

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the **2011** calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.		D Employer identification number 31-1140889
	Doing Business As		E Telephone number 502-585-4649
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	325 W. MAIN STREET 1110		G Gross receipts \$ 19,861,045.
City or town, state or country, and ZIP + 4 LOUISVILLE, KY 40202		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
F Name and address of principal officer: SUSAN A. BARRY SAME AS C ABOVE		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.CFLOUISVILLE.COM			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1985 M State of legal domicile: KY	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3 14	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 14	
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5 0	
	6 Total number of volunteers (estimate if necessary)	6 14	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.	
b Net unrelated business taxable income from Form 990-T, line 34	7b 0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 11,094,209.	Current Year: 6,483,868.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	476,441.	357,293.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,570,650.	6,841,161.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,690,511.	10,028,326.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	397,365.	428,581.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,087,876.	10,456,907.	
19 Revenue less expenses. Subtract line 18 from line 12	3,482,774.	-3,615,746.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 14,792,841.	End of Year: 11,301,195.
	21 Total liabilities (Part X, line 26)	89,760.	166,649.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,703,081.	11,134,546.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	MATTHEW L. BACON, VICE PRESIDENT & CFO		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	REBECCA L. PHILLIPS, CPA		
Paid Preparer Use Only	Firm's name	Firm's EIN	PTIN
	MOUNTJOY CHILTON MEDLEY LLP	27-1235638	P00024055
Paid Preparer Use Only	Firm's address	Phone no. (502) 749-1900	
	462 S. FOURTH ST., SUITE 2000 LOUISVILLE, KY 40202-3445		

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO STRENGTHEN OUR REGION THROUGH INSPIRED PHILANTHROPY AND OUTSTANDING STEWARDSHIP BY: PARTNERING WITH DONORS TO ENSURE LASTING IMPACT, LEVERAGING OUR KNOWLEDGE OF OUR COMMUNITIES, AND OFFERING OUR CONSTITUENTS AN UNMATCHED LEVEL OF PERSONAL ENGAGEMENT.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,423,534. including grants of \$ 10,028,326.) (Revenue \$) DISTRIBUTE CONTRIBUTIONS AND GRANTS TO 501(C)(3) ORGANIZATIONS, QUALIFYING UNDER SECTION 509(A).

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

4e Total program service expenses 10,423,534.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form area containing questions 1a through 14b with Yes/No columns and input fields.

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed KY
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: _____
 THE COMMUNITY FOUNDATION OF LOUISV - 502-585-4649
 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) HENRY M. ALTMAN JR. CHAIRPERSON OF THE BOARD	2.00	X		X				0.	0.	0.
(2) MIMI ZINNIEL VICE CHAIRPERSON OF THE BOARD	2.00	X		X				0.	0.	0.
(3) MARIA G. HAMPTON SECRETARY OF THE BOARD	2.00	X		X				0.	0.	0.
(4) ERIC W. TAYLOR TREASURER OF THE BOARD	2.00	X		X				0.	0.	0.
(5) F. GERALD GREENWELL DEVELOPMENT & STEWARDSHIP COMM. CHAI	2.00	X						0.	0.	0.
(6) ELIZABETH S. PEABODY INVESTMENT COMM. CHAIR	2.00	X						0.	0.	0.
(7) JACQUELINE C. GIBBS COMPENSATION COMM. CHAIR	2.00	X						0.	0.	0.
(8) SUSAN MOSS COMMUNICATIONS & MARKETING COMM. CHA	2.00	X						0.	0.	0.
(9) SHARON A. RECEVEUR STRATEGIC INITIATIVE COMM. CHAIR	2.00	X						0.	0.	0.
(10) BONITA K. BLACK BOARD DEVELOPMENT COMM. CHAIR	2.00	X						0.	0.	0.
(11) TERRY L. SINGER GRANTS COMM. CHAIR	2.00	X						0.	0.	0.
(12) DOROTHY S. RIDINGS MEMBER - AT - LARGE	2.00	X						0.	0.	0.
(13) JEFFEREY M. YUSSMAN MEMBER - AT - LARGE	2.00	X						0.	0.	0.
(14) MARSHALL BRADLEY, JR. MEMBER - AT - LARGE	2.00	X						0.	0.	0.
(15) SUSAN A BARRY PRESIDENT & CEO	5.00			X				0.	213,745.	21,580.
(16) MATTHEW L. BACON VP & CFO BEGAN JULY 2011	5.00			X				0.	55,188.	707.
(17) SUSAN V. NICHOLSON VP & CFO THROUGH JULY 2011	5.00			X				0.	86,264.	7,770.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ALEXANDRA SPOELKER VP, COMMUNITY LEADERSHIP	5.00			X				0.	64,997.	8,632.
(19) MICHAEL J. SCHULTZ VP, DEVELOPMENT & STEWARDSHIP	5.00			X				0.	65,253.	8,968.
(20) ANNE E. MONELL VP, COMMUNICATIONS & MARKETING	5.00			X				0.	73,021.	11,509.
1b Sub-total								0.	558,468.	59,166.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	558,468.	59,166.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 6,483,868.				
	g Noncash contributions included in lines 1a-1f: \$	4,975,643.				
	h Total. Add lines 1a-1f	▶ 6,483,868.				
	Program Service Revenue	2 a _____	Business Code			
b _____						
c _____						
d _____						
e _____						
f All other program service revenue						
g Total. Add lines 2a-2f		▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶▶▶	334,153.		334,153.	
	4 Income from investment of tax-exempt bond proceeds	▶▶▶				
	5 Royalties	▶▶▶				
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)	▶	23,140.		23,140.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events		▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a _____						
	b _____					
	c _____					
	d All other revenue					
	e Total. Add lines 11a-11d	▶				
12 Total revenue. See instructions.	▶	6,841,161.	0.	0.	357,293.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	10,028,326.	10,028,326.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	33,373.		33,373.	
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EARNINGS DISTRIBUTED T	395,208.	395,208.		
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,456,907.	10,423,534.	33,373.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	110,115.	1	84,429.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	3,623.	4	2,197.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
	7 Notes and loans receivable, net	192,772.	7	179,358.	
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a			
	b Less: accumulated depreciation	10b		10c	
	11 Investments - publicly traded securities	11,747,806.	11	9,502,335.	
	12 Investments - other securities. See Part IV, line 11	2,738,525.	12	1,532,876.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	14,792,841.	16	11,301,195.		
Liabilities	17 Accounts payable and accrued expenses	89,760.	17	166,649.	
	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		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	89,760.	26	166,649.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	300,246.	27	284,305.	
	28 Temporarily restricted net assets	14,402,835.	28	10,850,241.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	14,703,081.	33	11,134,546.	
34 Total liabilities and net assets/fund balances	14,792,841.	34	11,301,195.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,841,161.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,456,907.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,615,746.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,703,081.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	47,211.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	11,134,546.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2011)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC. **Employer identification number**
31-1140889

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,837,796.	4,451,488.	7,860,930.	11,094,209.	6,483,868.	39,728,291.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9,837,796.	4,451,488.	7,860,930.	11,094,209.	6,483,868.	39,728,291.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4,779,380.
6 Public support. Subtract line 5 from line 4.						34,948,911.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	9,837,796.	4,451,488.	7,860,930.	11,094,209.	6,483,868.	39,728,291.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	741,793.	575,669.	425,084.	372,175.	334,153.	2,448,874.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						42,177,165.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	82.86	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	82.57	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2011

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.

Employer identification number

31-1140889

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 550,949.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 519,581.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 479,421.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 301,766.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 265,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 206,334.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	STOCK	\$ 440,259.	01/10/12
2	STOCK/PROPERTY	\$ 519,581.	06/01/12
3	STOCK	\$ 426,275.	03/29/12
4	STOCK/PROPERTY	\$ 301,766.	12/29/11
6	STOCK/PROPERTY	\$ 206,334.	11/15/11
		\$	

Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.

Employer identification number
31-1140889

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	498	
2 Aggregate contributions to (during year)	6,483,868.	
3 Aggregate grants from (during year)	10,028,326.	
4 Aggregate value at end of year	10,850,241.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

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

4 Number of states where property subject to conservation easement is located ▶ _____

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

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

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

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

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				0.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) WAYCROSS LP INVESTMENT	1,532,876.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	1,532,876.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

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

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

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

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

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

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (CODE).

ADDITIONALLY, THE COMMUNITY FOUNDATION HAS BEEN DETERMINED BY THE INTERNAL

REVENUE SERVICE NOT TO BE A PRIVATE FOUNDATION WITHIN THE CONTEXT OF

SECTION 509(A) OF THE CODE.

WHEN APPLICABLE, THE FOUNDATION RECOGNIZES UNCERTAIN INCOME TAX POSITIONS

USING THE "MORE-LIKELY-THAN-NOT" APPROACH AS DEFINED IN THE ACCOUNTING

Part XIV Supplemental Information *(continued)*

STANDARDS CODIFICATION. NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN
REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE FOUNDATION'S 2008
THROUGH 2011 TAX YEARS REMAIN OPEN AND SUBJECT TO EXAMINATION.

COPY

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.**

Employer identification number
31-1140889

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHERN BAPTIST THEOLOGICAL SEMINARY - 2825 LEXINGTON ROAD - LOUISVILLE, KY 40206	61-0500919	501(C)(3)	1,200,000.	0.			EDUCATION
COMMUNITY FOUNDATION OF LOUISVILLE INC. - 325 W. MAIN ST., STE. 1110 - LOUISVILLE, KY 40202	31-0997017	501(C)(3)	838,914.	0.			PHILANTHROPY, VOLUNTARISM
METRO UNITED WAY DEPT 52860 P.O. BOX 950148 LOUISVILLE, KY 40295-0148	61-0444680	501(C)(3)	590,218.	0.			PHILANTHROPY, VOLUNTARISM
YEW DELL, INC. P.O. BOX 1334 CRESTWOOD, KY 40014	61-1390688	501(C)(3)	540,550.	0.			ENVIRONMENT
SECOND PRESBYTERIAN CHURCH 3701 OLD BROWNSBORO ROAD LOUISVILLE, KY 40207	61-0466721	501(C)(3)	351,865.	0.			RELIGION-RELATED
ASSOCIATION OF WALDORF SCHOOLS OF NORTH AMERICA - 337 OAK GROVE ST. - MINNEAPOLIS, MN 55403	23-2083226	501(C)(3)	289,764.	0.			EDUCATION

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **238.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE UNIVERSITY OF LOUISVILLE FOUNDATION, INC. - 215 CENTRAL AVE., #300 - LOUISVILLE, KY 40208	23-7078461	501(C)(3)	219,855.	0.			EDUCATION
21ST CENTURY PARKS, INC. 471 W. MAIN ST. # 202 LOUISVILLE, KY 40202	20-1780317	501(C)(3)	181,250.	0.			RECREATION & SPORTS
SOUTHEAST CHRISTIAN CHURCH OF JEFFERSON COUNTY KENTUCKY INC. - 920 BLANKENBAKER PKWY - LOUISVILLE, KY 40243	61-0850307	501(C)(3)	166,319.	0.			RELIGION-RELATED
TRINITY HIGH SCHOOL FOUNDATION, INC. - 4011 SHELBYVILLE RD. - LOUISVILLE, KY 40207-9824	31-1105966	501(C)(3)	143,800.	0.			EDUCATION
ASBURY COLLEGE ONE MACKLEM DRIVE WILMORE, KY 40390	61-0458355	501(C)(3)	140,000.	0.			EDUCATION
FUND FOR THE ARTS, INC. 623 WEST MAIN STREET LOUISVILLE, KY 40202	61-0479626	501(C)(3)	133,035.	0.			ARTS, CULTURE & HUMANITIES
DOWNTOWN DEVELOPMENT CORPORATION 401 W.MAIN ST #1702 LOUISVILLE, KY 40202	31-0992627	501(C)(3)	100,050.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
SIMMONS COLLEGE OF KENTUCKY 1018 S. 7TH ST LOUISVILLE, KY 40203	20-5289168	501(C)(3)	100,000.	0.			EDUCATION
UNIVERSITY OF COLORADO FOUNDATION 4740 WALNUT STREET BOULDER, CO 80301-9922	84-6049811	501(C)(3)	100,000.	0.			EDUCATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY - LOUISVILLE AREA COMMAND - P.O. BOX 1149 - LOUISVILLE, KY 40201-1149	58-0660607	501(C)(3)	93,800.	0.			HUMAN SERVICES
NATURE CONSERVANCY - KENTUCKY CHAPTER - 642 W. MAIN STREET - LEXINGTON, KY 40508-2018	53-0242652	501(C)(3)	86,982.	0.			ENVIRONMENT
SPEED ART MUSEUM 2035 SOUTH THIRD ST. LOUISVILLE, KY 40208	61-0444823	501(C)(3)	82,980.	0.			ARTS, CULTURE & HUMANITIES
NATURAL RESOURCES DEFENSE COUNCIL P.O. BOX 1830 MERRIFIELD, VA 22116-8030	13-2654926	501(C)(3)	80,450.	0.			ENVIRONMENT
ANTHROPOSOPHIC PRESS P.O. BOX 799 GREAT BARRINGTON, MA 01230	13-1790720	501(C)(3)	75,000.	0.			RELIGION-RELATED
KENTUCKY DANCE COUNCIL 315 EAST MAIN STREET LOUISVILLE, KY 40202	61-6033779	501(C)(3)	67,282.	0.			ARTS, CULTURE & HUMANITIES
CABBAGE PATCH SETTLEMENT HOUSE, INC. - 1413 SOUTH SIXTH STREET - LOUISVILLE, KY 40208	61-0458359	501(C)(3)	67,200.	0.			HUMAN SERVICES
KILGORE SAMARITAN COUNSELING CENTER - PO BOX 6728 - LOUISVILLE, KY 40206	61-1131420	501(C)(3)	66,200.	0.			MENTAL HEALTH & CRISIS INTERVENTION
CAMPUS CRUSADE FOR CHRIST INTERNATIONAL - 100 LAKE HART DR. #3500 - ORLANDO, FL 32862	33-0863088	501(C)(3)	65,300.	0.			RELIGION-RELATED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY P.O. BOX 2038 NEW HAVEN, CT 06521-2038	06-0646973	501(C)(3)	64,100.	0.			EDUCATION
CENTER FOR INTERFAITH RELATIONS 415 W. MUHAMMAD ALI BLVD # 101 LOUISVILLE, KY 40202-2344	61-1149619	501(C)(3)	62,700.	0.			ARTS, CULTURE & HUMANITIES
WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989	54-0519590	501(C)(3)	60,600.	0.			EDUCATION
WORLD HARVEST MISSION 101 WEST AVENUE #305 JENKINTOWN, PA 19046	23-2223692	501(C)(3)	60,000.	0.			RELIGION-RELATED
ASSUMPTION HIGH SCHOOL 2170 TYLER LANE LOUISVILLE, KY 40205	61-1133759	501(C)(3)	59,263.	0.			EDUCATION
WALDORF EARLY CHILDHOOD ASSOCIATION OF NORTH AMERICA - 285 HUNGRY HOLLOW RD. - SPRING VALLEY, NY 10977	52-1841089	501(C)(3)	55,000.	0.			EDUCATION
TRINITY HIGH SCHOOL 4011 SHELBYVILLE ROAD LOUISVILLE, KY 40207	61-1256093	501(C)(3)	54,063.	0.			EDUCATION
LOUISVILLE PRESBYTERIAN THEOLOGICAL SEMINARY - 1044 ALTA VISTA ROAD - LOUISVILLE, KY 40205-1798	61-0444768	501(C)(3)	53,950.	0.			RELIGION-RELATED
ACTORS THEATRE OF LOUISVILLE INC. 316 WEST MAIN STREET LOUISVILLE, KY 40202	61-0645030	501(C)(3)	53,518.	0.			ARTS, CULTURE & HUMANITIES

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HAWTHORNE VALLEY ASSOCIATION 327 COUNTY ROUTE 21C GHENT, NY 12075	13-2722428	501(C)(3)	50,000.	0.			EDUCATION
ROTARY FUND OF LOUISVILLE, INC. 401 WEST MAIN ST #810 LOUISVILLE, KY 40202	61-6029858	501(C)(3)	46,600.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
CONCORDIA LUTHERAN CHURCH 1127 E. BROADWAY LOUISVILLE, KY 40204	61-0461819	501(C)(3)	36,792.	0.			RELIGION-RELATED
ISAAC W. BERNHEIM FOUNDATION, INC. P.O. BOX 130 CLERMONT, KY 40110-0130	61-0444651	501(C)(3)	35,220.	0.			ENVIRONMENT
FILSON HISTORICAL SOCIETY 1310 SOUTH THIRD STREET LOUISVILLE, KY 40208	61-0444690	501(C)(3)	35,200.	0.			ARTS, CULTURE & HUMANITIES
HARVEST USA 3901 B MAIN ST. #304 PHILADELPHIA, PA 19127	23-2684968	501(C)(3)	35,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
JEWISH HOSPITAL & ST. MARY'S HEALTHCARE FOUNDATION - 250 E. LIBERTY ST. #612 - LOUISVILLE, KY 40202	61-1029768	501(C)(3)	33,700.	0.			HEALTH CARE
THE KENTUCKIANAWORKS FOUNDATION INC. - 410 W. CHESTNUT ST., #200 - LOUISVILLE, KY 40202	37-1508088	501(C)(3)	33,334.	0.			EDUCATION
KENTUCKY COUNTRY DAY SCHOOL 4100 SPRINGDALE ROAD LOUISVILLE, KY 40241	61-0731998	501(C)(3)	32,400.	0.			EDUCATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLARMINE UNIVERSITY 2001 NEWBURG ROAD LOUISVILLE, KY 40205	61-0482955	501(C)(3)	31,365.	0.			EDUCATION
UNIVERSITY OF NEBRASKA FOUNDATION 1010 LINCOLN MALL, SUITE 300 LINCOLN, NE 68508	47-0379839	501(C)(3)	30,594.	0.			EDUCATION
OUR LADY OF TEPEYAC HIGH SCHOOL 2228 S. WHIPPLE CHICAGO, IL 60623	36-3409095	501(C)(3)	30,000.	0.			EDUCATION
TEACH KENTUCKY 2205 LOWELL AVE. LOUISVILLE, KY 40205	20-4009920	501(C)(3)	28,700.	0.			EDUCATION
HIGHLAND PRESBYTERIAN CHURCH 1011 CHEROKEE ROAD LOUISVILLE, KY 40204	61-0538145	501(C)(3)	28,300.	0.			RELIGION-RELATED
FAMILY & CHILDREN'S PLACE 2303 RIVER ROAD #200 LOUISVILLE, KY 40206	61-0549561	501(C)(3)	25,650.	0.			HUMAN SERVICES
MILTON ACADEMY 170 CENTRE STREET MILTON, MA 02186-9932	04-2103603	501(C)(3)	25,000.	0.			EDUCATION
OPERATION MIGRATION-USA INC 1623 MILITARY ROAD 639 NIAGARA FALLS, NY 14304	16-1560518	501(C)(3)	25,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
KENTUCKY EDUCATION RESTORATION ALLIANCE - 12910 SHELBYVILLE RD #200 - LOUISVILLE, KY 40243	26-4175849	501(C)(3)	25,000.	0.			EDUCATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALING PLACE INC 1020 WEST MARKET STREET LOUISVILLE, KY 40202	61-1164775	501(C)(3)	24,800.	0.			MENTAL HEALTH & CRISIS INTERVENTION
ST. VINCENT DE PAUL SOCIETY COUNCIL OF LOUISVILLE - 1015-C SOUTH PRESTON STREET - LOUISVILLE, KY 40203	61-0727110	501(C)(3)	23,700.	0.			MENTAL HEALTH & CRISIS INTERVENTION
HABITAT FOR HUMANITY OF METRO LOUISVILLE - 1620 BANK STREET - LOUISVILLE, KY 40203	58-1735528	501(C)(3)	22,200.	0.			HOUSING & SHELTER
JUSTFAITH MINISTRIES INC PO BOX 221348 LOUISVILLE, KY 40252	20-1377228	501(C)(3)	22,000.	0.			RELIGION-RELATED
YMCA OF GREATER LOUISVILLE 545 S. 2ND STREET LOUISVILLE, KY 40202	61-0444843	501(C)(3)	21,700.	0.			HUMAN SERVICES
KENTUCKY HORSE PARK FOUNDATION 4089 IRON WORKS PARKWAY LEXINGTON, KY 40511	62-1257717	501(C)(3)	20,100.	0.			RECREATION & SPORTS
JEWISH HOSPITAL & ST. MARY'S HEALTHCARE, INC. - 250 E. LIBERTY ST. #612 - LOUISVILLE, KY 40202	61-1029768	501(C)(3)	20,000.	0.			HEALTH CARE
HIGHLANDER RESEARCH & EDUCATION 1959 HIGHLANDER WAY NEW MARKET, TN 37820	62-0646373	501(C)(3)	20,000.	0.			ENVIRONMENT
WEST END PREPARATORY SCHOOL 3628 VIRGINIA AVENUE LOUISVILLE, KY 40211	04-3798875	501(C)(3)	19,350.	0.			EDUCATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINONA LAKE GRACE BRETHERN CHURCH 1200 KINGS HWY. WINONA LAKE, IN 46590	35-1319207	501(C)(3)	19,000.	0.			RELIGION-RELATED
ST. FRANCIS SCHOOL INC. 11000 U.S. HWY. 42 GOSHEN, KY 40026	61-0663057	501(C)(3)	18,840.	0.			EDUCATION
MARYHURST, INC. 1015 DORSEY LANE LOUISVILLE, KY 40223	31-1542209	501(C)(3)	18,250.	0.			MENTAL HEALTH & CRISIS INTERVENTION
KENTUCKY PUBLIC RADIO INC 619 SOUTH 4TH STREET LOUISVILLE, KY 40202	61-1259787	501(C)(3)	18,070.	0.			ARTS, CULTURE & HUMANITIES
FELLOWSHIP OF CHRISTIAN ATHLETES 901 CLAREVA RD SELLERSBURG, IN 47172	44-0610626	501(C)(3)	18,000.	0.			RELIGION-RELATED
LOUISVILLE COLLEGIATE SCHOOL 2427 GLENMARY AVENUE LOUISVILLE, KY 40204	61-0449630	501(C)(3)	16,850.	0.			EDUCATION
HOSPARUS INC 3532 EPHRAIM MCDOWELL DRIVE LOUISVILLE, KY 40205	61-0921718	501(C)(3)	15,551.	0.			HUMAN SERVICES
CAMP PASQUANEY 5 SOUTH STATE ST. CONCORD, NH 03301-3721	02-0227848	501(C)(3)	15,500.	0.			RECREATION & SPORTS
PLANNED PARENTHOOD OF KENTUCKY 1025 SOUTH 2ND STREET LOUISVILLE, KY 40203-9944	61-0481704	501(C)(3)	15,270.	0.			HEALTH CARE

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MIDDLETOWN CHRISTIAN CHURCH 500 NORTH WATTERSON TRAIL LOUISVILLE, KY 40243	61-0602014	501(C)(3)	15,000.	0.			RELIGION-RELATED
NATIONAL ALOPECIA ARESTA FOUNDATION - 14 MITCHELL BLVD - SAN RAFAEL, CA 94903	94-2780249	501(C)(3)	15,000.	0.			HEALTH CARE
KENTUCKY OPERA ASSOCIATION 323 W. BROADWAY, SUITE 601 LOUISVILLE, KY 40202	61-6013111	501(C)(3)	14,600.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY HUMANE SOCIETY 1000 LYNDON LANE #B LOUISVILLE, KY 40222	61-0463938	501(C)(3)	14,400.	0.			ANIMAL-RELATED
NATIVITY ACADEMY AT ST. BONIFACE 529 E. LIBERTY STREET LOUISVILLE, KY 40202	51-0450314	501(C)(3)	14,350.	0.			EDUCATION
BOYS & GIRLS CLUBS INC. P.O. BOX 4989 LOUISVILLE, KY 40204	61-0568789	501(C)(3)	14,250.	0.			YOUTH DEVELOPMENT
JEWISH COMMUNITY OF LOUISVILLE INC. - 3630 DUTCHMANS LANE - LOUISVILLE, KY 40205	61-0444765	501(C)(3)	14,000.	0.			PHILANTHROPY, VOLUNTARISM
HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE, KY 40206	61-0445834	501(C)(3)	13,900.	0.			HUMAN SERVICES
REGIONAL CANCER CENTER CORPORATION 529 SOUTH JACKSON STREET LOUISVILLE, KY 40202-3277	61-0936656	501(C)(3)	13,900.	0.			MEDICAL RESEARCH

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LOUISVILLE SCIENCE CENTER 727 WEST MAIN STREET LOUISVILLE, KY 40202	31-1005850	501(C)(3)	13,358.	0.			ARTS, CULTURE & HUMANITIES
COMMONWEALTH FUND FOR KET 560 COOPER DRIVE LEXINGTON, KY 40502	61-1285473	501(C)(3)	13,350.	0.			PHILANTHROPY, VOLUNTARISM
AMERICAN RED CROSS - LOUISVILLE AREA CHAPTER - 510 EAST CHESTNUT STREET - LOUISVILLE, KY 40201	53-0196605	501(C)(3)	13,300.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
RIVER FIELDS, INC. 455 SOUTH 4TH ST, STE 990 LOUISVILLE, KY 40202-2525	61-6032501	501(C)(3)	13,150.	0.			ENVIRONMENT
PHILLIPS EXETER ACADEMY 20 MAIN STREET EXETER, NH 03833-9980	02-0222174	501(C)(3)	13,000.	0.			EDUCATION
KENTUCKY WESLEYAN COLLEGE 3000 FREDERICA STREET OWENSBORO, KY 42301	61-0466713	501(C)(3)	13,000.	0.			EDUCATION
SACRED HEART SCHOOLS INC. 3177 LEXINGTON ROAD LOUISVILLE, KY 40206	61-1181710	501(C)(3)	12,950.	0.			EDUCATION
BOY SCOUTS OF AMERICA - LINCOLN HERITAGE COUNCIL - P.O. BOX 36273 - LOUISVILLE, KY 40233-6273	61-0445839	501(C)(3)	12,315.	0.			YOUTH DEVELOPMENT
CHANCE SCHOOL, INC. 4200 LIME KILN LANE LOUISVILLE, KY 40222-5999	61-0549871	501(C)(3)	12,000.	0.			EDUCATION

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SUMMIT ACADEMY OF GREATER LOUISVILLE, INC. - 11508 MAIN STREET - LOUISVILLE, KY 40243	61-1214457	501(C)(3)	11,500.	0.			EDUCATION
BLOOM ELEMENTARY SCHOOL 1627 LUCIA AVE. LOUISVILLE, KY 40204	61-1021128	501(C)(3)	11,485.	0.			EDUCATION
EAGLE RIDGE CHURCH OF GOD 2808 WALDO AVE MIDLAND, MI 48642	38-6030899	501(C)(3)	11,231.	0.			RELIGION-RELATED
LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION - 301 YORK STREET - LOUISVILLE, KY 40203-2257	61-0969361	501(C)(3)	11,215.	0.			EDUCATION
RANDOLPH COLLEGE 2500 RIVERMONT AVENUE LYNCHBURG, VA 24503	54-0505941	501(C)(3)	11,000.	0.			EDUCATION
KENTUCKY NATURAL LANDS TRUST, INC. 433 CHESTNUT ST. BERE A, KY 40403	61-1276913	501(C)(3)	11,000.	0.			ENVIRONMENT
WORLD VISION INTERNATIONAL P.O. BOX 9716 FEDERAL WAY, WA 98063-9716	95-1922279	501(C)(3)	11,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
DREAMS WITH WINGS 1579 BARDSTOWN ROAD LOUISVILLE, KY 40205	61-1371540	501(C)(3)	11,000.	0.			HUMAN SERVICES
JUNIOR ACHIEVEMENT OF KENTUCKIANA 1401 W. MUHAMMAD ALI BLVD. LOUISVILLE, KY 40203	61-0476694	501(C)(3)	10,900.	0.			EDUCATION

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MARMION ACADEMY 1000 BUTTERFIELD ROAD AURORA, IL 60504-9743	36-2258521	501(C)(3)	10,700.	0.			EDUCATION
DUPONT MANUAL HIGH SCHOOL ALUMNI ASSOCIATION - 120 W. LEE STREET - LOUISVILLE, KY 40208-1999	61-1229522	501(C)(3)	10,250.	0.			EDUCATION
ROBERT E. LEE MEMORIAL ASSOCIATION, INC. - 485 GREAT HOUSE ROAD - STRATFORD, VA 22558	54-0536105	501(C)(3)	10,100.	0.			ARTS, CULTURE & HUMANITIES
CATHOLIC EDUCATION FOUNDATION 401 W. MAIN ST. #806 LOUISVILLE, KY 40202	61-1294640	501(C)(3)	10,070.	0.			EDUCATION
THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT ST - PHILADELPHIA, PA 19104-6285	23-1352685	501(C)(3)	10,000.	0.			EDUCATION
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH, PA 15213	25-0969449	501(C)(3)	10,000.	0.			EDUCATION
WILMINGTON COLLEGE 1870 QUAKER WAY WILMINGTON, OH 45177	31-0537514	501(C)(3)	10,000.	0.			EDUCATION
MOUNTAIN ASSOCIATION FOR COMMUNITY ECONOMIC DEVELOPMENT, INC - 433 CHESTNUT ST - BEREA, KY 40403	31-0900246	501(C)(3)	10,000.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
UNITED WAY OF PALM BEACH COUNTY 2600 QUANTUM BLVD BOYNTON BEACH, FL 33426	59-0683258	501(C)(3)	10,000.	0.			PHILANTHROPY, VOLUNTARISM

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LEXINGTON HEARING AND SPEECH CENTER INC - 350 HENRY CLAY BLVD. - LEXINGTON, KY 40502	61-0593951	501(C)(3)	10,000.	0.			HEALTH CARE
PATTON MUSEUM FOUNDATION, INC. P.O. BOX 25 FORT KNOX, KY 40121	61-0623420	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES
CHRYSALIS HOUSE, INC. 1589 HILL RISE DR. LEXINGTON, KY 40504	61-1012290	501(C)(3)	10,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
HOPE CENTER INC. PO BOX 6 LEXINGTON, KY 40588	61-1107296	501(C)(3)	10,000.	0.			HOUSING & SHELTER
EASTERN KENTUCKY UNIVERSITY FOUNDATION, INC. - 521 LANCASTER AVE. - RICHMOND, KY 40475-3102	61-1131682	501(C)(3)	10,000.	0.			EDUCATION
BLUEGRASS CONSERVANCY, INC. 380 S. MILL ST. #205 LEXINGTON, KY 40508-2560	61-1293032	501(C)(3)	10,000.	0.			ENVIRONMENT
LIFE IN ABDUNDANCE INTERNATIONAL 1605 E. ELIZABETH ST. #1069 PASADENA, CA 91104	02-0587875	501(C)(3)	10,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
KENTUCKY SCHOOL OF ART 845 S 3RD ST. LOUISVILLE, KY 40203	27-2232797	501(C)(3)	9,900.	0.			EDUCATION
THE MORTON CENTER, INC. 1028 BARRETT AVE. LOUISVILLE, KY 40204	31-1068020	501(C)(3)	9,700.	0.			MENTAL HEALTH & CRISIS INTERVENTION

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FAMILY SCHOLAR HOUSE, INC. 403 REG SMITH CIRCLE LOUISVILLE, KY 40208-2746	61-1285124	501(C)(3)	9,650.	0.			HUMAN SERVICES
LOUISVILLE OLMSTED PARKS CONSERVANCY, INC. - 1299 TREVILIAN WAY - LOUISVILLE, KY 40233	61-1196368	501(C)(3)	9,000.	0.			RECREATION & SPORTS
CHAMBER MUSIC SOCIETY OF LOUISVILLE - 30 RIVER HILL ROAD - LOUISVILLE, KY 40207	61-6026098	501(C)(3)	9,000.	0.			ARTS, CULTURE & HUMANITIES
ST. FRANCIS HIGH SCHOOL INC. 11000 U.S. HWY. 42 GOSHEN, KY 40026	61-0663057	501(C)(3)	8,925.	0.			EDUCATION
WAYSIDE CHRISTIAN MISSION 432 E. JEFFERSON ST. LOUISVILLE, KY 40257-0249	61-0667139	501(C)(3)	8,850.	0.			HUMAN SERVICES
LOUISVILLE ORCHESTRA, INC. 323 W. BROADWAY, STE. 700 LOUISVILLE, KY 40202	61-6000384	501(C)(3)	8,700.	0.			ARTS, CULTURE & HUMANITIES
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3)	8,600.	0.			HEALTH CARE
HEARTLAND CHURCH 9665 HAGUE ROAD INDIANAPOLIS, IN 46256	35-2108005	501(C)(3)	8,500.	0.			RELIGION-RELATED
UNIVERSITY OF KENTUCKY STURGILL DEVELOPMENT BUILDING LEXINGTON, KY 40506-1500	61-6001218	501(C)(3)	8,500.	0.			EDUCATION

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JOHN & MABLE RINGLING MUSEUM OF ART FOUNDATION - 5401 BAY SHORE RD - SARASOTA, FL 34243	59-6214423	501(C)(3)	8,000.	0.			ARTS, CULTURE & HUMANITIES
WHAS CRUSADE FOR CHILDREN, INC. 520 WEST CHESTNUT LOUISVILLE, KY 40202	23-7075524	501(C)(3)	7,975.	0.			HUMAN SERVICES
FAIRNESS EDUCATION FUND 2263 FRANKFORT AVENUE LOUISVILLE, KY 40201	61-1230383	501(C)(3)	7,950.	0.			EDUCATION
CENTRE COLLEGE 600 W. WALNUT ST DANVILLE, KY 40422	61-0444671	501(C)(3)	7,700.	0.			EDUCATION
UNITY OF LOUISVILLE, INC. 757 S. BROOK STREET LOUISVILLE, KY 40203	61-0469289	501(C)(3)	7,500.	0.			RELIGION-RELATED
CITY PARKS ALLIANCE INC 2121 WARD COURT NW 5TH FLOOR WASHINGTON, DC 20037	80-0015566	501(C)(3)	7,500.	0.			ENVIRONMENT
WELLSPRING, INC. P.O. BOX 1927 LOUISVILLE, KY 40201	31-1020023	501(C)(3)	7,454.	0.			MENTAL HEALTH & CRISIS INTERVENTION
CEREBRAL PALSY KIDS CENTER 982 EASTERN PARKWAY #6 LOUISVILLE, KY 40217	61-0492378	501(C)(3)	7,380.	0.			DISEASES, DISORDERS & MEDICAL DISCIPLINES
CEDAR LAKE FOUNDATION 7984 LAGRANGE ROAD LOUISVILLE, KY 40222	61-1093278	501(C)(3)	7,350.	0.			HUMAN SERVICES

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VALLEY VIEW BAPTIST CHURCH 501 VALLEY VIEW DR VINEGROVE, KY 40175	61-0949987	501(C)(3)	7,300.	0.			RELIGION-RELATED
HAND IN HAND MINISTRIES 2225 STEIER LANE LOUISVILLE, KY 40218	61-1352889	501(C)(3)	7,300.	0.			RELIGION-RELATED
SHIVELY AREA MINISTRIES 4415 DIXIE HWY LOUISVILLE, KY 40216	61-1134579	501(C)(3)	7,250.	0.			HOUSING & SHELTER
BROOKLAWN, INC. 3121 BROOKLAWN CAMPUS DR. LOUISVILLE, KY 40218	61-0471572	501(C)(3)	7,155.	0.			MENTAL HEALTH & CRISIS INTERVENTION
ST. MEINRAD ARCHABBEY 200 HILL DRIVE ST. MEINRAD, IN 47577	35-0868161	501(C)(3)	7,125.	0.			RELIGION-RELATED
VOLUNTEERS OF AMERICA OF KENTUCKY 933 GOSS AVENUE LOUISVILLE, KY 40217	61-0480950	501(C)(3)	7,125.	0.			HUMAN SERVICES
FATHER MALONEY'S BOYS' HAVEN, INC. 2301 GOLDSMITH LN. LOUISVILLE, KY 40218	61-0479621	501(C)(3)	7,100.	0.			HUMAN SERVICES
CROSSCURRENTS INTERNATIONAL INSTITUTE - 7122 HARDIN WAPUK RD. - SIDNEY, OH 45365	31-1037394	501(C)(3)	7,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
NEIGHBORHOOD HOUSE 201 NORTH 25TH STREET LOUISVILLE, KY 40212	61-0445842	501(C)(3)	6,600.	0.			HUMAN SERVICES

Schedule I (Form 990)

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ACLU OF KENTUCKY FOUNDATION 315 GUTHRIE ST #300 LOUISVILLE, KY 40202	61-6058569	501(C)(3)	6,395.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY
A CHOICE FOR LIFE INC. 101 W. MARKET ST. LOUISVILLE, KY 40202	61-1142823	501(C)(3)	6,300.	0.			MENTAL HEALTH & CRISIS INTERVENTION
SHAKER VILLAGE OF PLEASANT HILL 3501 LEXINGTON ROAD HARRODSBURG, KY 40330-8846	61-0592561	501(C)(3)	6,200.	0.			ARTS, CULTURE & HUMANITIES
HANOVER COLLEGE PO BOX 108 HANOVER, IN 47243	35-0868096	501(C)(3)	6,000.	0.			EDUCATION
KENTUCKY SHAKESPEARE FESTIVAL 323 W BROADWAY, #401 LOUISVILLE, KY 40202-2476	61-6036654	501(C)(3)	6,000.	0.			ARTS, CULTURE & HUMANITIES
HISTORIC LOCUST GROVE, INC. 561 BLANKENBAKER LANE LOUISVILLE, KY 40207-1168	61-1390403	501(C)(3)	5,950.	0.			ARTS, CULTURE & HUMANITIES
LOUISVILLE ZOO FOUNDATION, INC. 1100 TREVILIAN WAY LOUISVILLE, KY 40233-9902	31-0971742	501(C)(3)	5,900.	0.			ANIMAL-RELATED
DARE TO CARE FOOD BANK 5803 FERN VALLEY ROAD LOUISVILLE, KY 40232	23-7345952	501(C)(3)	5,800.	0.			FOOD, AGRICULTURE & NUTRITION
CITY ON A HILL PRODUCTIONS 13149 MIDDLETOWN INDUSTRIAL BLVD., LOUISVILLE, KY 40223	48-1301649	501(C)(3)	5,800.	0.			RELIGION-RELATED

Schedule I (Form 990)

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LIVING DESERT RESERVE 47900 PORTOLA AVENUE PALM DESERT, CA 92260	95-3385354	501(C)(3)	5,750.	0.			ENVIRONMENT
LIFEHOUSE, INC. 2710 RIEDLING DR LOUISVILLE, KY 40206	20-8514733	501(C)(3)	5,700.	0.			HUMAN SERVICES
AMERICANA COMMUNITY CENTER 4801 SOUTHSIDE DR LOUISVILLE, KY 40214-2111	61-1251306	501(C)(3)	5,600.	0.			HUMAN SERVICES
PEACE EDUCATION PROGRAM, INC. 318 W. KENTUCKY ST. LOUISVILLE, KY 40203	61-1220204	501(C)(3)	5,555.	0.			HUMAN SERVICES
ENVIROMENTAL DEFENSE INCORPORATED 257 PARK S NEW YORK, NY 10010	11-6107128	501(C)(3)	5,500.	0.			ENVIRONMENT
ALUMNI FUND ASSOCIATION OF YALE UNIVERSITY - PO BOX 2038 - NEW HAVEN, CT 06521-2038	06-6078326	501(C)(3)	5,500.	0.			EDUCATION
PRODIGAL MINISTRIES PO BOX 1484 CRESTWOOD, KY 40014	61-1275040	501(C)(3)	5,400.	0.			HUMAN SERVICES
BATES COLLEGE 2 ANDREWS ROAD LEWISTON, ME 04240-6028	01-0211781	501(C)(3)	5,100.	0.			EDUCATION
ST. JOHN CENTER FOR THE HOMELESS 700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE, KY 40202-3614	61-1135907	501(C)(3)	5,100.	0.			HUMAN SERVICES

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VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE NASHVILLE, TN 37235	62-0476822	501(C)(3)	5,100.	0.			EDUCATION
ST. LABRE INDIAN SCHOOL 1000 TONGUE RIVER ROAD ASHLAND, MT 59003	81-0244542	501(C)(3)	5,100.	0.			EDUCATION
PRISON FELLOWSHIP MINISTRIES 44180 RIVERSIDE PKWY, #100 LANSLOWNE, VA 20176	51-0247185	501(C)(3)	5,100.	0.			CRIME & LEGAL-RELATED
BLUE GRASS FARMS CHAPLAINCY 340 LEGION DRIVE, SUITE 20 LEXINGTON, KY 40504	20-0374962	501(C)(3)	5,000.	0.			HUMAN SERVICES
CROSSWORLD 10000 N. OAK TRAFFICWAY KANSAS CITY, MO 64155	23-1352564	501(C)(3)	5,000.	0.			RELIGION-RELATED
GASPARILLA ISLAND CONSERVATION & IMPROVEMENT ASSOC. - PO BOX 446 - BOCA GRANDE, FL 33921	23-7097778	501(C)(3)	5,000.	0.			ENVIRONMENT
FRIENDS OF AL-ROWWAD USA INC 4005 N. 24TH STREET TACOMA, WA 98406-4804	26-3503743	501(C)(3)	5,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
LOUISVILLE CIVIC VENTURES INC 401 S 4TH ST., #555 LOUISVILLE, KY 40202	31-0945941	501(C)(3)	5,000.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
SASS SCHOLARSHIP FOUNDATION 13331 DORSEY CIR WESTMINISTER, CA 92683	33-0921106	501(C)(3)	5,000.	0.			EDUCATION

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF THE ASCENSION 4600 LYNNBROOK LOUISVILLE, KY 40220	61-0447247	501(C)(3)	5,000.	0.			RELIGION-RELATED
WALDEN SCHOOL 4238 WESTPORT ROAD LOUISVILLE, KY 40207	61-0883146	501(C)(3)	5,000.	0.			EDUCATION
KENTUCKY MUSEUM OF ART AND CRAFT 715 WEST MAIN STREET LOUISVILLE, KY 40202	61-0985312	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES
LEXINGTON OPERA SOCIETY P.O. BOX 8463 LEXINGTON, KY 40533-8463	61-1170162	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES
CATHOLIC CHARITIES OF LOUISVILLE, INC. - 2911 S. FOURTH ST. - LOUISVILLE, KY 40208	61-1239600	501(C)(3)	5,000.	0.			HUMAN SERVICES
ENERGIZED BAPTIST CHURCH 3107 7TH STREET RD. LOUISVILLE, KY 40216	61-1364835	501(C)(3)	5,000.	0.			RELIGION-RELATED
LAMB & LION MINISTRIES P.O. BOX 919 MCKINNEY, TX 75070	75-1717049	501(C)(3)	5,000.	0.			RELIGION-RELATED
NATIONAL FOUNDATION TO SUPPORT CELL TRANSPLANT RESEARCH - 333 EAST MAIN STREET, #304 - LOUISVILLE, KY 40202	83-0392250	501(C)(3)	5,000.	0.			MEDICAL RESEARCH
BANDERA YOUNG LIFE P.O. BOX 1751 BANDERA, TX 78003	84-0385934	501(C)(3)	5,000.	0.			PHILANTHROPY, VOLUNTARISM

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARE AND SHARE INC 2605 PREAMBLE PT COLORADO SPRINGS, CO 80915	84-0731930	501(C)(3)	5,000.	0.			FOOD, AGRICULTURE & NUTRITION
PALM SPRING ART MUSEUM 101 MUSEUM DR PALM SPRINGS, CA 92262	95-1809576	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES
COLONIAL WILLIAMSBURG FOUNDATION P.O. BOX 1776 WILLIAMSBURG, VA 23187	54-0505888	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES
ACADEMY OF ARTS PO BOX 782 TAYLORS, SC 29687	59-1525472	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES
SHEPHERDS HOUSE INC 154 BONNIE BRAE DRIVE LEXINGTON, KY 40508	61-1105573	501(C)(3)	5,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
ANTHROPOSOPHICAL SOCIETY IN AMERICA - 1923 GEDDES AVE. - ANN ARBOR, MI 48104	90-0015962	501(C)(3)	5,000.	0.			YOUTH DEVELOPMENT
WATERFRONT DEVELOPMENT CORPORATION 129 EAST RIVER ROAD LOUISVILLE, KY 40202	32-0049006	GOVERNMENT MUNIC	22,600.	0.			RECREATION & SPORTS
BELFRY HIGH SCHOOL P.O. BOX 160 BELFRY, KY 41514	61-1110695	GOVERNMENT MUNIC	5,000.	0.			EDUCATION
ST. FRANCIS IN THE FIELDS EPISCOPAL CHURCH - 6710 WOLF PEN BRANCH ROAD - HARRODS CREEK, KY 40027	61-0444805	RELIGIOUS ORGANI	125,685.	0.			RELIGION-RELATED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHDIOCESE OF LOUISVILLE P. O. BOX 1073 LOUISVILLE, KY 40201-1073	61-0447247	RELIGIOUS ORGANI	62,267.	0.			RELIGION-RELATED
FIRST CHRISTIAN CHURCH 401 W. POPLAR ST. ELIZABETHTOWN, KY 42701	61-0535161	RELIGIOUS ORGANI	56,800.	0.			RELIGION-RELATED
FIRST PRESBYTERIAN CHURCH - ELIZABETHTOWN - 1016 PEAR ORCHARD DR. - ELIZABETHTOWN, KY 42701	61-0183855	RELIGIOUS ORGANI	47,483.	0.			RELIGION-RELATED
CENTENARY UNITED METHODIST CHURCH 1441 PERRYVILLE ROAD DANVILLE, KY 40422	61-0518020	RELIGIOUS ORGANI	38,100.	0.			RELIGION-RELATED
CHRIST CHURCH UNITED METHODIST CHURCH - 4614 BROWNSBORO ROAD - LOUISVILLE, KY 40207	61-0449611	RELIGIOUS ORGANI	36,700.	0.			RELIGION-RELATED
ST. XAVIER HIGH SCHOOL 1609 POPLAR LEVEL ROAD LOUISVILLE, KY 40217	61-0480949	RELIGIOUS ORGANI	36,400.	0.			EDUCATION
BROADWAY BAPTIST CHURCH 4000 BROWNSBORO ROAD LOUISVILLE, KY 40207	61-6001947	RELIGIOUS ORGANI	34,700.	0.			RELIGION-RELATED
BASILICA OF ST. JOSEPH PROTO-CATHEDRAL - 310 WEST STEPHEN FOSTER - BARDSTOWN, KY 40004	61-0485640	RELIGIOUS ORGANI	34,545.	0.			RELIGION-RELATED
ST. ANDREW'S EPISCOPAL CHURCH 11 GIDDEN ST. NEWCASTLE, ME 04553-0234	01-0264364	RELIGIOUS ORGANI	34,100.	0.			RELIGION-RELATED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE TEMPLE-CONGREGATION ADATH ISRAEL BRITH SHOLOM - 5101 U.S. HIGHWAY 42 - LOUISVILLE, KY 40241	61-0918772	RELIGIOUS ORGANI	29,362.	0.			RELIGION-RELATED
ST. MARK'S EPISCOPAL CHURCH 2822 FRANKFORT AVENUE LOUISVILLE, KY 40206	61-0444813	RELIGIOUS ORGANI	24,200.	0.			RELIGION-RELATED
HARVEY BROWNE PRESBYTERIAN CHURCH 311 BROWNS LANE LOUISVILLE, KY 40207	61-0529829	RELIGIOUS ORGANI	21,995.	0.			RELIGION-RELATED
FIRST UNITED METHODIST CHURCH - MIDLAND - P. O. BOX 466 - MIDLAND, MI 48640	38-1368752	RELIGIOUS ORGANI	21,500.	0.			RELIGION-RELATED
COATES STREET PRESBYTERIAN CHURCH 601 WEST COATES ST. MOBERLY, MO 65270	43-0713519	RELIGIOUS ORGANI	20,000.	0.			RELIGION-RELATED
HARRODSBURG BAPTIST CHURCH 312 S. MAIN STREET HARRODSBURG, KY 40330	61-0500917	RELIGIOUS ORGANI	18,600.	0.			RELIGION-RELATED
ST. JAMES EPISCOPAL CHURCH 13 FEDERAL ST. BRUNSWICK, ME 04011-1589	01-0363023	RELIGIOUS ORGANI	18,400.	0.			RELIGION-RELATED
LOUISVILLE ANGLICAN MISSION 200 N. BIRCHWOOD AVE LOUISVILLE, KY 40206	20-1699388	RELIGIOUS ORGANI	18,369.	0.			RELIGION-RELATED
CALVARY EPISCOPAL CHURCH 821 SOUTH FOURTH STREET LOUISVILLE, KY 40203	13-5562208	RELIGIOUS ORGANI	17,100.	0.			RELIGION-RELATED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAPEL HILL UNITED CHURCH OF CHRIST - 2307 EMBASSY LANE - LOUISVILLE, KY 40216	61-0602255	RELIGIOUS ORGANI	16,500.	0.			RELIGION-RELATED
ST. MARY OF THE KNOBS 3033 MARTIN ROAD FLOYDS KNOBS, IN 47119	35-6033616	RELIGIOUS ORGANI	16,000.	0.			RELIGION-RELATED
KOKOMO FIRST CHURCH OF THE NAZARENE - 2734 S. WASHINGTON STREET - KOKOMO, IN 46902	35-1329534	RELIGIOUS ORGANI	14,000.	0.			RELIGION-RELATED
MOUNT OLIVET UNITED METHODIST CHURCH - PO BOX 787 - MANTEO, NC 27954	56-0567025	RELIGIOUS ORGANI	12,500.	0.			RELIGION-RELATED
CHURCH OF OUR LADY OF LOURDES 508 BRECKENRIDGE LANE LOUISVILLE, KY 40207	61-6002467	RELIGIOUS ORGANI	11,831.	0.			RELIGION-RELATED
PEWEE VALLEY PRESBYTERIAN CHURCH P.O. BOX 365 PEWEE VALLEY, KY 40056	61-0674777	RELIGIOUS ORGANI	11,275.	0.			RELIGION-RELATED
CHURCH OF THE HOLY SPIRIT 3345 LEXINGTON ROAD LOUISVILLE, KY 40206	61-0700575	RELIGIOUS ORGANI	11,015.	0.			RELIGION-RELATED
ST. FRANCES OF ROME 2119 PAYNE ST. LOUISVILLE, KY 40206	61-0445829	RELIGIOUS ORGANI	10,987.	0.			RELIGION-RELATED
NOTRE DAME ACADEMY 1927 LEWISTON DRIVE LOUISVILLE, KY 40216	05-0599203	RELIGIOUS ORGANI	10,000.	0.			EDUCATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JENKS AVENUE CHURCH OF CHRIST 3332 JENKS AVENUE PANAMA CITY, FL 32405	59-2270658	RELIGIOUS ORGANI	10,000.	0.			RELIGION-RELATED
ST. WILLIAM CHURCH 1226 W. OAK STREET LOUISVILLE, KY 40210	61-0444819	RELIGIOUS ORGANI	9,550.	0.			RELIGION-RELATED
CRESTWOOD UNITED METHODIST CHURCH 7214 KAVANAUGH ROAD CRESTWOOD, KY 40014	61-0525162	RELIGIOUS ORGANI	9,400.	0.			RELIGION-RELATED
EMMANUEL BAPTIST CHURCH 502 CHERRY ST. MIDLAND, MI 48640	38-2181656	RELIGIOUS ORGANI	9,020.	0.			RELIGION-RELATED
FIRST BAPTIST CHURCH 149 LAWRENCE ST BRANDENBURG, KY 40108	61-0624346	RELIGIOUS ORGANI	9,000.	0.			RELIGION-RELATED
WHITE ROCK PRESBYTERIAN CHURCH 310 ROVER BOULEVARD LOS ALAMOS, NM 87544	23-7000560	RELIGIOUS ORGANI	8,500.	0.			RELIGION-RELATED
ST. MATTHEW'S EPISCOPAL CHURCH 330 NORTH HUBBARDS LANE LOUISVILLE, KY 40207	61-0476701	RELIGIOUS ORGANI	7,680.	0.			RELIGION-RELATED
WESLEY CHAPEL UNITED METHODIST CHURCH - 2212 STATE ST. - NEW ALBANY, NY 47150	35-1106906	RELIGIOUS ORGANI	7,500.	0.			RELIGION-RELATED
NAPERVILLE EVANGELICAL COVENANT CHURCH - 1150 HOBSON RD. - NAPERVILLE, IL 60540	51-0221694	RELIGIOUS ORGANI	7,500.	0.			RELIGION-RELATED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESBYTERIAN CHURCH OF DANVILLE 500 W. MAIN ST. DANVILLE, KY 40422	61-0587173	RELIGIOUS ORGANI	7,500.	0.			RELIGION-RELATED
CALVARY CHAPEL OF YORBA LINDA 5401 FAIRMONT BLVD. YORBA LINDA, CA 92886-4414	33-0210018	RELIGIOUS ORGANI	7,236.	0.			RELIGION-RELATED
ST. LEONARD CHURCH 440 ZORN AVENUE LOUISVILLE, KY 40206	61-0539297	RELIGIOUS ORGANI	7,000.	0.			RELIGION-RELATED
HUSTONVILLE BAPTIST CHURCH PO BOX 31 HUSTONVILLE, KY 40437	61-1035510	RELIGIOUS ORGANI	7,000.	0.			RELIGION-RELATED
URSULINE SISTERS 3105 LEXINGTON ROAD LOUISVILLE, KY 40206	61-0449662	RELIGIOUS ORGANI	6,800.	0.			RELIGION-RELATED
LUTHERAN CHURCH OF OUR SAVIOR 2600 WADE HAMPTON BLVD. GREENVILLE, SC 29615	57-0427943	RELIGIOUS ORGANI	6,125.	0.			RELIGION-RELATED
HOLY CROSS HIGH SCHOOL 5144 DIXIE HIGHWAY LOUISVILLE, KY 40216	61-1053991	RELIGIOUS ORGANI	6,000.	0.			EDUCATION
FIRST PRESBYTERIAN CHURCH - RICHLAND - 8047 CHURCH ST. - RICHLAND, MI 49083	38-2307724	RELIGIOUS ORGANI	5,600.	0.			RELIGION-RELATED
CONGREGATION ADATH JESHURUN 2401 WOODBOURNE AVE. LOUISVILLE, KY 40205	61-0458363	RELIGIOUS ORGANI	5,526.	0.			RELIGION-RELATED

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEEDS EPISCOPAL CHURCH 4332 LEEDS MANOR RD. MARKHAM, VA 22643	54-0994495	RELIGIOUS ORGANI	5,500.	0.			RELIGION-RELATED
ST. ALBERT THE GREAT CHURCH 1395 GIRARD DR. LOUISVILLE, KY 40222	61-0568020	RELIGIOUS ORGANI	5,500.	0.			RELIGION-RELATED
HOLY TRINITY CHURCH 501 CHERRYWOOD ROAD LOUISVILLE, KY 40207	61-0507073	RELIGIOUS ORGANI	5,450.	0.			RELIGION-RELATED
LEGION OF CHRIST INC 590 COLUMBUS AVE. THORNWOOD, NY 10594	13-3096713	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
TRINITY UNITED METHODIST CHURCH 2796 CHARLESTOWN ROAD NEW ALBANY, IN 47150	35-1020930	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
ST. JAMES CHURCH 1826 EDENSIDE AVE. LOUISVILLE, KY 40204	61-0444806	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
FAMILY OF GOD CHRISTIAN FELLOWSHIP 304 N. MAIN ST. HARRODSBURG, KY 40330		RELIGIOUS ORGANI	7,700.	0.			RELIGION-RELATED

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE ORGANIZATION USES GUIDESTAR.ORG TO CONFIRM

THAT THE RECIPIENT ORGANIZATIONS ARE IN GOOD STANDING PRIOR TO MAKING THE

DONATION. WHEN THE DONATION IS SENT THE FOLLOWING INFORMATION IS PROVIDED

TO EACH GRANT RECIPIENT:

"ENCLOSED IS A GRANT DISTRIBUTION FROM THE COMMUNITY FOUNDATION OF

LOUISVILLE DEPOSITORY TO YOUR ORGANIZATION. YOU DO NOT NEED TO SEND A TAX

RECEIPT TO THE DONOR; HOWEVER, IF YOU WISH TO EXPRESS YOUR GRATITUDE,

PLEASE USE THE DONORS NAME AND ADDRESS LISTED ON THE CHECK. PLEASE NOTE

Part IV Supplemental Information

THAT GOODS AND/OR SERVICES THAT MAY BE GIVEN IN EXCHANGE FOR THIS
DISTRIBUTION ARE BEING DECLINED, EXCEPT THOSE THAT WOULD NOT REDUCE AN
INDIVIDUALS CHARITABLE TAX DEDUCTION.

BY ACCEPTING THIS CHECK YOUR ORGANIZATION CERTIFIES TO THE COMMUNITY
FOUNDATION OF LOUISVILLE THAT YOUR ORGANIZATION CONTINUES TO BE PUBLICLY
SUPPORTED AND EXEMPT UNDER SECTION 501(C)(3) OF THE IRS CODE. PLEASE NOTE
THAT YOU ARE REQUIRED TO NOTIFY US IMMEDIATELY OF ANY CHANGE TO YOUR IRS
CLASSIFICATION.

ADDITIONALLY, YOU CERTIFY THAT NO TANGIBLE BENEFIT, GOODS OR SERVICES WERE
RECEIVED BY ANY INDIVIDUALS OR ENTITIES CONNECTED WITH THE COMMUNITY
FOUNDATION OF LOUISVILLE FUND, AND THAT THE GRANT WILL NOT BE USED TO
SATISFY THE PAYMENT OF ANY ENFORCEABLE PLEDGE OR LEGALLY BINDING FINANCIAL
OBLIGATION ON BEHALF OF THE DONOR.

PLEASE CALL THE FOUNDATION AT (502) 585-4649 IF YOU HAVE ANY QUESTIONS
ABOUT THIS DISTRIBUTION FROM THE COMMUNITY FOUNDATION OF LOUISVILLE."

IN ADDITION, WHEN THE DONOR MAKES THE CONTRIBUTION TO THE DEPOSITORY, THE
DONOR ALSO AGREES THAT THEY ARE NOT RECEIVING ANY TANGIBLE BENEFIT, GOOD OR
SERVICE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.

Employer identification number
31-1140889

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:										
a Receive a severance payment or change-of-control payment?	4a	X								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X								
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.										
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?	5a	X								
b Any related organization?	5b	X								
If "Yes" to line 5a or 5b, describe in Part III.										
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?	6a	X								
b Any related organization?	6b	X								
If "Yes" to line 6a or 6b, describe in Part III.										
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X								
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X								
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

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

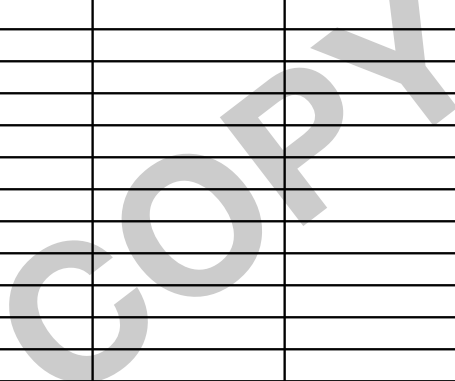
Schedule J (Form 990) 2011

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SUSAN A BARRY	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	213,745.	0.	0.	14,004.	7,576.	235,325.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							



**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization **THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.**

Employer identification number
31-1140889

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	254	4,936,788.	FMV AT DATE OF GIFT
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (INSURANCE POL)	X	1	38,855.	FMV AT DATE OF GIFT
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2011)

Part II

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

SCHEDULE M, LINE 32B: BROKERAGE FIRMS SUCH AS MERRILL LYNCH ARE USED

TO SELL PUBLICLY TRADED SECURITIES.

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization	THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number	31-1140889
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FORM 990, PART VI, SECTION B, LINE 11: A DRAFT OF THE RETURN IS REVIEWED

FIRST BY INTERNAL MANAGEMENT. AFTER INTERNAL MANAGEMENT HAS REVIEWED THE

RETURN AND ANY CHANGES ARE MADE A DRAFT IS PROVIDED TO THE FINANCE

COMMITTEE FOR REVIEW AND A COPY IS PROVIDED TO THE ENTIRE BOARD. ONCE THE

COMMENTS FROM THE BOARD ARE REVIEWED THE FINAL DRAFT OF THE RETURN IS

PREPARED AND SIGNED BY THE VICE-PRESIDENT.

FORM 990, PART VI, SECTION B, LINE 12C: THE OFFICERS, DIRECTORS AND KEY

EMPLOYEES ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST STATEMENT ANNUALLY.

THESE STATEMENTS ARE REVIEWED BY THE VICE-PRESIDENT.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION DOES NOT HAVE ANY

EMPLOYEES CURRENTLY; HOWEVER, THEY FOLLOW THE POLICIES AND PROCEDURES FOR

DETERMINING COMPENSATION AS ESTABLISHED BY THE COMMUNITY FOUNDATION OF

LOUISVILLE, INC. THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. HAS A

COMPENSATION COMMITTEE THAT REVIEWS FORM 990'S AND COMPENSATION STUDIES TO

DETERMINE A FAIR AND REASONABLE COMPENSATION FOR THE OFFICERS AND KEY

EMPLOYEES. THE PRESIDENT'S AND OFFICERS' COMPENSATION IS THEN APPROVED BY

THE COMPENSATION COMMITTEE. COMPENSATION FOR ALL EMPLOYEES IS APPROVED BY

THE COMPENSATION COMMITTEE AND BOARD.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND GOVERNING DOCUMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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TIME SPENT WITH RELATED ORGANIZATIONS

EACH OF THE INDIVIDUALS LISTED BELOW WORKS FOR RELATED ORGANIZATIONS.

THEIR AVERAGE HOURS WORKED EACH WEEK WITH THE RELATED ORGANIZATIONS ARE

ALSO NOTED.

SUSAN BARRY - 35 HOURS/WEEK

MATT BACON - 35 HOURS/WEEK

SUSAN NICHOLSON - 35 HOURS/WEEK

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 47,211.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC IS AUDITED AS PART OF THE COMMUNITY FOUNDATION OF LOUISVILLE, INC COMBINED GROUP. THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC IS INCLUDED IN THE COMMUNITY FOUNDATION OF LOUISVILLE, INC AND AFFILIATES COMBINED FINANCIAL STATEMENTS.

THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR FOR THE COMBINED GROUP.

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Name of the organization **THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.** Employer identification number **31-1140889**

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. - 31-0997017, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	N/A		X
FELIX E. MARTIN JR. FOUNDATION, INC - 26-2193468, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X
THE COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY, INC. - 61-11009, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X
THE REAL ESTATE ASSET LEGACY FOUNDATION OF KENTUCKY, INC - 26-2417672, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X

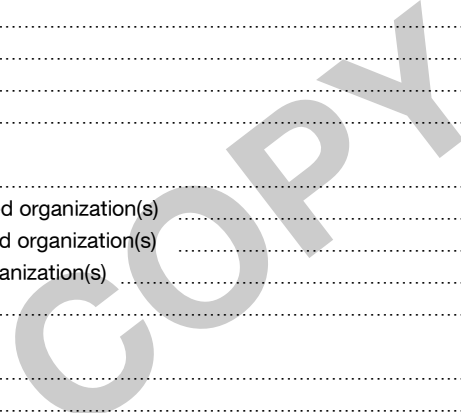
For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule R (Form 990) 2011**

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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



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

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

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

THE COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE

DEPOSITORY, INC.

EIN: 61-1100993

325 W. MAIN STREET, SUITE 1110

LOUISVILLE, KY 40202

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