11	Other employee benefits				
а	Fees for services (non-employees): Management	400 000			
C D	Legal	(13,265) 51,537		(13,265) 51,537	
d e	Lobbying				
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	819,566		819,566	
12 13	Advertising and promotion	3,427		3,427	
14	Information technology				
15 16	Royalties	286		286	
17 18	Travel				
19	Conferences, conventions, and meetings .	53,959		53,959	-
20	Interest	491,002		491,002	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	254,389		254,389	
23	Insurance	12,961		12,961	
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.)				
а	Rank foos	50,708		50 700	
b	Professional advancement	455		50,708 455	
c	Property taxes	10		10	
ď				<u></u>	
е	All other expenses	2,864		2,864	
25	All other expenses	16,945,250	15,217,351	1,727,899	_
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)				

-	art A	Observed Only and the Ocean Asian and the served of the se	D- 4 V		
		Check if Schedule O contains a response or note to any line in this			
	,		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	4,692,757	1	2,749,506
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	12,001,250	3	20,443,860
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors	· ·		
		trustees, key employees, and highest compensated employees	i		
		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' beneficiar	у		
ets		organizations (see instructions) Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	11,061,000	7	11,061,000
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	ļ		
	_	other basis. Complete Part VI of Schedule D 10a 12,811,7			
	b	Less: accumulated depreciation 10b 1,128,5			11,683,124
	11	Investments—publicly traded securities	145,700,021		145,822,168
	12	Investments—other securities. See Part IV, line 11	24,195,455	-	43,300,057
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,805,884		4,109,618
	16	Total assets. Add lines 1 through 15 (must equal line 34)	213,393,880		239,169,333
	17	Accounts payable and accrued expenses	184,291		359,459
	18	Grants payable		18	
	19	Deferred revenue	-	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Ë	22	Loans and other payables to current and former officers, directors trustees, key employees, highest compensated employees, and			
Ē		disqualified persons. Complete Part II of Schedule L	·		
Liabilities	22			22	
_	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	-	23	
	25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part)			
		of Schedule D	23,446,973	25	24 500 000
	26	Total liabilities. Add lines 17 through 25	23,631,264		24,598,068 24,957,527
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ ar		20	24,957,327
ės		complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	13,668,183	27	15,946,480
ब्रह	28	Temporarily restricted net assets	125.665,038		138,615,403
D	29	Permanently restricted net assets	50,429,395		59,649,923
5		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ an	d		00/010/020
7		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Nei	33	Total net assets or fund balances	189,762,616	33	214,211,806
_	34	Total liabilities and net assets/fund balances	213,393,880		239,169,333
	_				Form 990 (2017)

_	4	•
Page	1	4

	<u> </u>				-g—
Part	XI Reconciliation of Net Assets		_		
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u> </u>	. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	1		35,4	31,851
2	Tòtal expenses (must equal Part IX, column (A), line 25)	2		16,9	45,2 <u>50</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		18,4	86,601
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		189,70	62,616
5	Net unrealized gains (losses) on investments	5		5,6	44,569
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		3.	18,020
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		214,2	11,806
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ı	n		
	Schedule O.			<u> </u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	oiled o	or		
	reviewed on a separate basis, consolidated basis, or both				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_	
b	Were the organization's financial statements audited by an independent accountant?		2b	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a 🗀		
	separate basis, consolidated basis, or both:		ļ		
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersigt/	nt 🗀		
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	' 2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın i	n		
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n		
	the Single Audit Act and OMB Circular A-133?		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		е 🗀		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			For	m 990	(2017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2017
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

nation. Inspection
Employer identification number

Kent	State l	Jniversity Foundation, Inc.						76307	
Par		Reason for Public Cha						ons.	
The c	•	zation is not a private founda		,	-	•	•	$\Delta I \Delta$	
1		church, convention of churc						<i>(</i>) <i>W</i>	
2	□ A	school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z).)	U	
3	\square A	hospital or a cooperative ho	spital service org	ganization described i	ın sectio ı	n 170(b)(1)(A)(iii).		
4	□ A	medical research organization	on operated in co	onjunction with a hosp	pital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the	
	ho	ospital's name, city, and state	e:						
5		n organization operated for ection 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	tal unit described in	
6		federal, state, or local gover	•	montal unit december	lun coati	on 170/b	V4V/AV/A		
7		organization that normally						a tha ganaral nublic	
•		escribed in section 170(b)(1)			port iron	i a govei	minerital unit of from	ii tile general public	
_									
8		community trust described i							
9	or	n agricultural research organ runiversity or a non-land-gra niversity:							
10	☐ Ar	n organization that normally i	receives: (1) mor	e than 331/3% of its si	upport fro	om contri	butions, membershi	p fees, and gross	
	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses								
	ac	equired by the organization a	t income and un fter June 30-19	related business taxa 75. See section 509 /	ole incon	ne (less s molete P:	ection 5 i i tax) from art III \	businesses	
11		n organization organized and							
		n organization organized and	•	•	-			rny out the nurnoses	
'-		one or more publicly suppo							
		neck the box in lines 12a thro							
_								_	
а	Ц	Type I. A supporting organ the supported organization							
		supporting organization. Ye					ine directors or trust	ees or the	
				·					
b	Ш	Type II. A supporting organ							
		control or management of		•		e persons	that control or man	age the supported	
	_	organization(s). You must	-						
С		Type III functionally integ						ally integrated with,	
	_	its supported organization(•	•		-	· ·		
d		Type III non-functionally i							
		that is not functionally integ						id an attentiveness	
		requirement (see instructio	ns) You must c	omplete Part IV, Sec	ctions A	and D, ai	nd Part V.		
е		Check this box if the organ						e II, Type III	
		functionally integrated, or I	Гуре III non-func	tionally integrated sup	pporting	organızat	ion.		
f	Ente	er the number of supported o	organizations .						
g		vide the following information							
	(i) Nan	ne of supported organization	(iı) EIN		(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of	
				(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see	
				above (see instructions))			instructions)	instructions)	
					Yes	No			
/A\									
(A)									
(D)									
(B)									
						-	_		
(C)									
(D)				_			_	` `	
(D)						}			
	-		-	-					
(E)									
Total									

Part	Support Schedule for Organization (Gomplete only if you checked the						•	
	Part III. If the organization fails to						,	
Secti	on A. Public Support				alle ann			
	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10,964,206	18,471,224	15,623,933	24,947,532	25,616,604	95,623,499	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	,	10,111,121	10/025/030	2.,0,002		, , , , , , , , , , , , , , , , , , ,	
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	10,964,206	18,471,224	15,623,933	24,947,532	25,616,604	95,623,499	
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 (i)	To Remark to 1970			स्कृत वस्तुत्र	at Angers - Tung The	G- (00 t	
6	Public support. Subtract line 5 from line 4	A -42	A 43E	1 1 Pri Law State Street Mile 3 Cm		क्षा १८) हो कि एक एक कि	45 1115	
	on B. Total Support	T					· · · · · · · · · · · · · · · · · · ·	
	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
7 8	Amounts from line 4	2,716,612	18,471,224 8,503,176	15,623,933 7,653,600	24,947,532 3,027,703	25,616,604 7,688,145	95,623,499 29,589,236	
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.)							
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the support of t					12	125,212,735	
10	organization, check this box and stop he	•			, or militax ye		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Secti	on C. Computation of Public Suppo							
14	Public support percentage for 2017 (line			1. column (fl)		14	71.25 %	
15 16a b	Public support percentage from 2016 Sc 33 ¹ / ₃ % support test—2017. If the organ box and stop here. The organization qua 33 ¹ / ₃ % support test—2016. If the organization qua	hedule A, Part eization did not alifies as a publ ization did not	II, line 14 check the box icly supported check a box o	on line 13, and organization in 16 or 16	 nd line 14 is 33 Sa, and line 15		72.87 % check this ► ✓ ore, check	
17a	this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2017. 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—2 15 is 10% or more, and if the organization is supported organization. Private foundation. If the organization described in the organization of the organization described in the org	ation meets the meets the "factorians".	e "facts-and-c ts-and-circums	circumstances' stances' test.	" test, check the the organizati	this box and son qualifies as	stop here. a publicly ►	
18	instructions						_	

Daga	3
rane	-

Part III	Support Schedule 1	for Organizations	Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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										
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	/(e) 2017	(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					į į				
	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			ý						
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		1							
	line 6.)	,	1							
Section B. Total Support										
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013/	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
9	Amounts from line 6									
10a	· · · · · · · · · · · · · ·									
	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	/								
С	Add lines 10a and 10b	<i>y</i>								
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	ne organizatior	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)			
	organization, check this box and stop he	re	· · · · ·	· · · · ·			<u> </u>			
	on C. Computation of Public Suppor			- (2)		T .= T				
15	Public support percentage for 2017 (line 8					15	<u>%</u>			
16	Public support percentage from 2016 Sch	nedule A, Part	III, line 15 .	· · _	• • •	16	%			
	on D. Computation of Investment In				(6)	1 - 1				
17	Investment income percentage for 2017 (<u>%</u>			
18	Investment income percentage from 2016					18	<u>%</u>			
19a	331/3% support tests - 2017. If the organ									
	17 is not more than 331/3%, check this box									
b	331/3% support tests – 2016. If the organiz	ation aid not c	neck a box on	iine 14 or line 1	ya, and line 16	is more than 3	331/3%, and			
	line 18 is not more than 331/3%, check this l									
20	Private foundation. If the organization di	d not check a	box on line 14,	19a, or 19b, c	heck this box	and see instru	ctions 🕨 🗌			

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on 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)			
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		
С	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 12a or 12b 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		
С	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		
Ь	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		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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 I of Schedule L (Form 990 or 990-EZ).]
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 .	8		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9a		二
С	Did a disqualified person (as defined in line 9a) 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 .	9b 9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b 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		

		•	•	
	e A (Form 990 or 990-EZ) 2017		1	Page 5
Part	Supporting Organizations (continued)		1.,	
11	Has the organization accented a gift or contribution from any of the following persons?	_	Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1		
•	below, the governing body of a supported organization?	11a	 	
b	A family member of a person described in (a) above?	11b		
	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		
	on 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? 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	1		ļI
2	Did the organization operate for the benefit of any supported organization other than the supported	<u> </u>		-
_	organization(s) that operated, supervised, or controlled the supporting organization? 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	2		
Secti	on 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	ļ		
	or trustees of each of the organization's supported organization(s)? 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).			
Secti	on D. All Type III Supporting Organizations	1	<u> </u>	<u> </u>
OCOL!	ST D. All Type III Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			1
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).				
		2		
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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Section	on E. Type III Functionally Integrated Supporting Organizations	3]
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netru	otion	
' a	The organization satisfied the Activities Test. Complete line 2 below.	nsu u	Cuons	3).
b	The organization satisfied the Activities rest. Complete line 2 below. 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 in	struct	ions)
		300 111		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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? 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.			─
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			1
	of the organization's supported organization(s) would have been engaged in? 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.

Parent of Supported Organizations. Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

2b

За

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	<u>jani</u>	zations	<u> </u>
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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):	I		
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-functionall		egrated Type III support	ng organization (ccc
Instructions).	y 1111	cgrated Type III supporti	ng organization (See

Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			1
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	h the organization is res	ponsive	•
(provide details in Part VI). See instructions				
9 Distributable amount for 2017 from Section C, line 6				
10	-			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6		·	
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions.	,		
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
e	From 2016	l I		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7:			_
а	Applied to underdistributions of prior years	l		
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if	'		
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018 Add lines 3 _j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

	
Schedule A (F 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.)
	1
	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2017
Open to Public

Inspection

Name of the organization Employer identification number Kent State University Foundation, Inc. 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 Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year 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 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? . . . Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 . . 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 Assets included in Form 990, Part X . . .

Pari	Organizations Maintaining	Collections of	Art, Historica	Treasures,	or Other	r Similar Ass	ets (cont	inued)
3	Using the organization's acquisition, collection items (check all that apply):		ner records, ch	eck any of the	following	that are a sig	inificant us	se of its
а	✓ Public exhibition		d 🗌 Loa	an or exchange	e program	ıs		
b	✓ Scholarly research		e 🗌 Oth	-				
С	Preservation for future generations	s	_					
4	Provide a description of the organizar		nd explain how	thev further t	the organi	zation's exemi	ot purpose	ın Part
	XIII.						pp	
5	During the year, did the organization	solicit or receive of	donations of an	t historical tre	easures o	r other similar		
•	assets to be sold to raise funds rather							✓ No
Pari								<u> </u>
	Complete if the organization 990, Part X, line 21.		on Form 990	, Part IV, line	9, or rep	orted an amo	ount on F	orm
1a	Is the organization an agent, trustee	, custodian or othe	er intermediary	for contributi	ons or otl	ner assets not		
	included on Form 990, Part X?						☐ Yes	□No
b	If "Yes," explain the arrangement in P							
-						Am	ount	
С	Beginning balance				1c			
d	Additions during the year .				1d			
e	Distributions during the year				1e			
f					1f			
2a	Did the organization include an amount					count liability?	□ Voc	□ No
	If "Yes," explain the arrangement in P					•		
Par		art Alli Oneck here	il the explanat	ion has been	Ji Ovided C	mi art Am .	• •	Ш
ı en	Complete if the organization	anewordd "Voe"	on Form 900	Part IV line	10			
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two years		Three years back	(e) Four yea	are back
4-	Decimens of year balance				- ` `			
1a	Beginning of year balance	\$129,069,236	\$110,746,7			\$110,911,722		<u>,584,795</u>
b	Contributions	5,295,046	9,033,6	52 5,4	26,838	9,273,652	4	<u>,813,722</u>
С	Net investment earnings, gains, and							
_	losses	9,709,616	14,637,4		4,369)	368,501		<u>,957,248</u>
	Grants or scholarships	5,956,388	5,348,7	14 4,7	73,135	4,636,410	4	<u>,444,043</u>
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance	\$138,117,510	\$129,069,2			\$115,917,465	\$110	,911,722
2	Provide the estimated percentage of t	the current year end	d balance (line	1g, column (a)) held as:			
а	Board designated or quasi-endowmer	nt ▶	2%					
b	Permanent endowment ▶	39%						
C	Temporarily restricted endowment ▶	59%						
	The percentages on lines 2a, 2b, and	2c should equal 10	00%					
За	Are there endowment funds not in the	e possession of the	e organization t	hat are held a	ınd admın	istered for the		
	organization by:						Ye	s No
	(i) unrelated organizations						3a(i) ✓	
	(ii) related organizations						3a(ii)	√
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as required on	Schedule R?			3b	
4	Describe in Part XIII the intended uses							
Part						_		
	Complete if the organization		on Form 990	Part IV line	11a See	Form 990 F	Part X line	a 10
	Description of property	(a) Cost or oth		t or other basis	(c) Accu		(d) Book va	
	becomplient of property	(investme	1,,,	(other)	depred		(G) DOOR VE	1146
	Land		540 121	1 040 022				207.044
b	Buildings	•	549,121	1,848,823		1 120 500		,397,944
	•			10,413,773		1,128,592	9	<u>,285,181</u>
C	Leasehold improvements	·						
d	Equipment	·				<u> </u>		
e	Other	·		<u> </u>		- _		
ı otal.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	U, Part X, colum	nn (B), line 10d	c.)	▶_	11,	,683,125

Part VII	Investments - Other Securities Complete if the organization ans		rm 00	O Part IV line	o 11h Soo For	m 990 Part V line 12
	(a) Description of security or category) Book value		fethod of valuation
•	(including name of security)		٥,	o) Book value		nd-of-year market value
(1) Financial	derivatives					
	neld equity interests					
(3) Other				_		
(A) Munici	pal Bond			94,496	End-of-year mar	ket value
(B) Private	Equity				End-of-year net a	
(C) Hedge	Funds				End-of-year net	
(D) Real A	ssets				End-of-year net a	
(E) Bond 1	[rust			11,543,716	End-of-year net	asset value
(F)						
(G) (H)						
	h) must soud form 000 Port V and (D) Inc. 10) h					
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related	4		43,300,057		
r art viii	Complete if the organization ans		rm QQ	0 Part IV line	a 11c See For	m 000 Part Y line 13
	(a) Description of investment	wered 163 Off Of	T) Book value		Method of valuation
	(a) Description of investment		(0,	, Book value		nd-of-year market value
(1)				-		
(2)						· · · · · · · · · · · · · · · · · · ·
(3)						.
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column (i	b) must equal Form 990, Part X, col (B) line 13) ▶					,
Part IX	Other Assets.					
	Complete if the organization ansi	wered "Yes" on For	rm 99	0, Part IV, line	e 11d. See For	
	(a	a) Description				(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
<u>(7)</u>						
(8)						
(9)	mn (b) must equal Form 990, Part X, co	ol /P) (mo 15.)			•	
Part X	Other Liabilities.	oi. (b) line 15.)	•	• •	· · ·	
raitA	Complete if the organization ansi	wered "Ves" on For	m 99	0 Part IV line	11e or 11f S	ee Form 990 Part Y
	line 25.	weled les offici	111 33	o, raitiv, iiik	e i le or i ii. S	ee ronn 330, Fan A,
1.	(a) Description of liability	(b) Book value				
(1) Federal in		(-)				
(2) Funds he		10.59	35,475			
(3) Capital I		·	3,652			
(4) Actuaria			78,941		The same of the same of	* * * ETLER NO T
(5)		,	,,,,,,,			
(6)	-			l I		
(7)						
(8)		· · · · · · · · · · · · · · · · · · ·		- 12.00 10.00 10.00 10.00 - 12.00 10.00 10.00 10.00	-	yen – e- , bernañ
(9)						
Total. (Column (I	b) must equal Form 990, Part X, col. (B) line 25) ▶	24,59	8,068			
2. Liability for	uncertain tax positions. In Part XIII, provi	de the text of the footn	ote to	the organization	's financial stater	nents that reports the
organization's	s liability for uncertain tax positions under	FIN 48 (ASC 740) Che	ck her	e if the text of the	ne footnote has be	een provided in Part XIII

Part	 		•	Return.	
1	Complete if the organization answered "Yes" on Form 990, Total revenue, gains, and other support per audited financial statements		v, iirie 12a.	1	44.004.440
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				41,394,440
		10-1			
a	Net unrealized gains (losses) on investments		5,644,569		
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	318,020		
е	•			2e	5,962,589
3	Subtract line 2e from line 1	· · ·		3	35,431,851
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				
b	Other (Describe in Part XIII.)	4b			
				4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	35,431,851
Part				r Return) .
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	16,945,250
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a		1	
þ	Prior year adjustments	2b			
C	Other losses	2c	,		
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	16,945,250
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 1)	ne 18)		5	16,945,250
	XIII Supplemental Information.				
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ar				
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to pro	vide any additional inf	formation.	•
Part III,	1a: Purchases of collection items are expensed as incurred. Items contribute	ed to co	llections during the ye	ar are not	reflected in the
Found	ation's financial statements. Proceeds from deaccessions or insurance recov	eries ar	e reflected as increase	s in the ap	propriate
net ass	et classes. The Foundation received proceeds of \$6,733 from deaccessions	during t	he year ended June 30,	2018 and	\$365
during	the year ended June 30, 2017.				
Part III,	4: The Foundation owns certain historical fashion items. The Kent State Univ	versity I	Museum maintains cus	tody of the	ese items which
provide	e the basis for the museum's exhibits and an academic resource for Kent Sta	te Unive	ersity.		
Part V,	4: The endowment funds of the Foundation are invested with the purpose of	usina tl	ne earnings to support	the needs	and priorities of
Kent S	tate University.				
Part X.	2: Pursuant to determination by the Internal Revenue Service, the Foundation	n is exe	mot from federal incom	ne tax und	er section 501 (c)
:::::	at the most as the contract of vice to diffidult		ps		
(3) of ti	ne Internal Revenue Code. The Foundation recognizes a benefit only if it is "n	nore-like	elv-than-not" that the ta	av nasitiar	would be
57. XI. II		.O. E-11K	organismos unas me ta	v hosinoi	. 47uiu DE
Sustair	ned in a tax examination, with a tax examination being presumed to occur. Th	o amoii	nt recognized to the for	anet ame:	int of tax bosses
Justail	The man and committee of the state of the st	e alliUU	in recognized is the lan	Acor quior	in oi lax denent
that is:	greater than 50% likely of being realized on examination. For tax positions no	t mooti	na tha "mara likalu sha	n not!! to-	no tou bourefit
uiat 15	greater than 30% likely or being realized on examination. For tax positions no	ı, meetl	ig die more-likely-tha	ı-not" tesi	, no tax penerit
	rded. Management has concluded that they are unaware of any uncertain tax	h a a - 6°	a an Itabiliate - A- 4-	· ·	
	icien, wiadanement has concunen inat they are linaware of any lincertain tay	Denetif	s or Hadilities to be fect	nanizea at	HIND KILL ZOTALOF

Schedule D (Form 990) 2017	Page 5
Part XIII Supplemental Information (continued)	
2017. The Foundation would recognize interest and penalties related to unrecognized tax benefits in interest and	income tax, respectively.
The Foundation has no amounts accrued for interest or penalties at June 30, 2018 or 2017. The Foundation does in	not expect the total amount
of unrecognized tax benefits to significantly change in the next twelve months.	
Part XI, 2d: Change in Actuarial Liability \$318,020	·
······································	
······································	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.

2017	Open to Public
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OMB No 1545-0047 Inspection Employer identification number

Kent State University Foundation, Inc. Part I General Information on Grants and Assist	c. n on Grants and	Assistance					34-6576307
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	tain records to subs	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility for	r the grants or assistance	1
the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant finds in the United States.	o award tne grants on procedur	or assistance? es for monitoring	the use of grant fu	nds in the United	States		· · · Yes No
	Assistance to Do	mestic Organiz	ations and Don	estic Governm	ents. Complete if	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form	Jered "Yes" on Form
1	for any recipient	that received m	ore than \$5,000.	Part II can be d	uplicated if additio	990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	
1 (a) Name and address of organization or government	(p) 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 noncash assistance	(h) Purpose of grant or assistance
(1) Kent State University PO Box 5190, Kent, OH 44242-0001	31-6402079	115(a)	15,217,351				Education programs
(2)	-						
(9)							
(4)							
(5)							
(9)							
(1)	,						
(8)	·						
(6)							
(10)							:
(11)	ï						
(12)							
2 Enter total number of section 501(c)(3) and governmen3 Enter total number of other organizations listed in the l	organizations listed	ernment organizat I in the line 1 table	t organizations listed in the line 1 table line 1 table	ne 1 table			- O
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruction	s for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017) (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part III S ဖ က

SCHEDULE M (Form 990)

Noncash Contributions

Employer identification number

OMB No 1545-0047 2017

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Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Kent State University Foundation, Inc. 34-6576307 Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art 1 2 Art—Historical treasures . . . ✓ 11 3 Art - Fractional interests . . : 4 Books and publications . 5 Clothing and household goods . Cars and other vehicles . . . 6 128,117 Auction 201 7 Boats and planes 8 Intellectual property . . . 9 Securities-Publicly traded . . 76 1,971,410 Securities-Closely held stock . 10 9 67,047 Securities-Partnership, LLC, 11 or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution-Other . . . 15 Real estate-Residential . Real estate-Commercial . . 16 Real estate-Other 17 18 Collectibles . 19 Food inventory 20 Drugs and medical supplies . . 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts . . . 24 25 Other ► (_____) 26 Other ► (_____) 27 Other ► (28 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 Yes No 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 isn't required to be used for exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 ✓ 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a **b** If "Yes." describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II

Schedule M (Form 990) 2017 Page	2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.	
Part 1, 32b:	The Kent State University Foundation uses licensed brokers to sell publicly traded securities and auction firms to sell vehicles	
received as	s non-cash contributions.	
Part 1, 33: I	Items considered art-historical treasures are additions to the musuem collection. The Foundation has chosen not to report such	
items in the	e revenue statement and balance sheet, as permitted under SFAS 116 (ASC958).	
	······································	
	······	

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047 2017 Open to Public Inspection

Employer identification number

34-6576307

Department of the Treasury Internal Revenue Service Name of the organization

Kent State University Foundation, Inc.

► Go to www.irs.gov/Form990 for the latest information.

Form 990, Part VI, 11b: A complete copy of Form 990 was sent electronically to all members of the Board of Directors for review before it was filed with the IRS. Form 990, Part VI, 12c: Annually, board members of the Kent State University Foundation must review the conflict-of-interest policy, disclose any conflicts, and acknowledge this by signing a letter stating adherence to the policy. Members who have a conflict of interest with a proposed transaction must excuse themselves from discussion of, and voting on, the transaction Form 990, Part VI, 19: The Kent State University Foundation makes its governing documents, conflict-of-interest policy, and financial statements available to the public upon request. All requests need to be in writing and delivered by hand, US mail, or email. Form 990, Part XI, 9: Change in actuarial liability \$318,020