

Form **990**

# Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

# 2013

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

**A** For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

<b>B</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	<b>C</b> Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.		<b>D</b> Employer identification number 31-0997017
	Doing Business As		<b>E</b> Telephone number 502-585-4649
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	325 WEST MAIN STREET		1110
City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202		<b>G</b> Gross receipts \$ 125,948,261.	
<b>F</b> Name and address of principal officer: SUSAN A BARRY SAME AS C ABOVE		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>I</b> 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		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
<b>J</b> Website: WWW.CFLOUISVILLE.ORG		<b>H(c)</b> Group exemption number	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation: 1984 <b>M</b> State of legal domicile: KY	

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: TO STRENGTHEN OUR REGION THROUGH INSPIRED PHILANTHROPY AND OUTSTANDING STEWARDSHIP.		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	30
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	30
	<b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)	<b>5</b>	32
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	40
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	26,828,742.	30,173,452.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	749,307.	683,508.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,345,695.	15,314,093.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	38,923,744.	46,171,053.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	24,618,846.	23,597,229.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	1,820,972.	1,824,608.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	460,645.	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,712,328.	1,843,013.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	28,152,146.	27,264,850.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	10,771,598.	18,906,203.
	<b>21</b> Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	277,247,710.	327,500,009.
		1,779,024.	2,602,817.
		275,468,686.	324,897,192.

## 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.

<b>Sign Here</b>	Signature of officer		Date
	MATTHEW L. BACON, VICE PRESIDENT & CFO		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	REBECCA L. PHILLIPS, CPA		
<b>Paid Preparer Use Only</b>	Firm's name	Firm's EIN	Check if self-employed <input type="checkbox"/> PTIN
	MOUNTJOY CHILTON MEDLEY LLP	27-1235638	P00024055
<b>Paid Preparer Use Only</b>	Firm's address	Phone no. (502) 749-1900	
	462 S. FOURTH ST., SUITE 2600 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 or note to any line 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 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 \$ 24,345,410. including grants of \$ 23,597,229. ) (Revenue \$ 683,508. ) DISTRIBUTE CONTRIBUTIONS AND GRANTS TO 501(C)(3) ORGANIZATIONS CLASSIFIED AS 509(A).

4b (Code: ) (Expenses \$ 84,990. including grants of \$ ) (Revenue \$ ) GIFT ANNUITIES

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 24,430,400.

**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	<b>Section 501(c)(3) organizations.</b> 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, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <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 and XII</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 and XII 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 other assistance to or for any foreign organization? <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 other assistance to or for foreign individuals? <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 or other assistance to any domestic organization or government 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 or 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 25a</i> .....		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
24d			
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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
25b			X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II .....		X
26			X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
27			X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
28a			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
28b			X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
28c			X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
29		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
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
31			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
32			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
33			X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
34		X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
35a			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
35b			
36	<b>Section 501(c)(3) organizations.</b> 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
36			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
37			X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	
38		X	

**Part V** **Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		X
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		X
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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.		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent .....		
<b>2</b>	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
<b>3</b>	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
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? .....		X
<b>6</b>	Did the organization have members or stockholders? .....		X
<b>7a</b>	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
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	a The governing body? .....	X	
<b>8b</b>	b Each committee with authority to act on behalf of the governing body? .....	X	
<b>9</b>	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
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? .....		X
<b>10b</b>	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? .....		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .....	X	
<b>11b</b>	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 .....	X	
<b>12b</b>	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	X	
<b>12c</b>	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done .....	X	
<b>13</b>	Did the organization have a written whistleblower policy? .....	X	
<b>14</b>	Did the organization have a written document retention and destruction policy? .....	X	
<b>15</b>	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?		
<b>15a</b>	a The organization's CEO, Executive Director, or top management official .....	X	
<b>15b</b>	b Other officers or key employees of the organization .....	X	
<b>16a</b>	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
<b>16b</b>	b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? .....		

**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     Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **THE COMMUNITY FOUNDATION OF LOUISVI - 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 or note to any line in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MIMI ZINNIEL CHAIRPERSON OF THE BOARD	2.00 4.00	X		X				0.	0.	0.
(2) MARSHALL BRADLEY, JR. VICE CHAIRPERSON OF THE BOARD	2.00 4.00	X		X				0.	0.	0.
(3) MARIA G. HAMPTON SECRETARY OF THE BOARD	2.00 4.00	X		X				0.	0.	0.
(4) ERIC W. TAYLOR TREASURER OF THE BOARD	2.00 4.00	X		X				0.	0.	0.
(5) HENRY M. ALTMAN JR. DIRECTOR	2.00 5.00	X						0.	0.	0.
(6) F. GERALD GREENWELL DIRECTOR	2.00 4.00	X						0.	0.	0.
(7) DANIEL W. MCMAHAN DIRECTOR	1.00 0.00	X						0.	0.	0.
(8) BONITA K. BLACK DIRECTOR	2.00 0.00	X						0.	0.	0.
(9) ROBERT P. BORDOGNA DIRECTOR	1.00 0.00	X						0.	0.	0.
(10) PEDRO BRYANT DIRECTOR	1.00 0.00	X						0.	0.	0.
(11) MARK A. CAMPISANO DIRECTOR	2.00 4.00	X						0.	0.	0.
(12) JACQUELINE C. GIBBS DIRECTOR	2.00 4.00	X						0.	0.	0.
(13) CHARLES J. KANE, JR. DIRECTOR	2.00 4.00	X						0.	0.	0.
(14) DEBORAH MOESSNER DIRECTOR	1.00 0.00	X						0.	0.	0.
(15) WILLIAM O. PRICE DIRECTOR	1.00 0.00	X						0.	0.	0.
(16) DOROTHY S. RIDINGS DIRECTOR	2.00 4.00	X						0.	0.	0.
(17) JEFFEREY M. YUSSMAN DIRECTOR	1.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JULIE LAVALLE JONES DIRECTOR	1.00 0.00	X						0.	0.	0.
(19) WILLIAM R. MAPOTHER DIRECTOR	1.00 0.00	X						0.	0.	0.
(20) ROBERT N. SHAW DIRECTOR	1.00 0.00	X						0.	0.	0.
(21) SUZANNE BERGMEISTER DIRECTOR	2.00 4.00	X						0.	0.	0.
(22) M. CLAIRE ALAGIA DIRECTOR	1.00 0.00	X						0.	0.	0.
(23) TONI CLEM DIRECTOR	2.00 4.00	X						0.	0.	0.
(24) HARRIET L. LAIR DIRECTOR	1.00 0.00	X						0.	0.	0.
(25) STEPHANIE H. SMITH DIRECTOR	2.00 4.00	X						0.	0.	0.
(26) PATRICIA G. SWOPE DIRECTOR	1.00 0.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								594,210.	0.	78,655.
<b>d Total (add lines 1b and 1c)</b>								594,210.	0.	78,655.

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

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> 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	
<b>5</b> 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**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>	855,313.				
	<b>e</b> Government grants (contributions)	<b>1e</b>	101,000.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	29,217,139.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		6,328,664.				
	<b>h Total.</b> Add lines 1a-1f		30,173,452.				
	<b>Program Service Revenue</b>	<b>2 a</b> ADMIN FUND FEES	<b>Business Code</b> 900009	683,508.	683,508.		
<b>b</b>							
<b>c</b>							
<b>d</b>							
<b>e</b>							
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f			683,508.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		7,002,660.			7,002,660.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	(i) Real					
		(ii) Personal					
		<b>b</b> Less: rental expenses					
		<b>c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses		79,777,208.			
		<b>c</b> Gain or (loss)		8,311,433.			
	<b>d</b> Net gain or (loss)		8,311,433.			8,311,433.	
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>					
		<b>b</b> Less: direct expenses					
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities						
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>						
	<b>b</b> Less: cost of goods sold						
	<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b>							
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions.			46,171,053.	683,508.	0.	15,314,093.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	23,597,229.	23,597,229.		
<b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	706,094.	197,706.	381,291.	127,097.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	794,199.	237,379.	413,864.	142,956.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	74,651.	21,649.	39,565.	13,437.
<b>9</b> Other employee benefits	140,902.	40,862.	74,678.	25,362.
<b>10</b> Payroll taxes	108,762.	31,541.	57,644.	19,577.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	22,030.	4,406.	15,862.	1,762.
<b>c</b> Accounting	37,405.	7,481.	26,932.	2,992.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	907,922.		907,922.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	92,434.	18,487.	66,552.	7,395.
<b>12</b> Advertising and promotion	42,166.	6,325.		35,841.
<b>13</b> Office expenses	83,800.	23,464.	48,604.	11,732.
<b>14</b> Information technology	50,385.	13,604.	29,727.	7,054.
<b>15</b> Royalties				
<b>16</b> Occupancy	169,035.	47,330.	98,040.	23,665.
<b>17</b> Travel	20,532.	6,365.	11,703.	2,464.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	111,720.	34,633.	63,681.	13,406.
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	68,605.	17,151.	42,535.	8,919.
<b>23</b> Insurance	29,782.	8,339.	17,274.	4,169.
<b>24</b> 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.)				
<b>a</b> DEFERRED TRUST DIST.	77,701.	77,701.	0.	0.
<b>b</b> MISCELLANEOUS	69,613.	14,619.	47,337.	7,657.
<b>c</b> MEMBERSHIPS	34,737.	1,042.	28,832.	4,863.
<b>d</b> COMMUNITY LEADERSHIP	23,023.	23,023.	0.	0.
<b>e</b> All other expenses	2,123.	64.	1,762.	297.
<b>25</b> Total functional expenses. Add lines 1 through 24e	27,264,850.	24,430,400.	2,373,805.	460,645.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	573,690.	<b>1</b>	2,661,082.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	2,386,288.	<b>3</b>	1,666,934.
	<b>4</b> Accounts receivable, net .....	125,743.	<b>4</b>	524,540.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	16,833.	<b>9</b>	26,400.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 787,503.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 519,005.	279,374.	<b>10c</b> 268,498.
	<b>11</b> Investments - publicly traded securities .....	273,124,481.	<b>11</b>	321,592,373.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	741,301.	<b>15</b>	760,182.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	277,247,710.	<b>16</b>	327,500,009.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	236,585.	<b>17</b>	129,171.
	<b>18</b> Grants payable .....	789,338.	<b>18</b>	1,364,645.
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	753,101.	<b>25</b>	1,109,001.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,779,024.	<b>26</b>	2,602,817.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	148,626,979.	<b>27</b>	203,341,994.
	<b>28</b> Temporarily restricted net assets .....	125,576,155.	<b>28</b>	120,289,646.
	<b>29</b> Permanently restricted net assets .....	1,265,552.	<b>29</b>	1,265,552.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	275,468,686.	<b>33</b>	324,897,192.	
<b>34</b> Total liabilities and net assets/fund balances .....	277,247,710.	<b>34</b>	327,500,009.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	46,171,053.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	27,264,850.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	18,906,203.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	275,468,686.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	30,522,303.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	324,897,192.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> 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.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b> 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	
<b>3a</b> 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
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public Inspection

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

**Employer identification number**  
31-0997017

**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 - Non-functionally integrated
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that 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 monetary support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	41,648,943.	30,080,930.	19,545,009.	26,828,742.	30,173,452.	148,277,076.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	41,648,943.	30,080,930.	19,545,009.	26,828,742.	30,173,452.	148,277,076.
<b>5</b> 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) .....						76,356,521.
<b>6 Public support.</b> Subtract line 5 from line 4.						71,920,555.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>7</b> Amounts from line 4 .....	41,648,943.	30,080,930.	19,545,009.	26,828,742.	30,173,452.	148,277,076.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	4,597,449.	5,861,209.	5,063,949.	6,580,742.	7,002,660.	29,106,009.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	789,345.					789,345.
<b>11 Total support.</b> Add lines 7 through 10						178,172,430.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	3,088,601.
<b>13 First five years.</b> 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 <b>stop here</b> .....	<input type="checkbox"/>					

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	40.37 %
<b>15</b> Public support percentage from 2012 Schedule A, Part II, line 14 .....	<b>15</b>	40.78 %
<b>16a 33 1/3% support test - 2013.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>	
<b>b 33 1/3% support test - 2012.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>17a 10% -facts-and-circumstances test - 2013.</b> 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 <b>stop here.</b> 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>b 10% -facts-and-circumstances test - 2012.</b> 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 <b>stop here.</b> 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>18 Private foundation.</b> 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (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**

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

**Section D. Computation of Investment Income Percentage**

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

**19a 33 1/3% support tests - 2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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



**Part IV** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Lined area for supplemental information.

**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.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

**Name of the organization**

THE COMMUNITY FOUNDATION OF LOUISVILLE,  
INC.

**Employer identification number**

31-0997017

**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 its Form 990-PF, Part I, line 2, 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) (2013)

<b>Name of organization</b> THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.	<b>Employer identification number</b>  31-0997017
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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	_____ _____ _____	\$ <u>5,936,022.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>6,088,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>2,263,655.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>1,071,576.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.	<b>Employer identification number</b> 31-0997017
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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
7	_____ _____ _____	\$ _____ 998,250.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____ _____ _____	\$ _____ 998,250.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.	<b>Employer identification number</b> 31-0997017
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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
2	STOCK <hr/> <hr/> <hr/> <hr/>	\$ 2,062,000.	11/26/13
3	STOCK <hr/> <hr/> <hr/> <hr/>	\$ 298,416.	04/18/14
7	STOCK/PROPERTY <hr/> <hr/> <hr/> <hr/>	\$ 998,250.	09/18/13
8	STOCK/PROPERTY <hr/> <hr/> <hr/> <hr/>	\$ 998,250.	09/18/13
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____

<b>Name of organization</b> THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.	<b>Employer identification number</b> 31-0997017
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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
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	

**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.**

▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

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

**Employer identification number**  
31-0997017

**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 .....	244	
2 Aggregate contributions to (during year) .....	23,627,527.	
3 Aggregate grants from (during year) .....	16,684,249.	
4 Aggregate value at end of year .....	194,214,830.	
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? .....

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)? .....

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X .....

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

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

b Assets included in Form 990, Part X .....

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other \_\_\_\_\_

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
<b>c</b> Beginning balance	<b>1c</b>
<b>d</b> Additions during the year	<b>1d</b>
<b>e</b> Distributions during the year	<b>1e</b>
<b>f</b> Ending balance	<b>1f</b>

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	267,472,624.	237,668,357.	250,202,364.	199,902,595.	162,960,992.
<b>b</b> Contributions	28,734,557.	25,913,893.	19,711,923.	28,971,824.	41,317,889.
<b>c</b> Net investment earnings, gains, and losses	46,300,805.	31,648,372.	4,123,258.	41,113,566.	17,351,487.
<b>d</b> Grants or scholarships	22,885,083.	25,290,001.	34,261,454.	17,782,017.	20,838,205.
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses	2,695,689.	2,467,997.	2,107,734.	2,003,599.	889,568.
<b>g</b> End of year balance	316,927,214.	267,472,624.	237,668,357.	250,202,369.	199,902,595.

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

- a** Board designated or quasi-endowment  58.05 %
- b** Permanent endowment  .14 %
- c** Temporarily restricted endowment  41.81 %

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:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
<b>3a(i)</b>		X
<b>3a(ii)</b>		X
<b>3b</b>		

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements		245,458.	161,773.	83,685.
<b>d</b> Equipment		365,435.	240,819.	124,616.
<b>e</b> Other		176,610.	116,413.	60,197.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				268,498.



**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED COMPENSATION LIABILITY	170,333.
(3) GIFT ANNUITY LIABILITY	511,654.
(4) RELATED PARTY PAYABLE	427,014.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,109,001.

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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

**Part XIII Supplemental Information.**

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

PART V, LINE 4:

THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS ARE

USED TO FURTHER ITS EXEMPT PURPOSE OF DISTRIBUTING CONTRIBUTIONS AND

GRANTS FOR CHARITABLE PURPOSES.

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

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



**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

**2013**

**Open to Public  
Inspection**

▶ **Information about Schedule I (Form 990) and its instructions is at** [www.irs.gov/form990](http://www.irs.gov/form990)

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

**Employer identification number**  
31-0997017

**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. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
21ST CENTURY PARKS, INC. 471 W. MAIN ST. # 202 LOUISVILLE, KY 40202	20-1780317	501(C)(3)	1,816,250.	0.			RECREATION & SPORTS
THE UNIVERSITY OF LOUISVILLE FOUNDATION, INC. - 215 CENTRAL AVE., #300 - LOUISVILLE, KY 40208	23-7078461	501(C)(3)	1,577,935.	0.			EDUCATION
LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION - 301 YORK STREET - LOUISVILLE, KY 40203	61-0969361	501(C)(3)	1,542,965.	0.			EDUCATION
KENTUCKY HUMANE SOCIETY 1000 LYNDON LANE #B LOUISVILLE, KY 40222	61-0463938	501(C)(3)	1,008,541.	0.			ANIMAL-RELATED
METRO UNITED WAY P.O. BOX 950148 LOUISVILLE, KY 40295	61-0444680	501(C)(3)	687,186.	0.			PHILANTHROPY, VOLUNTARISM
SAN FRANCISCO FOUNDATION 225 BUSH ST., SUITE 500 SAN FRANCISCO, CA 94104	01-0679337	501(C)(3)	645,800.	0.			PHILANTHROPY, VOLUNTARISM

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 327.
- 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) (2013)

**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
SPEED ART MUSEUM 2035 SOUTH THIRD ST. LOUISVILLE, KY 40208	61-0444823	501(C)(3)	629,733.	0.			ARTS, CULTURE & HUMANITIES
YALE UNIVERSITY P.O. BOX 208232 NEW HAVEN, CT 06520	06-0646973	501(C)(3)	629,500.	0.			EDUCATION
PRESIDENT & FELLOWS OF MIDDLEBURY 5 COURT STREET MIDDLEBURY, VT 05753	03-0179298	501(C)(3)	565,000.	0.			EDUCATION
MUHAMMAD ALI MUSEUM AND EDUCATION CENTER, INC. - 144 N. 6TH STREET - LOUISVILLE, KY 40202	61-1323046	501(C)(3)	540,175.	0.			ARTS, CULTURE & HUMANITIES
FUND FOR THE ARTS, INC. 623 WEST MAIN STREET LOUISVILLE, KY 40202	61-0479626	501(C)(3)	504,515.	0.			ARTS, CULTURE & HUMANITIES
WEST END PREPARATORY SCHOOL 3628 VIRGINIA AVENUE LOUISVILLE, KY 40211	04-3798875	501(C)(3)	355,710.	0.			EDUCATION
CATHOLIC EDUCATION FOUNDATION 401 W. MAIN ST. #806 LOUISVILLE, KY 40202	61-1294640	501(C)(3)	353,000.	0.			EDUCATION
AVON OLD FARMS SCHOOL, INC. 500 OLD FARMS RD. AVON, CT 06001	06-0655480	501(C)(3)	350,000.	0.			EDUCATION
GEORGETOWN COLLEGE 400 EAST COLLEGE STREET GEORGETOWN, KY 40324	61-0444695	501(C)(3)	294,200.	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
CENTRE COLLEGE OF KENTUCKY 600 WEST WALNUT DANVILLE, KY 40422	61-0444671	501(C)(3)	263,710.	0.			EDUCATION
LOUISVILLE ORCHESTRA, INC. 323 W. BROADWAY, STE. 700 LOUISVILLE, KY 40202	61-6000384	501(C)(3)	259,824.	0.			ARTS, CULTURE & HUMANITIES
YALE POLO AND EQUESTRIAN CENTER, INC. - 64 WHETSTONE ROAD - HARWINTON, CT 06791	27-0820382	501(C)(3)	250,000.	0.			RECREATION & SPORTS
THE DE PAUL SCHOOL 1925 DUKER AVENUE LOUISVILLE, KY 40205	61-0711082	501(C)(3)	236,355.	0.			EDUCATION
COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY - 325 WEST MAIN STREET - LOUISVILLE, KY 40202	61-1100993	501(C)(3)	231,532.	0.			PHILANTHROPY, VOLUNTARISM
FILSON HISTORICAL SOCIETY 1310 SOUTH THIRD STREET LOUISVILLE, KY 40208	61-0444690	501(C)(3)	217,000.	0.			ARTS, CULTURE & HUMANITIES
LOUISVILLE ZOO FOUNDATION, INC. P.O. BOX 37250 LOUISVILLE, KY 40233	31-0971742	501(C)(3)	206,344.	0.			ANIMAL-RELATED
LOUISVILLE OLMSTED PARKS CONSERVANCY, INC. - 1299 TREVILIAN WAY - LOUISVILLE, KY 40213	61-1196368	501(C)(3)	191,514.	0.			RECREATION & SPORTS
LINCOLN FOUNDATION 200 WEST BROADWAY, STE. 500 LOUISVILLE, KY 40202	61-0449631	501(C)(3)	178,898.	0.			EDUCATION

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
HEALING PLACE INC 1020 WEST MARKET STREET LOUISVILLE, KY 40202	61-1164775	501(C)(3)	176,135.	0.			MENTAL HEALTH & CRISIS INTERVENTION
MARYHURST, INC. 1015 DORSEY LANE LOUISVILLE, KY 40223	31-1542209	501(C)(3)	161,213.	0.			MENTAL HEALTH & CRISIS INTERVENTION
KENTUCKY NATURAL LANDS TRUST, INC. 433 CHESTNUT ST. BEREA, KY 40403	61-1276913	501(C)(3)	160,829.	0.			ENVIRONMENT
STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE - 315 WEST MAIN STREET, 2ND FLOOR - LOUISVILLE, KY 40202	61-0466715	501(C)(3)	145,300.	0.			ARTS, CULTURE & HUMANITIES
KOSAIR CHARITIES COMMITTEE, INC. P.O. BOX 37370 LOUISVILLE, KY 40233	61-0514703	501(C)(3)	145,100.	0.			HEALTH CARE
ACTORS THEATRE OF LOUISVILLE INC. 316 WEST MAIN STREET LOUISVILLE, KY 40202	61-0645030	501(C)(3)	139,625.	0.			ARTS, CULTURE & HUMANITIES
THE SALVATION ARMY - LOUISVILLE AREA COMMAND - P.O. BOX 1149 - LOUISVILLE, KY 40201	58-0660607	501(C)(3)	139,289.	0.			HUMAN SERVICES
EDGE OUTREACH, INC. 625 MYRTLE ST. LOUISVILLE, KY 40208	61-1262016	501(C)(3)	124,421.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
CHARITIES AID FOUNDATION AMERICA 1800 DIAGONAL ROAD, SUITE 150 ALEXANDRIA, VA 22314	43-1634280	501(C)(3)	120,000.	0.			PHILANTHROPY, VOLUNTARISM

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
KENTUCKY SCHOOL OF ART 845 S 3RD ST. LOUISVILLE, KY 40203	27-2232797	501(C)(3)	111,168.	0.			EDUCATION
UNIVERSITY OF LOUISVILLE 2301 SOUTH 3RD ST. LOUISVILLE, KY 40292	61-1014882	GOVERNMENT MUNIC	104,417.	0.			EDUCATION
HIGHLAND PRESBYTERIAN CHURCH 1011 CHEROKEE ROAD LOUISVILLE, KY 40204	61-0538145	501(C)(3)	104,100.	0.			RELIGION-RELATED
ST. MEINRAD ARCHABBEY 200 HILL DRIVE ST. MEINRAD, IN 47577	35-0868161	501(C)(3)	100,000.	0.			RELIGION-RELATED
THE FUND FOR TRANSFORMING EDUCATION IN KENTUCKY, INC. - PO BOX 29 - FRANKFORT, KY 40602	90-0917960	501(C)(3)	100,000.	0.			EDUCATION
LOUISVILLE URBAN LEAGUE 1535 WEST BROADWAY LOUISVILLE, KY 40203	61-0444771	501(C)(3)	99,595.	0.			HUMAN SERVICES
KENTUCKY PUBLIC RADIO INC 619 SOUTH 4TH STREET LOUISVILLE, KY 40202	61-1259787	501(C)(3)	98,989.	0.			ARTS, CULTURE & HUMANITIES
BOYS & GIRLS CLUBS INC. P.O. BOX 4989 LOUISVILLE, KY 40204	61-0568789	501(C)(3)	98,187.	0.			YOUTH DEVELOPMENT
UNIVERSITY OF KENTUCKY 128 FUNKHOUSER BUILDING LEXINGTON, KY 40506	61-6001218	GOVERNMENT MUNIC	88,387.	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
TRINITY HIGH SCHOOL FOUNDATION, INC. - 4011 SHELBYVILLE RD. - LOUISVILLE, KY 40207	31-1105966	501(C)(3)	87,000.	0.			EDUCATION
DONORSCHOOSE INC. 134 W. 37TH ST., FLOOR 11 NEW YORK, NY 10018	13-4129457	501(C)(3)	82,105.	0.			EDUCATION
TRANSYLVANIA UNIVERSITY 300 N. BROADWAY LEXINGTON, KY 40508	61-0444825	501(C)(3)	79,250.	0.			EDUCATION
RACHEL'S NETWORK INC. 1200 18TH STREET NW #310 WASHINGTON, DC 20036	31-1644905	501(C)(3)	77,500.	0.			ENVIRONMENT
ST. FRANCIS SCHOOL INC. 11000 U.S. HWY. 42 GOSHEN, KY 40026	61-0663057	501(C)(3)	76,475.	0.			EDUCATION
SEED CAPITAL KENTUCKY, INC. 200 YORK ST. LOUISVILLE, KY 40203	45-1068408	501(C)(3)	75,000.	0.			FOOD, AGRICULTURE & NUTRITION
VIRGINIA ORGANIZING, INC. 703 CONCORD AVE. CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY
LOUISVILLE MALE HIGH SCHOOL 4409 PRESTON HIGHWAY LOUISVILLE, KY 40213	61-6001316	GOVERNMENT MUNIC	74,500.	0.			EDUCATION
JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. - 502 WOOD ROAD - LOUISVILLE, KY 40222	61-1021128	501(C)(3)	70,941.	0.			PHILANTHROPY, VOLUNTARISM

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
BELLARMINE UNIVERSITY 2001 NEWBURG ROAD LOUISVILLE, KY 40205	61-0482955	501(C)(3)	68,986.	0.			EDUCATION
HOPKINSVILLE-CHRISTIAN COUNTY PUBLIC LIBRARY - 1101 BETHEL ST. - HOPKINSVILLE, KY 42240	61-0669235	501(C)(3)	62,211.	0.			EDUCATION
LEADERSHIP LOUISVILLE FOUNDATION 732 W. MAIN ST. LOUISVILLE, KY 40202	31-0958491	501(C)(3)	61,844.	0.			PUBLIC & SOCIETAL BENEFIT
CLIFTON CULTURAL CENTER 2117 PAYNE STREET LOUISVILLE, KY 40206	61-1270383	501(C)(3)	61,500.	0.			ARTS, CULTURE & HUMANITIES
BEREA COLLEGE CPO 2216 BEREA, KY 40404	61-0444650	501(C)(3)	60,000.	0.			EDUCATION
NETWORK CENTER FOR COMMUNITY CHANGE - 334 E BROADWAY, 3RD FLOOR - LOUISVILLE, KY 40202	26-0505260	PRIVATE OPERATIN	58,023.	0.			HUMAN SERVICES
HAND IN HAND MINISTRIES 2225 STEIER LANE LOUISVILLE, KY 40218	61-1352889	501(C)(3)	57,578.	0.			HUMAN SERVICES
ST. MATTHEW'S EPISCOPAL CHURCH 330 N. HUBBARDS LANE LOUISVILLE, KY 40207	61-0476701	RELIGIOUS ORGANI	56,761.	0.			RELIGION-RELATED
AMERICAN CIVIL LIBERTIES UNION OF KENTUCKY FOUNDATION, INC. - 315 GUTHRIE ST #300 - LOUISVILLE, KY 40202	61-6058569	501(C)(3)	56,712.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY

**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
FAMILY & CHILDREN FIRST, INC. 525 ZANE ST LOUISVILLE, KY 40203	61-0549561	501(C)(3)	54,497.	0.			HUMAN SERVICES
SHAKERTOWN AT PLEASANT HILL, KENTUCKY, INC. - 3501 LEXINGTON ROAD - HARRODSBURG, KY 40330	61-0592561	501(C)(3)	54,081.	0.			ARTS, CULTURE & HUMANITIES
BAPTIST HOSPITAL FOUNDATION OF GREATER LOUISVILLE, INC. - 4000 KRESGE WAY - LOUISVILLE, KY 40207	20-0292291	501(C)(3)	53,412.	0.			HEALTH CARE
MARINE CORPS SCHOLARSHIP FOUNDATION INC. - 909 N. WASHINGTON ST. #400 - ALEXANDRIA, VA 22314	22-1905062	501(C)(3)	50,000.	0.			PHILANTHROPY, VOLUNTARISM
CROSSROADS PREGNANCY RESOURCE CENTER - PO BOX 609 - CRESTWOOD, KY 40014	27-4097169	501(C)(3)	50,000.	0.			HUMAN SERVICES
NATIONAL FFA FOUNDATION, INC. P.O. BOX 68960 INDIANAPOLIS, IN 46268	54-6044662	501(C)(3)	50,000.	0.			FOOD, AGRICULTURE & NUTRITION
GILDA'S CLUB 633 BAXTER AVE LOUISVILLE, KY 40204	20-1635170	501(C)(3)	49,023.	0.			DISEASES, DISORDERS & MEDICAL DISCIPLINES
LOUISVILLE SCIENCE CENTER 727 WEST MAIN STREET LOUISVILLE, KY 40202	31-1005850	501(C)(3)	48,223.	0.			ARTS, CULTURE & HUMANITIES
JUNIOR ACHIEVEMENT OF KENTUCKIANA 1401 W. MUHAMMAD ALI BLVD. LOUISVILLE, KY 40203	61-0476694	501(C)(3)	47,649.	0.			EDUCATION

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
ST. MARY'S CENTER INC. PO BOX 43443 LOUISVILLE, KY 40253	61-1243016	501(C)(3)	47,100.	0.			HUMAN SERVICES
KENTUCKY EDUCATIONAL TELEVISION FOUNDATION, INC. - 600 COOPER DRIVE - LEXINGTON, KY 40502	61-0722558	501(C)(3)	46,500.	0.			ARTS, CULTURE & HUMANITIES
WESTERN KENTUCKY UNIVERSITY FOUNDATION - 1906 COLLEGE HEIGHTS BLVD #1005 - BOWLING GREEN, KY 42101	61-1251555	501(C)(3)	45,400.	0.			EDUCATION
OWENSBORO AREA MUSEUM OF SCIENCE AND HISTORY - 122 E 2ND ST - OWENSBORO, KY 42303	61-1164857	501(C)(3)	45,000.	0.			ARTS, CULTURE & HUMANITIES
PEACE EDUCATION PROGRAM, INC. 318 W. KENTUCKY ST. LOUISVILLE, KY 40203	61-1220204	501(C)(3)	43,279.	0.			HUMAN SERVICES
HOLY TRINITY CHURCH 501 CHERRYWOOD ROAD LOUISVILLE, KY 40207	61-0507073	RELIGIOUS ORGANI	40,500.	0.			RELIGION-RELATED
THE OWENSBORO-DAVIESS COUNTY TENNIS - P.O. BOX 1822 - OWENSBORO, KY 42302	61-1129532	501(C)(3)	40,000.	0.			RECREATION & SPORTS
JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION - P.O. BOX 34020 - LOUISVILLE, KY 40232	61-1021128	GOVERNMENT MUNIC	39,881.	0.			EDUCATION
HOSPARUS INC 3532 EPHRAIM MCDOWELL DRIVE LOUISVILLE, KY 40205	61-0921718	501(C)(3)	38,585.	0.			HUMAN SERVICES

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
SECOND PRESBYTERIAN CHURCH 3701 OLD BROWNSBORO ROAD LOUISVILLE, KY 40207	61-0466721	501(C)(3)	38,483.	0.			RELIGION-RELATED
WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989	54-0519590	501(C)(3)	37,800.	0.			EDUCATION
EASTERN KENTUCKY UNIVERSITY FOUNDATION, INC. - 521 LANCASTER AVE. - RICHMOND, KY 40475	61-1131682	501(C)(3)	37,742.	0.			EDUCATION
JEFFERSON COUNTY PUBLIC SCHOOLS P.O. BOX 34020 LOUISVILLE, KY 40232	61-1021128	GOVERNMENT MUNIC	37,500.	0.			EDUCATION
MENTAL HEALTH ASSOCIATION OF KENTUCKY - 120 SEARS AVE, STE #213 - LOUISVILLE, KY 40207	61-0662261	501(C)(3)	36,515.	0.			MENTAL HEALTH & CRISIS INTERVENTION
VOLUNTEERS OF AMERICA OF KENTUCKY AND TENNESSEE - 570 S FOURTH ST, #100 - LOUISVILLE, KY 40202	61-0480950	501(C)(3)	35,868.	0.			HUMAN SERVICES
NEW MUSEUM OF CONTEMPORARY ART 235 BOWERY NEW YORK, NY 10002	13-2986881	501(C)(3)	35,000.	0.			ARTS, CULTURE & HUMANITIES
UNITED CRESCENT HILL MINISTRIES 150 S. STATE ST. LOUISVILLE, KY 40206	51-0166794	501(C)(3)	34,075.	0.			HUMAN SERVICES
PORTLAND MUSEUM 2308 PORTLAND AVE. LOUISVILLE, KY 40212	23-7422794	501(C)(3)	33,417.	0.			ARTS, CULTURE & HUMANITIES

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HISTORIC LOCUST GROVE, INC. 561 BLANKENBAKER LANE LOUISVILLE, KY 40207	61-1390403	501(C)(3)	33,319.	0.			ARTS, CULTURE & HUMANITIES
SCHOOL CHOICE SCHOLARSHIPS, INC. PO BOX 221546 LOUISVILLE, KY 40252	31-1589289	501(C)(3)	33,000.	0.			EDUCATION
KENTUCKY OPERA ASSOCIATION 323 W. BROADWAY, SUITE 601 LOUISVILLE, KY 40202	61-6013111	501(C)(3)	32,508.	0.			ARTS, CULTURE & HUMANITIES
BROADWAY BAPTIST CHURCH 4000 BROWNSBORO ROAD LOUISVILLE, KY 40207	61-6001947	RELIGIOUS ORGANI	32,486.	0.			RELIGION-RELATED
HOPKINS COUNTY EDUCATION FOUNDATION, INC. - PO BOX 593 - MADISONVILLE, KY 42431	61-1151955	501(C)(3)	32,465.	0.			EDUCATION
PLANNED PARENTHOOD OF GREATER INDIANA, INC. - 200 SOUTH MERIDIAN STREET - INDIANAPOLIS, IN 46206	35-0874276	501(C)(3)	31,149.	0.			HEALTH CARE
AMERICAN FRIENDS OF THE LONDON BUSINESS SCHOOL - 1776 I STREET NW, FLOOR 9 - WASHINGTON, DC 20006	52-1689073	501(C)(3)	31,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
MARINE CORPS HERITAGE FOUNDATION 3800 FETTLER PARK DRIVE #104 DUMFRIES, VA 22025	26-0803466	501(C)(3)	30,000.	0.			ARTS, CULTURE & HUMANITIES
BOYS HOPE GIRLS HOPE OF GREATER CINCINNATI - 4225 MALSBARY RD #208 - CINCINNATI, OH 45242	31-1054816	501(C)(3)	30,000.	0.			HUMAN SERVICES

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BLUE RIDGE SCHOOL 273 MAYO DRIVE ST. GEORGE, VA 22935	54-0505868	501(C)(3)	30,000.	0.			EDUCATION
KENTUCKY SCHOOL FOR THE DEAF CHARITABLE FOUNDATION - 303 SOUTH SECOND ST. - DANVILLE, KY 40422	61-1091577	501(C)(3)	30,000.	0.			PHILANTHROPY, VOLUNTARISM
WOMEN 4 WOMEN 323 W. BROADWAY, #201 LOUISVILLE, KY 40202	61-1240049	501(C)(3)	30,000.	0.			SOCIAL SCIENCE
COMPASS FAMILY SERVICES 49 POWELL ST. 3RD FLOOR SAN FRANCISCO, CA 94102	94-1156622	501(C)(3)	30,000.	0.			HUMAN SERVICES
HOLY CROSS HIGH SCHOOL 5144 DIXIE HIGHWAY LOUISVILLE, KY 40216	61-1053991	RELIGIOUS ORGANI	29,881.	0.			EDUCATION
NATIONAL CENTER FOR FAMILIES LEARNING, INC. - 325 WEST MAIN STREET, STE. 300 - LOUISVILLE, KY 40202	61-1159549	501(C)(3)	28,859.	0.			EDUCATION
NATIONAL CENTER FOR FAMILY LITERACY, INC. - 325 WEST MAIN STREET, STE. 300 - LOUISVILLE, KY 40202	61-1159549	501(C)(3)	28,711.	0.			EDUCATION
INDIANA UNIVERSITY FOUNDATION P.O. BOX 500 BLOOMINGTON, IN 47402	35-6018940	501(C)(3)	28,100.	0.			EDUCATION
PAWS WITH PURPOSE PO BOX 7834 LOUISVILLE, KY 40257	20-0681397	501(C)(3)	28,000.	0.			HUMAN SERVICES

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LVL1, INC. 1205 E. WASHINGTON ST. LOUISVILLE, KY 40206	27-1451728	501(C)(3)	27,624.	0.			EDUCATION
CREATIVE CAPITAL FOUNDATION 65 BLEECKER ST., 7TH FLOOR NEW YORK, NY 10012	31-1605982	501(C)(3)	27,500.	0.			HUMAN SERVICES
ARCHDIOCESE OF LOUISVILLE PO BOX 1073 LOUISVILLE, KY 40201	61-0447247	501(C)(3)	27,200.	0.			RELIGION-RELATED
JEWISH COMMUNITY OF LOUISVILLE INC. - 3630 DUTCHMANS LANE - LOUISVILLE, KY 40205	61-0444765	501(C)(3)	26,905.	0.			PHILANTHROPY, VOLUNTARISM
HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE, KY 40206	61-0445834	501(C)(3)	26,879.	0.			HUMAN SERVICES
ISAAC W. BERNHEIM FOUNDATION, INC. P.O. BOX 130 CLERMONT, KY 40110	61-0444651	501(C)(3)	26,666.	0.			ENVIRONMENT
CENTER FOR WOMEN AND FAMILIES P.O. BOX 2048 LOUISVILLE, KY 40201	61-0444846	501(C)(3)	26,589.	0.			HUMAN SERVICES
AUSTIN FILM SOCIETY 1901 E. 51ST ST. AUSTIN, TX 78723	74-2433823	501(C)(3)	26,500.	0.			ARTS, CULTURE & HUMANITIES
JEWISH FAMILY & VOCATIONAL SERVICES OF LOUISVILLE, INC. - 2821 KLEMPNER WAY - LOUISVILLE, KY 40205	61-0444704	501(C)(3)	26,120.	0.			HUMAN SERVICES

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KENTUCKY HORSE PARK FOUNDATION 4089 IRON WORKS PARKWAY LEXINGTON, KY 40511	62-1257717	501(C)(3)	26,100.	0.			RECREATION & SPORTS
SQUALLIS PUPPETEERS, INC. P.O. BOX 4987 LOUISVILLE, KY 40204	42-1552694	501(C)(3)	25,916.	0.			ARTS, CULTURE & HUMANITIES
MAIDEN VOYAGE PRODUCTIONS, INC. 2314 HIGGINS CANYON ROAD HALF MOON BAY, CA 94019	94-3191142	501(C)(3)	25,750.	0.			ARTS, CULTURE & HUMANITIES
FAMILY COMMUNITY CLINIC, INC. 1406 E. WASHINGTON ST. LOUISVILLE, KY 40206	27-2994215	501(C)(3)	25,551.	0.			HEALTH CARE
USA CARES INC 562 N DIXIE BLVD., SUITE 3 RADCLIFF, KY 40160	05-0588761	501(C)(3)	25,500.	0.			HOUSING & SHELTER
THE ENGLISH SPEAKING UNION - KENTUCKY BRANCH - 817 S FLOYD ST - LOUISVILLE, KY 40203	61-6053477	501(C)(3)	25,500.	0.			ARTS, CULTURE & HUMANITIES
COMMONWEALTH FUND FOR KET, INC. 560 COOPER DRIVE LEXINGTON, KY 40502	61-1285473	501(C)(3)	25,248.	0.			EDUCATION
CHECKERBOARD FOUNDATION, INC. 1 EAST 53RD STREET 14 FLOOR NEW YORK, NY 10022	13-2988037	501(C)(3)	25,000.	0.			ARTS, CULTURE & HUMANITIES
UNITED STATES SPORTSMEN'S ALLIANCE FOUNDATION - 801 KINGSMILL PKWY - COLUMBUS, OH 43229	31-0941103	501(C)(3)	25,000.	0.			ANIMAL-RELATED

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PETERSON-DUMESNIL HOUSE FOUNDATION 301 S. PETERSON LOUISVILLE, KY 40206	31-1036389	501(C)(3)	25,000.	0.			ARTS, CULTURE & HUMANITIES
SULLIVAN UNIVERSITY FOUNDATION INC. - 3101 BARDSTOWN RD. - LOUISVILLE, KY 40205	33-1009808	501(C)(3)	25,000.	0.			EDUCATION
THE LIGHTHOUSE WORKS, INC. PO BOX 301 FISHERS ISLAND, NY 06390	46-0865290	501(C)(3)	25,000.	0.			ARTS, CULTURE & HUMANITIES
NATURE CONSERVANCY, INC. - COLORADO - 2424 SPRUCE ST. - BOULDER, CO 80302	53-0242652	501(C)(3)	25,000.	0.			ENVIRONMENT
THOMAS JEFFERSON FOUNDATION, INC. P.O. BOX 217 CHARLOTTESVILLE, VA 22902	54-0505959	501(C)(3)	25,000.	0.			ARTS, CULTURE & HUMANITIES
CHANCE SCHOOL, INC. 4200 LIME KILN LANE LOUISVILLE, KY 40222	61-0549871	501(C)(3)	25,000.	0.			EDUCATION
OPTIONS UNLIMITED 205 CASTLEROCK DRIVE SHEPHERDSVILLE, KY 40165	61-1127049	501(C)(3)	25,000.	0.			EDUCATION
BAPTIST SEMINARY OF KENTUCKY 400 EAST COLLEGE ST GEORGETOWN, KY 40324	61-1312812	501(C)(3)	25,000.	0.			EDUCATION
SUMMIT ACADEMY OF GREATER LOUISVILLE, INC. - 11508 MAIN STREET - LOUISVILLE, KY 40243	61-1214457	501(C)(3)	24,930.	0.			EDUCATION

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INTELLIGENT CHANGE INITIATIVES INC 200 WEST VINE ST. #420 LEXINGTON, KY 40507	61-1304888	501(C)(3)	24,500.	0.			SCIENCE & TECHNOLOGY
WESTERN KENTUCKY UNIVERSITY 1906 COLLEGE HEIGHTS BLVD #11018 BOWLING GREEN, KY 42101	61-6055628	501(C)(3)	24,500.	0.			EDUCATION
BINGHAM CHILD GUIDANCE CLINIC, INC. - 200 E. CHESTNUT ST. - LOUISVILLE, KY 40202	61-0445838	501(C)(3)	24,265.	0.			YOUTH DEVELOPMENT
LOUISVILLE COLLEGIATE SCHOOL 2427 GLENMARY AVENUE LOUISVILLE, KY 40204	61-0449630	501(C)(3)	24,209.	0.			EDUCATION
TELLURIDE SKI AND SNOWBOARD CLUB, INC. - PO BOX 2824 - TELLURIDE, CO 81435	84-1152879	501(C)(3)	23,500.	0.			RECREATION & SPORTS
LINDSEY WILSON COLLEGE 210 LINDSEY WILSON STREET COLUMBIA, KY 42728	61-0444763	501(C)(3)	23,122.	0.			EDUCATION
ROTARY FUND OF LOUISVILLE, INC. 401 WEST MAIN ST #810 LOUISVILLE, KY 40202	61-6029858	501(C)(3)	22,500.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
SPALDING UNIVERSITY 851 SOUTH FOURTH STREET LOUISVILLE, KY 40203	61-0444780	501(C)(3)	22,277.	0.			EDUCATION
CENTRAL PRESBYTERIAN CHURCH 318 WEST KENTUCKY ST. LOUISVILLE, KY 40203	61-0459493	501(C)(3)	22,000.	0.			RELIGION-RELATED

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THE SPOT FUND INC. 550 S. 3RD ST. LOUISVILLE, KY 40202	38-3749218	501(C)(3)	21,700.	0.			ANIMAL-RELATED
LOUISVILLE METRO PARKS FOUNDATION, INC. - P O BOX 37280 - LOUISVILLE, KY 40233	20-4372292	501(C)(3)	21,552.	0.			ENVIRONMENT
CABBAGE PATCH SETTLEMENT HOUSE, INC. - 1413 SOUTH SIXTH STREET - LOUISVILLE, KY 40208	61-0458359	501(C)(3)	21,068.	0.			HUMAN SERVICES
INDIANA UNIVERSITY - BLOOMINGTON 400 EAST 7TH ST. BLOOMINGTON, IN 47405	35-6001673	GOVERNMENT MUNIC	21,000.	0.			EDUCATION
LOUISVILLE PRESBYTERIAN THEOLOGICAL SEMINARY - 1044 ALTA VISTA ROAD - LOUISVILLE, KY 40205	61-0444768	501(C)(3)	20,512.	0.			EDUCATION
KENTUCKY DANCE COUNCIL, INC. 315 EAST MAIN STREET LOUISVILLE, KY 40202	61-6033779	501(C)(3)	20,387.	0.			ARTS, CULTURE & HUMANITIES
ST. VINCENT DE PAUL SOCIETY COUNCIL OF LOUISVILLE - 1015-C SOUTH PRESTON STREET - LOUISVILLE, KY 40203	61-0727110	501(C)(3)	20,362.	0.			HUMAN SERVICES
OPERATION CARE, INC. PO BOX 1393 SHELBYVILLE, KY 40066	61-1211189	501(C)(3)	20,193.	0.			HUMAN SERVICES
THE KENTUCKIANAWORKS FOUNDATION INC. - 410 W. CHESTNUT ST., #200 - LOUISVILLE, KY 40202	37-1508088	501(C)(3)	20,000.	0.			EDUCATION

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BILLY GRAHAM EVANGELISTIC ASSOCIATION - 1 BILLY GRAHAM PKWY - CHARLOTTE, NC 28201	41-0692230	501(C)(3)	20,000.	0.			RELIGION-RELATED
SAMARITAN'S PURSE P.O. BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	20,000.	0.			RELIGION-RELATED
INSTALLATION IMWRF 4248 BULLION BLVD FORT KNOX, KY 40121	61-1054163	GOVERNMENT MUNIC	20,000.	0.			UNKNOWN
YOUNG LIFE GREATER LOUISVILLE PO BOX 5098 LOUISVILLE, KY 40255	84-0385934	501(C)(3)	20,000.	0.			PHILANTHROPY, VOLUNTARISM
WELLSPRING, INC. P.O. BOX 1927 LOUISVILLE, KY 40201	31-1020023	501(C)(3)	19,417.	0.			MENTAL HEALTH & CRISIS INTERVENTION
WAYSIDE CHRISTIAN MISSION P.O. BOX 7249 LOUISVILLE, KY 40257	61-0667139	501(C)(3)	19,354.	0.			HUMAN SERVICES
NATIVITY ACADEMY AT ST. BONIFACE 529 E. LIBERTY STREET LOUISVILLE, KY 40202	51-0450314	501(C)(3)	19,250.	0.			EDUCATION
100 BLACK MEN OF LOUISVILLE INC. 4124 WAHL STREET BOULEVARD LOUISVILLE, KY 40218	61-1191888	501(C)(3)	19,000.	0.			SOCIAL SCIENCE
SOS INTERNATIONAL, INC. 1500 ARLINGTON AVE LOUISVILLE, KY 40206	27-2624272	501(C)(3)	18,634.	0.			INTERNATIONAL, FOREIGN AFFAIRS

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KENTUCKY COUNTRY DAY SCHOOL 4100 SPRINGDALE ROAD LOUISVILLE, KY 40241	61-0731998	501(C)(3)	18,500.	0.			EDUCATION
ST. JOHN CENTER FOR THE HOMELESS 700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE, KY 40202	61-1135907	501(C)(3)	18,319.	0.			HOUSING & SHELTER
CHILDREN'S HOSPITAL FOUNDATION - LOUISVILLE - 234 E. GRAY ST. #450 - LOUISVILLE, KY 40202	61-6027530	501(C)(3)	18,205.	0.			HEALTH CARE
BRIDGEHAVEN, INC. 950 S. FIRST ST. LOUISVILLE, KY 40203	61-0548949	501(C)(3)	18,151.	0.			MENTAL HEALTH & CRISIS INTERVENTION
AMERICAN HEART ASSOCIATION 240 WHITTINGTON PARKWAY LOUISVILLE, KY 40222	13-5613797	501(C)(3)	18,081.	0.			DISEASES, DISORDERS & MEDICAL DISCIPLINES
H.L. NEBLETT COMMUNITY CENTER INC. 801 W. 5TH ST. OWENSBORO, KY 42301	61-0523292	501(C)(3)	18,000.	0.			HUMAN SERVICES
SOUTHERN METHODIST UNIVERSITY P.O. BOX 750402 DALLAS, TX 75275	75-0800689	501(C)(3)	18,000.	0.			EDUCATION
ST. XAVIER HIGH SCHOOL 1609 POPLAR LEVEL ROAD LOUISVILLE, KY 40217	61-0447247	RELIGIOUS ORGANI	17,905.	0.			EDUCATION
AMERICAN RED CROSS - LOUISVILLE AREA CHAPTER - P.O. BOX 1675 - LOUISVILLE, KY 40201	53-0196605	501(C)(3)	16,980.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF

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UNITED WAY OF THE COALFIELD, INC. P.O. BOX 366 MADISONVILLE, KY 42431	61-0732633	501(C)(3)	16,956.	0.			PHILANTHROPY, VOLUNTARISM
CHRISTIAN CARE COMMUNITIES 12710 TOWNEPARK WAY, STE 1000 LOUISVILLE, KY 40243	61-0445828	501(C)(3)	16,701.	0.			HEALTH CARE
HELPING HAND OF HOPE INC 6796 S. WILSON ROAD ELIZABETHTOWN, KY 42701	61-0875688	501(C)(3)	16,667.	0.			HUMAN SERVICES
FATHER MALONEY'S BOYS' HAVEN, INC. 2301 GOLDSMITH LN. LOUISVILLE, KY 40218	61-0479621	501(C)(3)	16,611.	0.			HUMAN SERVICES
HABITAT FOR HUMANITY OF METRO LOUISVILLE, INC. - 1620 BANK STREET - LOUISVILLE, KY 40203	58-1735528	501(C)(3)	16,549.	0.			HOUSING & SHELTER
EASTERN KENTUCKY UNIVERSITY 521 LANCASTER AVE. RICHMOND, KY 40475	61-1011211	GOVERNMENT MUNIC	15,952.	0.			EDUCATION
PRESERVATION KENTUCKY, INC. P.O. BOX 5192 FRANKFORT, KY 40601	31-1665931	501(C)(3)	15,500.	0.			ARTS, CULTURE & HUMANITIES
1% FOR THE PLANET, INC. PO BOX 650 WAITSFIELD, VT 05673	91-2151932	501(C)(3)	15,500.	0.			ENVIRONMENT
THE CITY OF SENECA GARDENS 2547 DELL ROAD LOUISVILLE, KY 40205	61-6082056	GOVERNMENT MUNIC	15,490.	0.			ENVIRONMENT

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PTA KENTUCKY CONGRESS 11400 RIDGE ROAD ANCHORAGE, KY 40223	61-0461750	501(C)(3)	15,321.	0.			EDUCATION
DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	02-0222111	501(C)(3)	15,000.	0.			EDUCATION
GREEN RIVER HEALTH DEPARTMENT 1501 BRECKENRIDGE ST. OWENSBORO, KY 42303	61-1010686	GOVERNMENT MUNIC	15,000.	0.			HEALTH CARE
MOUNTAINFILM LTD PO BOX 1088 TELLURIDE, CO 81435	84-1271056	501(C)(3)	15,000.	0.			ARTS, CULTURE & HUMANITIES
WHAS CRUSADE FOR CHILDREN, INC. 520 WEST CHESTNUT LOUISVILLE, KY 40202	23-7075524	501(C)(3)	14,855.	0.			HUMAN SERVICES
MARY BYRON PROJECT, INC. 10401 LINN STATION RD. LOUISVILLE, KY 40223	61-1374726	501(C)(3)	14,622.	0.			CRIME & LEGAL-RELATED
VISUALLY IMPAIRED PRESCHOOLERS SERVICES GREATER LOUISVILLE - 1906 GOLDSMITH LANE - LOUISVILLE, KY 40218	61-1061973	501(C)(3)	14,609.	0.			EDUCATION
CEDAR LAKE FOUNDATION 9505 WILLIAMSBURG PLAZA #200 LOUISVILLE, KY 40222	61-1093278	501(C)(3)	14,306.	0.			HUMAN SERVICES
DARE TO CARE, INC. P.O. BOX 35458 LOUISVILLE, KY 40232	23-7345952	501(C)(3)	13,445.	0.			FOOD, AGRICULTURE & NUTRITION

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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
PORTLAND CHRISTIAN SCHOOL SYSTEM INC. - 8507 WESTPORT RD. - LOUISVILLE, KY 40242	20-2918651	501(C)(3)	13,367.	0.			EDUCATION
FELLOWSHIP MISSIONS PO BOX 382 WINONA LAKE, IN 46590	27-2518264	501(C)(3)	13,250.	0.			RELIGION-RELATED
CANAAN COMMUNITY DEVELOPMENT CORP. 2840 HIKES LN LOUISVILLE, KY 40218	61-1233868	501(C)(3)	13,100.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
KENTUCKY WESLEYAN COLLEGE 3000 FREDERICA STREET OWENSBORO, KY 42301	61-0466713	501(C)(3)	12,500.	0.			EDUCATION
ST. FRANCIS IN THE FIELDS EPISCOPAL CHURCH - 6710 WOLF PEN BRANCH ROAD - HARRODS CREEK, KY 40027	61-0444805	RELIGIOUS ORGANI	12,000.	0.			RELIGION-RELATED
FAMILY SCHOLAR HOUSE, INC. 403 REG SMITH CIRCLE LOUISVILLE, KY 40208	61-1285124	501(C)(3)	11,791.	0.			HUMAN SERVICES
THE FOOD LITERACY PROJECT AT OXMOOR FARM, INC. - 9001 LIMEHOUSE LANE - LOUISVILLE, KY 40222	20-5014424	501(C)(3)	11,527.	0.			FOOD, AGRICULTURE & NUTRITION
KENTUCKY MUSEUM OF ART AND CRAFT 715 WEST MAIN STREET LOUISVILLE, KY 40202	61-0985312	501(C)(3)	11,350.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY WATERWAYS ALLIANCE, INC. 120 WEBSTER ST. #217 LOUISVILLE, KY 40206	61-1239766	501(C)(3)	11,234.	0.			ENVIRONMENT

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THE COUNCIL ON DEVELOPMENTAL DISABILITIES INC. - 1151 S. 4TH ST. - LOUISVILLE, KY 40203	61-0476686	501(C)(3)	11,163.	0.			HUMAN SERVICES
THE CHAPEL OF ST. JAMES THE FISHERMAN - PO BOX 1334 - WELLFLEET, MA 02667	11-1646315	501(C)(3)	11,000.	0.			RELIGION-RELATED
JEFFERSON COMMUNITY & TECHNICAL COLLEGE FOUNDATION - 109 E. BROADWAY - LOUISVILLE, KY 40202	23-7035648	501(C)(3)	11,000.	0.			EDUCATION
ST. JOSEPH CATHOLIC ORPHAN HOME 2823 FRANKFORT AVENUE LOUISVILLE, KY 40206	61-0475286	501(C)(3)	11,000.	0.			HUMAN SERVICES
THE TEMPLE-CONGREGATION ADATH ISRAEL BRITH SHOLOM - 5101 U.S. HIGHWAY 42 - LOUISVILLE, KY 40241	61-0918772	RELIGIOUS ORGANI	10,609.	0.			RELIGION-RELATED
ASSUMPTION HIGH SCHOOL 2170 TYLER LANE LOUISVILLE, KY 40205	61-0447247	501(C)(3)	10,600.	0.			EDUCATION
DENISON UNIVERSITY PO BOX 716 GRANVILLE, OH 43023	31-4379459	501(C)(3)	10,447.	0.			EDUCATION
BEST BUDDIES KENTUCKY 1151 SOUTH 4TH ST. LOUISVILLE, KY 40203	52-1614576	501(C)(3)	10,233.	0.			EDUCATION
CENTER FOR INTERFAITH RELATIONS, INC. - 415 W. MUHAMMAD ALI BLVD # 101 - LOUISVILLE, KY 40202	61-1149619	501(C)(3)	10,078.	0.			ARTS, CULTURE & HUMANITIES

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ST. MICHAEL ORTHODOX CHURCH 3701 SAINT MICHAEL CHURCH DR. LOUISVILLE, KY 40222	61-0605104	RELIGIOUS ORGANI	10,000.	0.			RELIGION-RELATED
HONOR FLIGHT, INC. P.O. BOX 991364 LOUISVILLE, KY 40269	20-2751460	501(C)(3)	10,000.	0.			HUMAN SERVICES
SHAKERTOWN REVISITED, INC. P.O. BOX 177 AUBURN, KY 42206	23-7173327	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES
BLESSINGS IN A BACKPACK INC PO BOX 950291 LOUISVILLE, KY 40295	26-1964620	501(C)(3)	10,000.	0.			HUMAN SERVICES
SUSTAINABLE FOOD ALLIANCE 1000 N. WEST ST. #1200 WILMINGTON, DE 19801	33-1123944	501(C)(3)	10,000.	0.			ENVIRONMENT
COLLEGE OF WOOSTER 1101 N. BEVER ST. WOOSTER, OH 44691	34-0714654	501(C)(3)	10,000.	0.			EDUCATION
INDIANA STATE UNIVERSITY 220 NORTH 7TH ST. TERRE HAUTE, IN 47809	35-6001670	501(C)(3)	10,000.	0.			EDUCATION
OLDHAM COUNTY EXTENSION FOUNDATION, INC. - 1815 N. HIGHWAY 393 - LAGRANGE, KY 40031	45-3580128	501(C)(3)	10,000.	0.			EDUCATION
THE MUSIC BOX INC 14600 WOODBLUFF TRACE LOUISVILLE, KY 40245	51-0565474	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES

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SOUTHERN ENVIRONMENTAL LAW CENTER 201 W. MAIN STREET, #14 CHARLOTTESVILLE, VA 22902	52-1436778	501(C)(3)	10,000.	0.			ENVIRONMENT
KABOOM! 4301 CONNECTICUT AVENUE, NW, SUITE WASHINGTON, DC 20008	52-1970904	501(C)(3)	10,000.	0.			RECREATION & SPORTS
NATURE CONSERVANCY - VIRGINIA 490 WESTFIELD ROAD CHARLOTTESVILLE, VA 22901	53-0242652	501(C)(3)	10,000.	0.			ENVIRONMENT
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - PO BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	10,000.	0.			YOUTH DEVELOPMENT
CANEY CREEK COMMUNITY CENTER 100 PURPOSE ROAD PIPPA PASSES, KY 41844	61-0492351	501(C)(3)	10,000.	0.			EDUCATION
MARINE CORPS COORDINATING COUNCIL OF KENTUCKY, INC. - P.O. BOX 355 - PROSPECT, KY 40059	61-1195685	501(C)(3)	10,000.	0.			PUBLIC & SOCIETAL BENEFIT
OWENSBORO MUSEUM OF FINE ART FOUNDATION INC. - 901 FREDERICA ST. - OWENSBORO, KY 42301	61-1297343	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES
LETOURNEAU UNIVERSITY PO BOX 7001 LONGVIEW, TX 75607	75-1081109	501(C)(3)	10,000.	0.			EDUCATION
TELLURIDE ACADEMY PO BOX 2255 TELLURIDE, CO 81435	84-0945670	501(C)(3)	10,000.	0.			RECREATION & SPORTS

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CALIFORNIA ACADEMY OF SCIENCES 55 MUSIC CONCOURSE DRIVE SAN FRANCISCO, CA 94118	94-1156258	501(C)(3)	10,000.	0.			ARTS, CULTURE & HUMANITIES
ST. JAMES EPISCOPAL CHURCH 401 LAGRANGE ROAD PEWEE VALLEY, KY 40056	61-1041508	RELIGIOUS ORGANI	9,999.	0.			RELIGION-RELATED
KENTUCKY SHAKESPEARE FESTIVAL 323 W BROADWAY, #401 LOUISVILLE, KY 40202	61-6036654	501(C)(3)	9,782.	0.			ARTS, CULTURE & HUMANITIES
ST. GEORGE'S COMMUNITY CENTER INC. 1205 S. 26TH ST. LOUISVILLE, KY 40211	61-0651560	501(C)(3)	9,776.	0.			HUMAN SERVICES
THE PUBLIC LIFE FOUNDATION OF OWENSBORO - 401 FREDERICA STREET, #B-203 - OWENSBORO, KY 42301	61-6232654	PRIVATE OPERATIN	9,700.	0.			PHILANTHROPY, VOLUNTARISM
CATHEDRAL OF THE ASSUMPTION 443 SOUTH FIFTH STREET LOUISVILLE, KY 40202	61-0447247	501(C)(3)	9,500.	0.			RELIGION-RELATED
YEW DELL, INC. P.O. BOX 1334 CRESTWOOD, KY 40014	61-1390688	501(C)(3)	9,450.	0.			ENVIRONMENT
BINGHAM CHILD GUIDANCE CLINIC INC. 200 E. CHESTNUT ST. LOUISVILLE, KY 40202	61-0445838	501(C)(3)	9,276.	0.			YOUTH DEVELOPMENT
UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION, INC. - STEVENSON HALL #516 - LOUISVILLE, KY 40292	61-1029626	501(C)(3)	9,193.	0.			EDUCATION

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NATURE CONSERVANCY - KENTUCKY CHAPTER - 114 WOODLAND AVE - LEXINGTON, KY 40502	53-0242652	501(C)(3)	9,081.	0.			ENVIRONMENT
HELPING HANDS PO BOX 713 GROVELAND, CA 95321	77-0018564	501(C)(3)	9,000.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
ANIMAL HUMANE SOCIETY OF OURAY COUNTY, INC. - PO BOX 2096 - RIDGWAY, CO 81432	84-1266231	501(C)(3)	9,000.	0.			ANIMAL-RELATED
SPECIAL OLYMPICS KENTUCKY INC. 105 LAKEVIEW CT. FRANKFORT, KY 40601	61-0954571	501(C)(3)	8,917.	0.			RECREATION & SPORTS
BLESSED MOTHER CATHOLIC CHURCH 601 E. 23RD ST. OWENSBORO, KY 42303	61-0598513	501(C)(3)	8,844.	0.			RELIGION-RELATED
SMITH COLLEGE PO BOX 340029 BOSTON, MA 02241	04-1843040	501(C)(3)	8,750.	0.			EDUCATION
BOY SCOUTS OF AMERICA - LINCOLN HERITAGE COUNCIL - 12001 SYCAMORE STATION PL. - LOUISVILLE, KY 40299	22-1576300	501(C)(3)	8,645.	0.			YOUTH DEVELOPMENT
INDIANA UNIVERSITY SOUTHEAST 4201 GRANT LINE ROAD NEW ALBANY, IN 47150	35-6001673	GOVERNMENT MUNIC	8,500.	0.			EDUCATION
CITIZENS OF LOUISVILLE ORGANIZED & UNITED TOGETHER - 1113 S. 4TH ST. #350 - LOUISVILLE, KY 40203	61-1202173	501(C)(3)	8,500.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING

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THE SOCIETY OF COLONIAL WARS IN THE COMMONWEALTH OF KENTUCKY - 2829 BROWNSBORO RD - LOUISVILLE, KY 40206	61-6029351	501(C)(3)	8,500.	0.			UNKNOWN
HIGHLANDS COMMUNITY MINISTRIES 1140 CHEROKEE ROAD LOUISVILLE, KY 40204	61-0708776	501(C)(3)	8,255.	0.			RELIGION-RELATED
JEFFERSON COMMUNITY AND TECHNICAL COLLEGE - 109 EAST BROADWAY - LOUISVILLE, KY 40202	61-1320380	GOVERNMENT MUNIC	8,250.	0.			EDUCATION
BEARGRASS CHRISTIAN CHURCH 4100 SHELBYVILLE ROAD LOUISVILLE, KY 40207	61-1219287	501(C)(3)	8,013.	0.			RELIGION-RELATED
WATERVILLE VALLEY BLACK & BLUE TRAIL SMASHERS SNOWSPORTS ED - PO BOX 277 - WATERVILLE VALLEY, NH 03215	23-7259958	501(C)(3)	8,000.	0.			RECREATION & SPORTS
KENTUCKY RESOURCES COUNCIL, INC. P.O. BOX 1070 FRANKFORT, KY 40602	31-1042931	501(C)(3)	8,000.	0.			ENVIRONMENT
SHELBY COUNCIL FOR RETARDED CHILDREN, INC. - PO BOX 853 - SHELBYVILLE, KY 40066	61-0620554	501(C)(3)	8,000.	0.			HUMAN SERVICES
YMCA OF GREATER LOUISVILLE 2400 CRITTENDEN DRIVE LOUISVILLE, KY 40217	61-0444843	501(C)(3)	7,711.	0.			HUMAN SERVICES
BALL STATE UNIVERSITY 2000 WEST UNIVERSITY AVE. MUNCIE, IN 47306	35-0000221	501(C)(3)	7,500.	0.			EDUCATION

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LOUISVILLE VISUAL ARTS ASSOCIATION, INC. - 609 W. MAIN ST., 2ND FLOOR - LOUISVILLE, KY 40202	61-0492348	501(C)(3)	7,500.	0.			ARTS, CULTURE & HUMANITIES
ST. STEPHEN CATHEDRAL 610 LOCUST ST. OWENSBORO, KY 42301	61-0598513	501(C)(3)	7,500.	0.			RELIGION-RELATED
ONE PLUS ONE EQUALS U, INC. PO BOX 22561 LOUISVILLE, KY 40252	26-0391261	501(C)(3)	7,276.	0.			EDUCATION
SARABANDE BOOKS INC. 2234 DUNDEE ROAD, #200 LOUISVILLE, KY 40205	61-1256352	PRIVATE OPERATIN	7,250.	0.			ARTS, CULTURE & HUMANITIES
GOODWILL INDUSTRIES OF KENTUCKY 1325 S 4TH ST LOUISVILLE, KY 40208	61-0475284	501(C)(3)	7,237.	0.			EMPLOYMENT
WEST LOUISVILLE YOUTH SPACE, INC. PO BOX 11580 LOUISVILLE, KY 40251	61-1256668	501(C)(3)	7,150.	0.			HUMAN SERVICES
NEW DIRECTIONS HOUSING CORPORATION 1000 E. LIBERTY ST. LOUISVILLE, KY 40204	61-0715630	501(C)(3)	7,141.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
DANVILLE CHRISTIAN ACADEMY 2170 SHAKERTOWN RD. DANVILLE, KY 40422	37-1420493	501(C)(3)	7,000.	0.			EDUCATION
LITTLE SISTERS OF THE POOR 15 AUDUBON PLAZA DRIVE LOUISVILLE, KY 40217	61-0487466	501(C)(3)	7,000.	0.			HEALTH CARE



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LEGAL AID SOCIETY, INC. 416 W. MUHAMMAD ALI BLVD., #300 LOUISVILLE, KY 40202	61-0537626	501(C)(3)	6,868.	0.			CRIME & LEGAL-RELATED
FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO 80920	95-3188150	501(C)(3)	6,700.	0.			RELIGION-RELATED
DOCTORS WITHOUT BORDERS USA INC. 333 SEVENTH AVENUE, 2ND FLOOR NEW YORK, NY 10001	13-3433452	501(C)(3)	6,500.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
AH HAA SCHOOL FOR THE ARTS PO BOX 1590 TELLURIDE, CO 81435	23-2594045	501(C)(3)	6,500.	0.			ARTS, CULTURE & HUMANITIES
LOUISVILLE FILM SOCIETY PO BOX 6088 LOUISVILLE, KY 40206	26-0252493	501(C)(3)	6,399.	0.			ARTS, CULTURE & HUMANITIES
HEUSER HEARING & LANGUAGE ACADEMY, INC. - 115 E. KENTUCKY ST - LOUISVILLE, KY 40203	61-0492369	501(C)(3)	6,367.	0.			EDUCATION
SUMMERBRIDGE LOUISVILLE PO BOX 34274 LOUISVILLE, KY 40232	31-1695835	501(C)(3)	6,250.	0.			EDUCATION
CHESTNUT STREET FAMILY BRANCH YMCA 930 WEST CHESTNUT ST LOUISVILLE, KY 40203	61-0444843	501(C)(3)	6,250.	0.			HUMAN SERVICES
WATERFRONT DEVELOPMENT CORPORATION 129 EAST RIVER ROAD LOUISVILLE, KY 40202	32-0049006	GOVERNMENT MUNIC	6,200.	0.			RECREATION & SPORTS

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INSTITUTE OF FOOD TECHNOLOGISTS, INC. - 525 W. VAN BUREN ST. #1000 - CHICAGO, IL 60607	36-2136957	501(C)(3)	6,000.	0.			FOOD, AGRICULTURE & NUTRITION
TATES CREEK PRESBYTERIAN CHURCH 3900 RAPID RUN DR LEXINGTON, KY 40515	58-1582598	501(C)(3)	6,000.	0.			RELIGION-RELATED
NORTHEAST YMCA - LOUISVILLE 9400 MILL BROOK RD. LOUISVILLE, KY 40223	61-0444843	501(C)(3)	6,000.	0.			HUMAN SERVICES
ST. BERNADETTE CHURCH 6500 ST. BERNADETTE AVENUE PROSPECT, KY 40059	61-0447247	RELIGIOUS ORGANI	6,000.	0.			RELIGION-RELATED
LOUISVILLE CENTRAL COMMUNITY CENTER, INC. - 1300 W. MUHAMMAD ALI BLVD. - LOUISVILLE, KY 40203	61-0590743	501(C)(3)	6,000.	0.			HUMAN SERVICES
CHURCH OF THE HOLY SPIRIT 3345 LEXINGTON ROAD LOUISVILLE, KY 40206	61-0700575	501(C)(3)	6,000.	0.			RELIGION-RELATED
CORPUS CHRISTI INC. PO BOX 395 SIMPSONVILLE, KY 40067	61-1335590	501(C)(3)	6,000.	0.			HUMAN SERVICES
FONS VITAE OF KENTUCKY, INC. 49 MOCKINGBIRD VALLEY DRIVE LOUISVILLE, KY 40207	61-1381228	501(C)(3)	6,000.	0.			RELIGION-RELATED
BLUE APPLE PLAYERS PO BOX 4261 LOUISVILLE, KY 40204	61-1103965	501(C)(3)	5,927.	0.			ARTS, CULTURE & HUMANITIES

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THE W. EDWARDS DEMING INSTITUTE PO BOX 7 PALOS VERDES ESTATES, CA 90274	52-1856624	501(C)(3)	5,800.	0.			MEDICAL RESEARCH
EDUCATIONAL FOUNDATION OF KENTUCKY SOCIETY OF CPAS - 1735 ALLIANT AVE. - LOUISVILLE, KY 40299	61-6037533	501(C)(3)	5,785.	0.			EDUCATION
SHIVELY AREA MINISTRIES 4415 DIXIE HWY LOUISVILLE, KY 40216	61-1134579	501(C)(3)	5,605.	0.			HOUSING & SHELTER
LOUISVILLE VISUAL ART ASSOCIATION 609 WEST MAIN STREET, 2ND FLOOR LOUISVILLE, KY 40202	61-0492348	501(C)(3)	5,601.	0.			ARTS, CULTURE & HUMANITIES
SLOW MONEY, INC. PO BOX 2231 BOULDER, CO 80306	26-4282320	501(C)(3)	5,500.	0.			FOOD, AGRICULTURE & NUTRITION
JEWISH HOSPITAL & ST. MARY'S HEALTHCARE FOUNDATION - 250 E. LIBERTY ST. #612 - LOUISVILLE, KY 40202	61-1029768	501(C)(3)	5,425.	0.			HEALTH CARE
PRESERVATION LOUISVILLE, INC. 631 SOUTH FIFTH STREET LOUISVILLE, KY 40202	61-1227430	501(C)(3)	5,361.	0.			ARTS, CULTURE & HUMANITIES
SOUTH SANTA ROSA INTERFAITH MINISTRIES INC - 4435 GULF BREEZE PKWY - GULF BREEZE, FL 32563	59-3690750	501(C)(3)	5,300.	0.			HUMAN SERVICES
NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE US - 2600 VIRGINA AVE NW - WASHINGTON, DC 20037	53-0210807	501(C)(3)	5,250.	0.			ARTS, CULTURE & HUMANITIES

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CALVARY EPISCOPAL CHURCH 821 SOUTH FOURTH STREET LOUISVILLE, KY 40203	13-5562208	501(C)(3)	5,200.	0.			RELIGION-RELATED
CHRIST CHURCH UNITED METHODIST 4614 BROWNSBORO ROAD LOUISVILLE, KY 40207	61-0449611	RELIGIOUS ORGANI	5,200.	0.			RELIGION-RELATED
KENTUCKY CENTER FOR THE ARTS ENDOWMENT FUND INC. - 501 W. MAIN ST. - LOUISVILLE, KY 40202	31-0999046	501(C)(3)	5,182.	0.			ARTS, CULTURE & HUMANITIES
CHAMBER MUSIC SOCIETY OF LOUISVILLE - 2221 STRATHMOOR BLVD - LOUISVILLE, KY 40205	61-6026098	501(C)(3)	5,146.	0.			ARTS, CULTURE & HUMANITIES
PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 124 MOUNT AUBURN STREET - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	5,000.	0.			EDUCATION
RADCLIFFE INSTITUTE FOR ADVANCED STUDY - 10 GARDEN STREET - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	5,000.	0.			EDUCATION
BROOKS SCHOOL 1160 GREAT POND RD. NORTH ANDOVER, MA 01845	04-2130844	501(C)(3)	5,000.	0.			EDUCATION
THE URSULINE SCHOOL OF NEW ROCHELLE - 1354 NORTH AVE. - NEW ROCHELLE, NY 10804	13-1740495	501(C)(3)	5,000.	0.			EDUCATION
CREATIVE TIME, INC. 59 EAST 4TH STREET, 6TH FLOOR NEW YORK, NY 10003	13-2835847	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES

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
SUSTAINABLE MARKETS FOUNDATION 45 W. 36TH ST., 6TH FLOOR NEW YORK, NY 10018	13-4188834	501(C)(3)	5,000.	0.			ENVIRONMENT
NELSON COUNTY COMMUNITY CLINIC INC. - 300 WEST JOHN FITCH AVE. #200 - BARDSTOWN, KY 40004	20-4876401	501(C)(3)	5,000.	0.			HEALTH CARE
CERES, INC. 99 CHAUNCY STREET, 6TH FLOOR BOSTON, MA 02111	22-3053747	501(C)(3)	5,000.	0.			ENVIRONMENT
BILLY GOAT HILL GARDEN, INC. 1963 PAYNE ST. LOUISVILLE, KY 40206	27-2484000	501(C)(3)	5,000.	0.			ENVIRONMENT
SUSTAINABLE HEALTH ENTERPRISES, INC. - 175 VARICK ST. - NEW YORK, NY 10014	30-0502122	501(C)(3)	5,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
THE DAVID SCHOOL P. O. BOX 1 DAVID, KY 41616	31-0889471	501(C)(3)	5,000.	0.			EDUCATION
BEACON HOUSE AFTERCARE PROGRAM 963 SOUTH 2ND STREET LOUISVILLE, KY 40203	31-1497608	501(C)(3)	5,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
OHIO UNIVERSITY 120 CHUBB HALL ATHENS, OH 45701	31-6402113	GOVERNMENT MUNIC	5,000.	0.			EDUCATION
ROSE-HULMAN INSTITUTE OF TECHNOLOGY - 5500 WABASH AVENUE - TERRE HAUTE, IN 47803	35-0868149	501(C)(3)	5,000.	0.			EDUCATION

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
ALSAC ST. JUDE CHILDREN'S RESEARCH HOSPITAL - LOUISVILLE - 135 W. MUHAMMAD ALI BLVD. #B - LOUISVILLE, KY 40202	35-1044585	501(C)(3)	5,000.	0.			HEALTH CARE
INDIANA UNIVERSITY P.O. BOX 6035 INDIANAPOLIS, IN 46207	35-6001673	GOVERNMENT MUNIC	5,000.	0.			EDUCATION
INDIANA UNIVERSITY-PURDUE UNIVERSITY FORT WAYNE - 2101 E. COLISEUM BLVD. - FT. WAYNE, IN 46805	35-6001673	GOVERNMENT MUNIC	5,000.	0.			EDUCATION
PURDUE UNIVERSITY 1102 SCHLEMAN HALL, ROOM 305 WEST LAFAYETTE, IN 47907	35-6002041	501(C)(3)	5,000.	0.			EDUCATION
CONGREGATION OF THE PASSION, HOLY CROSS PROVINCE - 5700 N. HARLEM AVE - CHICAGO, IL 60631	36-2170826	501(C)(3)	5,000.	0.			RELIGION-RELATED
MERCURY ONE, INC. PO BOX 701869 DALLAS, TX 75370	45-3929881	501(C)(3)	5,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
FRIENDS OF OLDHAM COUNTY FAIR, INC. - PO BOX 193 - LAGRANGE, KY 40031	56-2493289	501(C)(3)	5,000.	0.			RECREATION & SPORTS
GEORGIA INSTITUTE OF TECHNOLOGY 225 NORTH AVE. NW ATLANTA, GA 30332	58-6002023	501(C)(3)	5,000.	0.			EDUCATION
CHURCH OF THE ADVENT 901 BAXTER AVE. LOUISVILLE, KY 40204	61-0459581	RELIGIOUS ORGANI	5,000.	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
PORTLAND AVENUE PRESBYTERIAN CHURCH - 3126 PORTLAND AVE - LOUISVILLE, KY 40212	61-0471575	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
BASILICA OF ST. JOSEPH PROTO-CATHEDRAL - 310 WEST STEPHEN FOSTER - BARDSTOWN, KY 40004	61-0485640	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
HELP OFFICE OF OWENSBORO 1316 W. 4TH STREET OWENSBORO, KY 42301	61-0724292	501(C)(3)	5,000.	0.			EDUCATION
GREATER LOUISVILLE FOUNDATION, INC. - 614 W MAIN STREET, #6000 - LOUISVILLE, KY 40202	61-1131064	501(C)(3)	5,000.	0.			PHILANTHROPY, VOLUNTARISM
OLDHAM COUNTY HISTORICAL SOCIETY, INC. - 106 N. 2ND ST. - LAGRANGE, KY 40031	61-1195581	501(C)(3)	5,000.	0.			ARTS, CULTURE & HUMANITIES
WESTERN KENTUCKY BOTANICAL GARDEN P.O. BOX 22562 OWENSBORO, KY 42304	61-1251188	501(C)(3)	5,000.	0.			ENVIRONMENT
ANCHOR BAPTIST CHURCH INC. 3601 WINTHROP DR. LEXINGTON, KY 40514	61-1364459	501(C)(3)	5,000.	0.			RELIGION-RELATED
WARM BLESSINGS SHELTER OF HOPE PO BOX 2384 ELIZABETHTOWN, KY 42702	81-0677279	501(C)(3)	5,000.	0.			FOOD, AGRICULTURE & NUTRITION
NATIONAL FOUNDATION TO SUPPORT CELL TRANSPLANT RESEARCH - 462 S. 4TH STREET, STE. 1230 - LOUISVILLE, KY 40202	83-0392250	501(C)(3)	5,000.	0.			MEDICAL RESEARCH

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
HIGH MOUNTAIN INSTITUTE, INC. PO BOX 970 LEADVILLE, CO 80461	84-1306470	501(C)(3)	5,000.	0.			EDUCATION
TELLURIDE ADAPTIVE SKI PROGRAM 113 LOST CREEK LANE, SUITE D TELLURIDE, CO 81435	84-1337870	501(C)(3)	5,000.	0.			RECREATION & SPORTS
TELLURIDE FOUNDATION PO BOX 4222 TELLURIDE, CO 81435	84-1530768	501(C)(3)	5,000.	0.			PHILANTHROPY, VOLUNTARISM
JUST FOR KIDS FOUNDATION INC. PO BOX 308 TELLURIDE, CO 81435	84-1560982	501(C)(3)	5,000.	0.			PHILANTHROPY, VOLUNTARISM
COLORADO WATER TRUST 1420 ODGEN STREET, #A2 DENVER, CO 80218	84-1606567	501(C)(3)	5,000.	0.			ENVIRONMENT
FRIENDS OF INDEPENDENT SCHOOLS AND BETTER EDUCATION - 811 N. KARL JOHAN AVE. - TACOMA, WA 98406	91-1216755	501(C)(3)	5,000.	0.			EDUCATION



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

PART I, LINE 2:

FOR GRANTS THAT ARE ISSUED FROM THE ENDOWMENT FUNDS, THE  
 ORGANIZATION USES GUIDESTAR.ORG TO CONFIRM THAT THE RECIPIENT ORGANIZATION  
 IS IN GOOD STANDING. WHEN THE DONATION IS SENT TO THE RECIPIENT  
 ORGANIZATION A LETTER IS INCLUDED WITH THE DONATION THAT GOODS AND/OR  
 SERVICES THAT MAY BE GIVEN IN EXCHANGE FOR THE DISTRIBUTION ARE BEING  
 DECLINED, EXCEPT THOSE THAT WOULD NOT REDUCE AN INDIVIDUAL'S CHARITABLE TAX  
 DEDUCTION. THE LETTER ALSO INDICATES THAT BY ACCEPTING THE CHECK THE  
 RECIPIENT ORGANIZATION CERTIFIES TO THE COMMUNITY FOUNDATION OF LOUISVILLE

**Part IV Supplemental Information**

THAT THEIR ORGANIZATION CONTINUES TO BE PUBLICLY SUPPORTED AND EXEMPT UNDER SECTION 501(C)(3) OF THE IRS CODE. THE RECIPIENT ORGANIZATION IS ALSO INFORMED THAT THEY ARE REQUIRED TO NOTIFY THE ORGANIZATION IMMEDIATELY OF ANY CHANGE TO THEIR IRS CLASSIFICATION. BY RECEIVING THE LETTER THE ORGANIZATION ALSO CERTIFIES THAT NO TANGIBLE BENEFIT, GOODS OR SERVICES WERE RECEIVED BY ANY INDIVIDUALS OR ENTITIES CONNECTED WITH THE COMMUNITY FOUNDATION OF LOUISVILLE, 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.

FOR GRANT RECIPIENTS THAT ARE DETERMINED BY THE ORGANIZATION'S BOARD, ONCE THE GRANTS ARE AWARDED (AFTER APPLICATIONS ARE REVIEWED AND SITE VISITS ARE COMPLETED) QUARTERLY PROGRESS REPORTS ARE REQUIRED FROM THE ORGANIZATIONS. ALSO, DROP IN SITE VISITS ARE DONE.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2013**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

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

Employer identification number 31-0997017

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1a</b> 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)									
<p><b>b</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 .....</p>	<b>1b</b>									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? .....</p>	<b>2</b>									
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" 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 checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p><b>4</b> 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:</p> <p><b>a</b> Receive a severance payment or change-of-control payment? .....</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	<b>4a</b>	X								
	<b>4b</b>	X								
	<b>4c</b>	X								
<p><b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b></p> <p><b>5</b> 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:</p> <p><b>a</b> The organization? .....</p> <p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>	<b>5a</b>	X								
	<b>5b</b>	X								
<p><b>6</b> 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:</p> <p><b>a</b> The organization? .....</p> <p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>	<b>6a</b>	X								
	<b>6b</b>	X								
<p><b>7</b> 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 .....</p>	<b>7</b>	X								
<p><b>8</b> 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 .....</p>	<b>8</b>	X								
<p><b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....</p>	<b>9</b>									

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

Schedule J (Form 990) 2013

**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 and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SUSAN A BARRY PRESIDENT & CEO	(i)	220,584.	0.	0.	14,481.	8,091.	243,156.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

**Employer identification number**  
31-0997017

**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	34	6,299,277.	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 ▶ ( MINERAL RIGHT ) .....	X	1	15,971.	FMV AT DATE OF GIFT
26 Other ▶ ( BASKETBALL TI ) .....	X	1	13,416.	FMV AT DATE OF GIFT
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) (2013)

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

SCHEDULE M, LINE 32B:

BROKERAGE FIRMS SUCH AS MERRILL LYNCH ARE USED TO SELL

PUBLICLY TRADED SECURITIES.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

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

Employer identification number  
31-0997017

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 CHIEF FINANCIAL OFFICER.

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 CHIEF FINANCIAL OFFICER.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION 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 GOVERNING DOCUMENTS, CONFLICT OF

INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON

REQUEST.



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

Employer identification number  
31-0997017

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

THE COMMUNITY FOUNDATION OF LOUISVILLE IS AUDITED AS PART OF THE

COMMUNITY FOUNDATION OF LOUISVILLE COMBINED GROUP. THE COMMUNITY

FOUNDATION OF LOUISVILLE IS INCLUDED IN THE COMMUNITY FOUNDATION OF

LOUISVILLE 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.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

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

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.** Employer identification number **31-0997017**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY - 31-1140889, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X
THE COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY - 61-1100993, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		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 I	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 I	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X

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

**Schedule R (Form 990) 2013**

SEE PART VII FOR CONTINUATIONS





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

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

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

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> 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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			



**Part VII Supplemental Information**

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

EIN: 61-1100993

325 W. MAIN STREET, SUITE 1110

LOUISVILLE, KY 40202