

EXTENDED TO MAY 15, 2017

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

2015
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.

A For the 2015 calendar year, or tax year beginning JUL 1, 2015 **and ending** JUN 30, 2016

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC. Doing business as		D Employer identification number 31-1140889
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number 502-585-4649
	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202		G Gross receipts \$ 29,505,829.
	F Name and address of principal officer: SUSAN A. BARRY SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.CFLOUISVILLE.COM			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1985
M State of legal domicile: KY			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO FACILITATE DONORS' CHARITABLE GIVING.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	12
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 11,893,047.	Current Year 11,377,784.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	233,385.	399,193.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,126,432.	11,776,977.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,311,343.	10,015,677.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	273,694.	415,747.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,585,037.	10,431,424.	
19 Revenue less expenses. Subtract line 18 from line 12	1,541,395.	1,345,553.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 15,308,048.	End of Year 16,577,009.
	21 Total liabilities (Part X, line 26)	31,852.	153,509.
	22 Net assets or fund balances. Subtract line 21 from line 20	15,276,196.	16,423,500.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	MATTHEW L. BACON, VICE PRESIDENT & CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name REBECCA L. PHILLIPS, CPA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00024055
	Firm's name MOUNTJOY CHILTON MEDLEY LLP Firm's address 462 S. FOURTH ST., SUITE 2600 LOUISVILLE, KY 40202-3445			Firm's EIN 27-1235638 Phone no. (502) 749-1900	

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 \$ 10,405,169. including grants of \$ 10,015,677.) (Revenue \$) DISTRIBUTE GRANTS AND CONTRIBUTIONS TO 501(C)(3) ORGANIZATIONS QUALIFYING UNDER SECTION 509(A).

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

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

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

4e Total program service expenses 10,405,169.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	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
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **MATTHEW L. BACON - 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) MARSHALL BRADLEY, JR. CHAIRPERSON OF THE BOARD	2.00 4.00	X		X				0.	0.	0.
(2) ERIC W. TAYLOR VICE CHAIRPERSON OF THE BO	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) JULIE LAVALLE JONES TREASURER OF THE BOARD	2.00 4.00	X		X				0.	0.	0.
(5) DOROTHY S. RIDINGS MEMBER - AT - LARGE	2.00 4.00	X						0.	0.	0.
(6) M. CLAIRE ALAGIA COMPENSATION COMM. CHAIR	2.00 4.00	X						0.	0.	0.
(7) HARRIET L. LAIR D & S COMM. CHAIR	2.00 4.00	X						0.	0.	0.
(8) CHARLES J. KANE, JR. INVESTMENT COMM. CHAIR	2.00 4.00	X						0.	0.	0.
(9) SUZANNE BERGMEISTER MEMBER - AT - LARGE	2.00 4.00	X						0.	0.	0.
(10) MARK A. CAMPISANO GRANTMAKING, PARTNERSHIP,	2.00 4.00	X						0.	0.	0.
(11) STEPHANIE H. SMITH IMPACT INVESTING COMM. CHA	2.00 4.00	X						0.	0.	0.
(12) JAMES H. TAYLOR BOARD DEVELOPMENT COMM. CH	2.00 4.00	X						0.	0.	0.
(13) SUSAN A BARRY PRESIDENT & CEO	5.00 35.00			X				0.	240,614.	23,304.
(14) MATTHEW L. BACON VP & CFO	5.00 35.00			X				0.	134,210.	16,273.
(15) MICHAEL J. SCHULTZ VP, DEVELOPMENT & STEWARDS	5.00 35.00			X				0.	100,049.	21,703.
(16) CARA BERNOSKY BARIBEAU VP, COMMUNICATIONS & MARKE	5.00 35.00			X				0.	79,423.	14,908.
(17) TRISHA FINNEGAN VP, COMMUNITY LEADERSHIP	5.00 35.00			X				0.	84,540.	4,102.

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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	24,000.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	11,353,784.				
	g Noncash contributions included in lines 1a-1f: \$		8,437,115.				
	h Total. Add lines 1a-1f		11,377,784.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		374,999.			374,999.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		17,753,046.					
		b Less: cost or other basis and sales expenses		17,728,852.			
		c Gain or (loss)		24,194.			
	d Net gain or (loss)		24,194.			24,194.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a _____							
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			11,776,977.	0.	0.	399,193.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,015,677.	10,015,677.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	26,255.		26,255.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EARNINGS DISTRIBUTED T	389,492.	389,492.		
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,431,424.	10,405,169.	26,255.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	297,303.	1	202,060.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	25,378.
	4 Accounts receivable, net	1,937.	4	3,176.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities	14,270,489.	11	15,681,022.
	12 Investments - other securities. See Part IV, line 11	738,319.	12	665,373.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	15,308,048.	16	16,577,009.	
Liabilities	17 Accounts payable and accrued expenses	15,121.	17	72,287.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	16,731.	25	81,222.
	26 Total liabilities. Add lines 17 through 25	31,852.	26	153,509.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	158,381.	27	54,374.
	28 Temporarily restricted net assets	15,117,815.	28	16,369,126.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	15,276,196.	33	16,423,500.	
34 Total liabilities and net assets/fund balances	15,308,048.	34	16,577,009.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,776,977.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,431,424.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,345,553.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,276,196.
5	Net unrealized gains (losses) on investments	5	-198,249.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	16,423,500.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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 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	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
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 _____		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6,483,868.	9,511,037.	11,428,917.	11,893,047.	11,377,784.	50,694,653.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	6,483,868.	9,511,037.	11,428,917.	11,893,047.	11,377,784.	50,694,653.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						11,753,879.
6 Public support. Subtract line 5 from line 4.						38,940,774.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	6,483,868.	9,511,037.	11,428,917.	11,893,047.	11,377,784.	50,694,653.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	334,153.	277,837.	241,673.	230,398.	374,999.	1,459,060.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						52,153,713.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	74.67 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	75.88 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year <i>(see instructions)</i> :		
a <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see instructions).</i>		
2 Activities Test. <i>Answer (a) and (b) below.</i>		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

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

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

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

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

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

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.

OMB No. 1545-0047

2015

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.

Employer identification number

31-1140889

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$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) (2015)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 996,126.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 745,519.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
1		\$ 525,275.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
7		\$ 500,741.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 500,532.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 462,304.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>2</u>		\$ <u>450,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>11</u>		\$ <u>363,138.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>10</u>		\$ <u>349,875.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>9</u>		\$ <u>319,772.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>295,000.</u>	Person <input checked="" 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.)

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	STOCK/PROPERTY SOLD _____ _____ _____	\$ 996,126.	01/01/15
4	STOCK/PROPERTY SOLD _____ _____ _____	\$ 745,519.	01/01/15
1	\$377,91 CASH - \$147,360 STOCK/PROPERTY (SOLD) _____ _____	\$ 147,360.	01/01/15
7	STOCK/PROPERTY SOLD _____ _____ _____	\$ 500,741.	01/01/15
6	\$300,00 CASH - \$200,532 STOCK/PROPERTY _____ _____ _____	\$ 200,532.	01/01/15
8	STOCK/PROPERTY SOLD _____ _____ _____	\$ 462,304.	01/01/15

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
11	STOCK/PROPERTY SOLD _____ _____ _____	\$ 363,138.	01/01/15
10	STOCK/PROPERTY SOLD _____ _____ _____	\$ 349,875.	01/01/15
9	STOCK/PROPERTY SOLD _____ _____ _____	\$ 319,772.	01/01/15
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2015

Open to Public Inspection

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

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
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 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 type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a 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, handling of violations, and enforcing conservation easements during the year ▶ _____

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

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

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

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

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

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

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

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

- a Board designated or quasi-endowment %
- b Permanent endowment %
- c Temporarily restricted endowment %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

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

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on 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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on 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) PAYABLE TO RELATED ORGANIZATION	81,222.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	81,222.

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" on Form 990, Part IV, line 12a.

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

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

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

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

Part 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 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

USING THE "MORE-LIKELY-THAN-NOT" APPROACH AS DEFINED IN THE ASC. NO

LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN REFLECTED IN THE

ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.

**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" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

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

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
20 SCHEMES 5010 PENNEBAKER AVE BARDSTOWN, KY 40004	46-1482499	501(C)(3) - 509(A)(2)	10,000.	0.			RELIGION-RELATED
21ST CENTURY PARKS, INC 471 W. MAIN ST. #202 LOUISVILLE, KY 40202	20-1780317	501(C)(3) - 509(A)(1)	105,970.	0.			RECREATION & SPORTS
564 PARK AVENUE PRESERVATION FOUNDATION - 564 PARK AVENUE - NEW YORK, NY 10065	20-3719314	501(C)(3) - 509(A)(1)	5,000.	0.			ARTS, CULTURE & HUMANITIES
A CHOICE FOR LIFE, INC. 101 W. MARKET ST LOUISVILLE, KY 40202	61-1142823	501(C)(3) - 509(A)(1)	19,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
A FUND, INC. P.O. BOX 241286 LOUISVILLE, KY 40252	61-1237178	501(C)(3) - 509(A)(1)	6,750.	0.			HUMAN SERVICES
ACADEMY OF ARTS 316 W. MARKET ST. LOUISVILLE, KY 40202	59-1525472	501(C)(3) - 509(A)(2)	6,800.	0.			ARTS, CULTURE & HUMANITIES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 304.

3 Enter total number of other organizations listed in the line 1 table 304.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2015)**

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
ACADEMY OF PREACHERS 500 NORTH WATTERSON TRAIL MARION, KY 40243	46-2063948	501(C)(3) - 509(C)	10,000.	0.			RELIGION-RELATED
ACTORS THEATRE OF LOUISVILLE INC. 316 WEST MAIN STREET LOUISVILLE, KY 40202	61-0645030	501(C)(3) - 509(C)	66,235.	0.			ARTS, CULTURE & HUMANITIES
AFRICAN WILDLIFE FOUNDATION 1400 16TH STREET NW, STE #120 WASHINGTON, DC 20036	52-0781390	501(C)(3) - 509(C)	11,200.	0.			ANIMAL-RELATED
ALAMO CITY CHURCH OF CHRIST 3201 S. GEVERS SAN ANTONIO, TX 78210	74-2502855	RELIGIOUS ORGANI	6,000.	0.			RELIGION-RELATED
AMATEUR FIELD TRIAL CLUBS OF AMERICA - 1300 TRIPP ROAD - SOMERVILLE, KY 38068	64-0345180	501(C)(3) - 509(C)	5,000.	0.			RECREATION & SPORTS
AMERICAN CIVIL LIBERTIES UNION OF KENTUCKY FOUNDATION, INC. - 315 GUTHRIE ST #300 - LOUISVILLE, KY 40202	61-6058569	501(C)(3) - 509(C)	15,250.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY
AMERICAN RED CROSS - DISASTER RELIEF - PO BOX 4002018 - DES MOINES, IA 50340	53-0196605	501(C)(3) - 509(C)	25,150.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
AMERICAN RED CROSS - LOUISVILLE AREA CHAPTER - 510 EAST CHESTNUT STREET - LOUISVILLE, KY 40201	53-0196605	501(C)(3) - 509(C)	10,350.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
AMERICAN SOCIETY FOR TESTING AND MATERIALS - 100 BARR HARBOUR DR - WEST CONSHOHOCKEN, PA 19428	23-1352024	501(C)(3) - 509(C)	10,000.	0.			U: SCIENCE & TECHNOLOGY

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

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ARCHDIOCESE OF CINCINNATI 100 E. EIGHTH ST. CINCINNATI, OH 45202	31-0538501	501(C)(3) - 509(C)	6,000.	0.			RELIGION-RELATED
ARCHDIOCESE OF LOUISVILLE PO BOX 1073 LOUISVILLE, KY 40201	61-0447247	501(C)(3) - 509(C)	33,950.	0.			RELIGION-RELATED
ARROWMONT SCHOOL OF ARTS AND CRAFTS - PO BOX 567 - GATLINBURG, TN 37738	58-2007394	501(C)(3) - 509(C)	10,000.	0.			EDUCATION
AVAIL NYC 115 W. 45TH STREET, 4TH FLOOR NEW YORK, NY 10036	13-3771206	501(C)(3) - 509(C)	5,000.	0.			P: HUMAN SERVICES
BAPTIST SEMINARY OF KENTUCKY 400 EAST COLLEGE ST GEORGETOWN, KY 40324	61-1312812	501(C)(3) - 509(C)	23,500.	0.			EDUCATION
BARDSTOWN FOUNDATION FOR EXCELLENCE IN PUBLIC EDUCATION - 308 N. 5TH ST. - BARDSTOWN, KY 40004	31-1145221	501(C)(3) - 509(C)	5,000.	0.			B: EDUCATION
BASILICA OF ST. JOSEPH PROTO-CATHEDRAL - 310 WEST STEPHEN FOSTER - BARDSTOWN, KY 40004	61-0485640	RELIGIOUS ORGANI	8,200.	0.			RELIGION-RELATED
BELFRY HIGH SCHOOL P.O. BOX 160 BELFRY, KY 41514	61-1110695	GOVERNMENT MUNIC	5,000.	0.			EDUCATION
BELLARMI UNIVERSITY 2001 NEWBURG ROAD LOUISVILLE, KY 40205	61-0482955	501(C)(3) - 509(C)	47,750.	0.			EDUCATION

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BIBLE STUDY FELLOWSHIP INTERNATIONAL - 19001 HUEBNER ROAD - SAN ANTONIO, TX 78258	94-1514010	501(C)(3) - 509(5,000.	0.			RELIGION-RELATED
BICYCLING FOR LOUISVILLE PO BOX 70414 LOUISVILLE, KY 40270	20-2068455	501(C)(3) - 509(	35,000.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
BLUE GRASS FARMS CHARITIES, INC. 340 LEGION DRIVE, SUITE 20 LEXINGTON, KY 40504	20-0374962	501(C)(3) - 509(	10,000.	0.			HUMAN SERVICES
BLUE GRASS TRUST FOR HISTORIC PRESERVATION - 253 MARKET ST. - LEXINGTON, KY 40507	61-0518029	501(C)(3) - 509(	5,000.	0.			ARTS, CULTURE & HUMANITIES
BLUEGRASS CONSERVANCY, INC. 380 S. MILL ST. #205 LEXINGTON, KY 40508	61-1293032	501(C)(3) - 509(	18,000.	0.			ENVIRONMENT
BLUEGRASS OPERA PO BOX 910527 LEXINGTON, KY 40591	26-3016871	501(C)(3) - 509(	5,000.	0.			ARTS, CULTURE & HUMANITIES
BOTANICA INC. PO BOX 5056 LOUISVILLE, KY 40255	61-1297238	501(C)(3) - 509(	63,450.	0.			ENVIRONMENT
BOY SCOUTS OF AMERICA - LINCOLN HERITAGE COUNCIL - 12001 SYCAMORE STATION PL. - LOUISVILLE, KY 40299	22-1576300	501(C)(3) - 509(	7,800.	0.			YOUTH DEVELOPMENT
BOYS & GIRLS CLUBS INC. 3900 CRITTENDEN DRIVE LOUISVILLE, KY 40209	61-0568789	501(C)(3) - 509(14,805.	0.			YOUTH DEVELOPMENT

Schedule I (Form 990)

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BROADWAY BAPTIST CHURCH 4000 BROWNSBORO ROAD LOUISVILLE, KY 40207	61-6001947	RELIGIOUS ORGANI	44,459.	0.			RELIGION-RELATED
BUCKHORN CHILDREN'S FOUNDATION 116 BUCKHORN LANE BUCKHORN, KY 41721	61-1211070	501(C)(3) - 509(	10,000.	0.			HUMAN SERVICES
CABBAGE PATCH SETTLEMENT HOUSE, INC. - 1413 SOUTH SIXTH STREET - LOUISVILLE, KY 40208	61-0458359	501(C)(3) - 509(	35,745.	0.			HUMAN SERVICES
CAMDEN MILITARY ACADEMY 520 HIGHWAY 1 N CAMDEN, SC 29020	57-0602035	501(C)(3) - 509(	5,000.	0.			EDUCATION
CAMP PASQUANEY 5 SOUTH STATE STREET CONCORD, NH 03301	02-0227848	501(C)(3) - 509(	15,400.	0.			RECREATION & SPORTS
CAMPUS CRUSADE FOR CHRIST - FLORIDA - PO BOX 628222 - ORLANDO, FL 32862	95-6006173	501(C)(3) - 509(	13,800.	0.			RELIGION-RELATED
CAMPUS CRUSADE FOR CHRIST INTERNATIONAL - 100 LAKE HART DR. #3500 - ORLANDO, FL 32862	33-0863088	501(C)(3) - 509(	37,000.	0.			RELIGION-RELATED
CAPITOL HILL BAPTIST CHURCH 525 A STREET NE WASHINGTON, DC 20002	53-0232505	501(C)(3) - 509(	5,000.	0.			RELIGION-RELATED
CARE AND SHARE INC 2605 PREAMBLE PT COLORADO SPRINGS, CO 80915	84-0731930	501(C)(3) - 509(6,000.	0.			FOOD, AGRICULTURE & NUTRITION

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CARNEGIE MELLON UNIVERSITY PO BOX 371525 PITTSBURG, PA 15251	25-0969449	501(C)(3) - 509(5,816.	0.			EDUCATION
CATHEDRAL OF THE ASSUMPTION 443 SOUTH FIFTH STREET LOUISVILLE, KY 40202	61-0447247	501(C)(3) - 509(	10,500.	0.			RELIGION-RELATED
CATHOLIC ARCHDIOCESE OF OKLAHOMA CITY - 7501 NW EXPRESSWAY - OKLAHOMA CITY, OK 73132	73-0632924	RELIGIOUS ORGANI	8,000.	0.			RELIGION-RELATED
CATHOLIC COMMUNITY FOUNDATION FOR ARCHDIOCESE OF CINCINNATI - 100 EAST EIGHTH STREET, 2ND FLOOR - CINCINNATI, OH 45202	46-5162928	501(C)(3) - 509(	5,000.	0.			RELIGION-RELATED
CATHOLIC EDUCATION FOUNDATION 401 W. MAIN ST. #806 LOUISVILLE, KY 40202	61-1294640	501(C)(3) - 509(	51,950.	0.			EDUCATION
CATHOLIC RELIEF SERVICES P.O. BOX 17090 BALTIMORE, MD 21297	13-5563422	501(C)(3) - 509(	10,450.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
CATHOLICS FOR CHILDREN INC. PO BOX 387 FLOYDS KNOBS, IN 47119	35-2000817	501(C)(3) - 509(	5,000.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY
CAVE HILL HERITAGE FOUNDATION INC 701 BAXTER AVE. LOUISVILLE, KY 40204	56-2498254	501(C)(3) - 509(	6,300.	0.			MUTUAL & MEMBERSHIP BENEFIT
CENTENARY UNITED METHODIST CHURCH 646 W. 5TH STREET WINSTON SALEM, NC 27101	RELIGIOUS ORGANI	RELIGIOUS ORGANI	27,016.	0.			RELIGION-RELATED

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CENTER FOR WOMEN AND FAMILIES 927 S. 2ND ST. LOUISVILLE, KY 40201	61-0444846	501(C)(3) - 509(C)	17,450.	0.			HUMAN SERVICES
CENTRAL KENTUCKY COMMUNITY FOUNDATION INC - 306 W DIXIE AVE - ELIZABETHTOWN, KY 42701	61-6035002	501(C)(3) - 509(C)	12,321.	0.			EDUCATION
CENTRE COLLEGE OF KENTUCKY 600 W. WALNUT ST DANVILLE, KY 40422	61-0444671	501(C)(3) - 509(C)	11,750.	0.			EDUCATION
CHANCE SCHOOL, INC. 4200 LIME KILN LANE LOUISVILLE, KY 40222	61-0549871	501(C)(3) - 509(C)	16,550.	0.			EDUCATION
CHAPEL HILL UNITED CHURCH OF CHRIST - 2307 EMBASSY LANE - LOUISVILLE, KY 40216	61-0602255	RELIGIOUS ORGANI	17,875.	0.			RELIGION-RELATED
CHESAPEAKE ACADEMY, INC. 107 STEAMBOAT ROAD IRVINGTON, VA 22480	54-0793534	501(C)(3) - 509(C)	10,000.	0.			EDUCATION
CHRIST CHURCH UNITED METHODIST 4614 BROWNSBORO ROAD LOUISVILLE, KY 40207	61-0449611	RELIGIOUS ORGANI	85,500.	0.			RELIGION-RELATED
CHRIST UNITED METHODIST CHURCH 3300 AUSTIN PARKWAY SUGAR LAND, TX 77479	76-0080858	RELIGIOUS ORGANI	12,000.	0.			RELIGION-RELATED
CHRISTIAN HEALTH SERVICE CORPS PO BOX 132 FRUITVALE, TX 75127	27-1505747	501(C)(3) - 509(C)	11,000.	0.			RELIGION-RELATED

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CHRYSALIS HOUSE, INC. 1589 HILL RISE DR. LEXINGTON, KY 40504	61-1012290	501(C)(3) - 509(C)	5,100.	0.			MENTAL HEALTH & CRISIS INTERVENTION
CHURCH OF THE HOLY SPIRIT 3345 LEXINGTON ROAD LOUISVILLE, KY 40206	61-0700575	501(C)(3) - 509(C)	14,740.	0.			RELIGION-RELATED
CITY ON A HILL PRODUCTIONS 1914 STANLEY GAULT PARKWAY LOUISVILLE, KY 40223	48-1301649	501(C)(3) - 509(C)	5,000.	0.			RELIGION-RELATED
CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVE CLEVELAND, OH 44195	34-0714585	501(C)(3) - 509(C)	5,200.	0.			HEALTH CARE
CLIFF HAGAN BOYS & GIRLS CLUB INC. 3415 BUCKLAND SQUARE OWENSBORO, KY 42301	61-0663746	501(C)(3) - 509(C)	5,100.	0.			YOUTH DEVELOPMENT
COMMONWEALTH FUND FOR KET, INC. 560 COOPER DRIVE LEXINGTON, KY 40502	61-1285473	501(C)(3) - 509(C)	36,410.	0.			EDUCATION
COMMUNITY CATHOLIC CENTER, INC. PO BOX 11065 LOUISVILLE, KY 40251	01-0785892	501(C)(3) - 509(C)	5,350.	0.			EDUCATION
COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY - WATERFRONT PLAZA, SUITE 1110 - LOUISVILLE, KY 40202	61-1100993	501(C)(3) - 509(C)	38,906.	0.			PHILANTHROPY, VOLUNTEERISM
COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY - 325 W. MAIN, SUITE 1110 - LOUISVILLE, KY 40202	31-1140889	501(C)(3) - 509(C)	15,800.	0.			PHILANTHROPY, VOLUNTEERISM

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COMMUNITY FOUNDATION OF LOUISVILLE INC. - 325 W. MAIN ST., STE. 1110 - LOUISVILLE, KY 40202	31-0997017	501(C)(3) - 509(103,450.	0.			PHILANTHROPY, VOLUNTEERISM
CONCORDIA LUTHERAN CHURCH 1127 E. BROADWAY LOUISVILLE, KY 40204	61-0461819	501(C)(3) - 509(	11,500.	0.			RELIGION-RELATED
CRESTWOOD UNITED METHODIST CHURCH 7214 KAVANAUGH ROAD CRESTWOOD, KY 40014	61-0525162	RELIGIOUS ORGANI	24,300.	0.			RELIGION-RELATED
DARE TO CARE, INC. 5803 FERN VALLEY ROAD LOUISVILLE, KY 40232	23-7345952	501(C)(3) - 509(	14,000.	0.			FOOD, AGRICULTURE & NUTRITION
DOCTORS WITHOUT BORDERS USA INC. 333 SEVENTH AVENUE NEW YORK, NY 10001	13-3433452	501(C)(3) - 509(	8,050.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS
DREAM CENTER CLINIC, INC. 5505 NORTH RHETT AVE. NORTH CHARLESTON, SC 29405	26-2465766	501(C)(3) - 509(	5,000.	0.			HEALTH CARE
EDCHOICE KENTUCKY 1042 BURLINGTON LANE FRANKFORT, KY 40601	47-3944426	501(C)(3) - 509(	10,750.	0.			EDUCATION
EMINENCE CHRISTIAN CHURCH 5333 SOUTH MAIN STREET EMINENCE, KY 40019	61-0989627	501(C)(3) - 509(	8,700.	0.			RELIGION-RELATED
ENVIRONMENTAL DEFENSE FUND INCORPORATED - 257 PARK S - NEW YORK, NY 10010	11-6107128	501(C)(3) - 509(5,100.	0.			ENVIRONMENT

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FAMILY & CHILDREN FIRST, INC. 525 ZANE ST LOUISVILLE, KY 40203	61-0549561	501(C)(3) - 509(10,900.	0.			HUMAN SERVICES
FAMILY OF GOD CHRISTIAN FELLOWSHIP 134 SOUTH MAIN STREET HARRODSBURG, KY 40330		RELIGIOUS ORGANI	8,000.	0.			RELIGION-RELATED
FILSON HISTORICAL SOCIETY 1310 SOUTH THIRD STREET LOUISVILLE, KY 40208	61-0444690	501(C)(3) - 509(	182,966.	0.			ARTS, CULTURE & HUMANITIES
FIRST BAPTIST CHURCH 149 LAWRENCE ST BRANDENBURG, KY 40108	61-0624346	RELIGIOUS ORGANI	10,550.	0.			RELIGION-RELATED
FIRST CHRISTIAN CHURCH 1807 N. MILES ST. ELIZABETHTOWN, KY 42701	61-0535161	RELIGIOUS ORGANI	15,400.	0.			RELIGION-RELATED
FIRST CUTLERVILLE CHRISTIAN REFORMED CHURCH - 1425 68TH STREET, SW - BYRON CENTER, MI 49315	38-2056483	501(C)(3) - 509(	10,000.	0.			RELIGION-RELATED
FIRST PRESBYTERIAN CHURCH - ELIZABETHTOWN - 1016 PEAR ORCHARD DR. - ELIZABETHTOWN, KY 42701	61-0183855	RELIGIOUS ORGANI	72,600.	0.			RELIGION-RELATED
FIRST PRESBYTERIAN CHURCH - RICHLAND - 8047 CHURCH ST. - RICHLAND, MI 49083	38-2307724	RELIGIOUS ORGANI	6,500.	0.			RELIGION-RELATED
FIRST UNITARIAN CHURCH OF LOUISVILLE - 809 S. FOURTH STREET - LOUISVILLE, KY 40203	61-0444693	RELIGIOUS ORGANI	20,000.	0.			RELIGION-RELATED

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FIRST UNITED METHODIST CHURCH 212 3RD STREET N. ST. PETERSBURG, FL 33701	59-0637842	501(C)(3) - 509(14,600.	0.			RELIGION-RELATED
FIRST UNITED METHODIST CHURCH - MIDLAND - 315 W LARKIN - MIDLAND, MI 48640	38-1368752	RELIGIOUS ORGANI	58,000.	0.			RELIGION-RELATED
FIRST UNITED METHODIST CHURCH - SAN DIEGO - 2111 CAMINO DEL RIO SOUTH - SAN DIEGO, CA 92108		RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
FUND FOR THE ARTS, INC. 623 WEST MAIN STREET LOUISVILLE, KY 40202	61-0479626	501(C)(3) - 509(	173,144.	0.			ARTS, CULTURE & HUMANITIES
GATEWAY FELLOWSHIP, INC. P.O. BOX 31 MILLERSBURG, OH 44654	34-1452343	501(C)(3) - 509(	8,000.	0.			RELIGION-RELATED
GENON MINISTRIES P.O. BOX 4 SPRINGDALE, PA 15144	25-1195404	RELIGIOUS ORGANI	6,000.	0.			RELIGION-RELATED
GEORGETOWN COLLEGE 400 EAST COLLEGE STREET GEORGETOWN, KY 40324	61-0444695	501(C)(3) - 509(	7,000.	0.			EDUCATION
GILDA 'S CLUB 633 BAXTER AVE LOUISVILLE, KY 40204	20-1635170	501(C)(3) - 509(	7,132.	0.			DISEASES, DISORDERS & MEDICAL DISCIPLINES
GLORIA DEI LUTHERAN CHURCH 6608 MARINA DRIVE HOLMES BEACH, FL 34217	59-1498840	RELIGIOUS ORGANI	6,300.	0.			RELIGION-RELATED

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GOVERNOR'S SCHOLARS PROGRAM FOUNDATION - 1024 CAPITAL CENTER DRIVE, SUITE 210 - FRANKFORT, KY 40601	61-1393028	501(C)(3) - 509(6,700.	0.		EDUCATION	
GRACE BAPTIST CHURCH OF DANVILLE 2734 OLD STANFORD RD DANVILLE, KY 40422	61-0850199	RELIGIOUS ORGANI	5,875.	0.		RELIGION-RELATED	
GRAND CANYON TRUST 2601 N. FT. VALLEY RD. FLAGSTAFF, AZ 86001	86-0512633	501(C)(3) - 509(	25,000.	0.		ENVIRONMENT	
GREATER LOUISVILLE FOUNDATION, INC. - 614 W MAIN STREET, #6000 - LOUISVILLE, KY 40202	61-1131064	501(C)(3) - 509(	45,700.	0.		PHILANTHROPY, VOLUNTARISM	
GREATER MUHLENBERG PARKS & RECREATION SYSTEM - PO BOX 169 - GREENVILLE, KY 42345	45-4955355	501(C)(3) - 509(	5,000.	0.		RECREATION & SPORT	
GREATER NEW BEGINNINGS CHRISTIAN CHURCH - 2100 W. OAK STREET - LOUISVILLE, KY 40210		RELIGIOUS ORGANI	9,000.	0.		RELIGION-RELATED	
GREEN CASTLE BAPTIST CHURCH 4970 MURPHY LANE LOUISVILLE, KY 40241	61-1026881	RELIGIOUS ORGANI	10,000.	0.		RELIGION-RELATED	
GREEN HILL THERAPY INC. 1410 LONG RUN ROAD LOUISVILLE, KY 40245	61-1378588	501(C)(3) - 509(	50,300.	0.		HEALTH CARE	
GUNSTON HALL REGENTS FUND 10709 GUNSTON RD. MASON NECK, VA 22079	52-1284368	501(C)(3) - 509(5,450.	0.		ARTS, CULTURE & HUMANITIES	

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HABITAT FOR HUMANITY OF METRO LOUISVILLE, INC. - 1620 BANK STREET - LOUISVILLE, KY 40203	58-1735528	501(C)(3) - 509(C)	7,775.	0.			HOUSING & SHELTER
HAND IN HAND MINISTRIES 2225 STEIER LANE LOUISVILLE, KY 40218	61-1352889	501(C)(3) - 509(C)	24,540.	0.			HUMAN SERVICES
HANOVER COLLEGE PO BOX 108 HANOVER, IN 47243	35-0868096	501(C)(3) - 509(C)	10,000.	0.			EDUCATION
HARVEST USA 715 TWINING ROAD, SUITE 200 DRESHER, PA 19025	23-2684968	501(C)(3) - 509(C)	10,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
HAWESVILLE BAPTIST CHURCH 290 MAIN ST. HAWESVILLE, KY 42348	61-0684801	RELIGIOUS ORGANI	9,500.	0.			RELIGION-RELATED
HEALING PLACE INC 1020 WEST MARKET STREET LOUISVILLE, KY 40202	61-1164775	501(C)(3) - 509(C)	60,850.	0.			MENTAL HEALTH & CRISIS INTERVENTION
HEARTLAND CHURCH, INC. 9665 HAGUE ROAD INDIANAPOLIS, IN 46256	35-2108005	501(C)(3) - 509(C)	27,000.	0.			RELIGION-RELATED
HENRY CLAY MEMORIAL FOUNDATION 120 SYCAMORE RD. LEXINGTON, KY 40502	61-0461732	501(C)(3) - 509(C)	10,000.	0.			ARTS, CULTURE & HUMANITIES
HIGHLAND PRESBYTERIAN CHURCH 1011 CHEROKEE ROAD LOUISVILLE, KY 40204	61-0538145	501(C)(3) - 509(C)	15,400.	0.			RELIGION-RELATED

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

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HIGHLANDER RESEARCH & EDUCATION 1959 HIGHLANDER WAY NEW MARKET, TN 37820	62-0646373	501(C)(3) - 509(16,045.	0.		ENVIRONMENT	
HIGHVIEW BAPTIST CHURCH 7711 FEGENBUSH LANE LOUISVILLE, KY 40228	61-0601713	RELIGIOUS ORGANI	58,425.	0.		RELIGION-RELATED	
HILDEGARD HOUSE PO BOX 5613 LOUISVILLE, KY 40255	46-5555742	501(C)(3) - 509(	6,200.	0.		HOUSING & SHELTER	
HISTORIC LOCUST GROVE, INC. 561 BLANKENBAKER LANE LOUISVILLE, KY 40207	61-1390403	501(C)(3) - 509(	19,500.	0.		ARTS, CULTURE & HUMANITIES	
HOLY CROSS HIGH SCHOOL 5144 DIXIE HIGHWAY LOUISVILLE, KY 40216	61-1053991	RELIGIOUS ORGANI	8,500.	0.		EDUCATION	
HOLY TRINITY CHURCH 501 CHERRYWOOD ROAD LOUISVILLE, KY 40207	61-0507073	RELIGIOUS ORGANI	18,620.	0.		RELIGION-RELATED	
HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE, KY 40206	61-0445834	501(C)(3) - 509(	18,512.	0.		HUMAN SERVICES	
HOPEFUL HEARTS FOUNDATION, INC. PO BOX 437015 LOUISVILLE, KY 40253	75-3003999	501(C)(3) - 509(	5,000.	0.		HUMAN SERVICES	
HOSEAS HOUSE INC. PO BOX 991492 LOUISVILLE, KY 40269	20-3161219	501(C)(3) - 509(27,000.	0.		HUMAN SERVICES	

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HOSPARUS INC 3532 EPHRAIM MCDOWELL DRIVE LOUISVILLE, KY 40205	61-0921718	501(C)(3) - 509(C)	8,500.	0.			HUMAN SERVICES
INTELLIGENT CHANGE INITIATIVES INC 200 WEST VINE ST. #420 LEXINGTON, KY 40507	61-1304888	501(C)(3) - 509(C)	7,000.	0.			SCIENCE & TECHNOLOGY
INTERFAITH COMMUNITY SERVICES 2820 W. INA TUCSON, AZ 85741	86-0520997	501(C)(3) - 509(C)	5,000.	0.			RELIGION-RELATED
INTERNATIONAL RESCUE COMMITTEE INC. - 122 E. 42ND ST - NEW YORK, NY 10168	13-5660870	501(C)(3) - 509(C)	5,300.	0.			INTERNATIONAL, FOREIGN AFFAIRS
ISAAC W. BERNHEIM FOUNDATION, INC. P.O. BOX 130 CLERMONT, KY 40110	61-0444651	501(C)(3) - 509(C)	27,665.	0.			ENVIRONMENT
JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION - 3332 NEWBURG ROAD - LOUISVILLE, KY 40232	61-1021128	GOVERNMENT MUNIC	18,000.	0.			EDUCATION
JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. - 3332 NEWBURG RD. - LOUISVILLE, KY 40218	61-1021128	501(C)(3) - 509(C)	20,300.	0.			PHILANTHROPY, VOLUNTARISM
JEWISH COMMUNITY OF LOUISVILLE INC. - 3600 DUTCHMANS LANE - LOUISVILLE, KY 40205	61-0444765	501(C)(3) - 509(C)	48,033.	0.			PHILANTHROPY, VOLUNTARISM
JEWISH FAMILY & VOCATIONAL SERVICES OF LOUISVILLE, INC. - 2821 KLEMPNER WAY - LOUISVILLE, KY 40205	61-0444704	501(C)(3) - 509(C)	5,350.	0.			HUMAN SERVICES

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JEWISH FAMILY AND CAREER SERVICES OF LOUISVILLE, INC. - 2821 KLEMPNER WAY - LOUISVILLE, KY 40205	61-0444704	501(C)(3) - 509(5,000.	0.			HUMAN SERVICES
JEWISH HOSPITAL & ST. MARY'S HEALTHCARE FOUNDATION - 250 E. LIBERTY ST. #612 - LOUISVILLE, KY 40202	61-1029768	501(C)(3) - 509(	26,450.	0.			HEALTH CARE
JUSTFAITH MINISTRIES INC PO BOX 221348 LOUISVILLE, KY 40252	20-1377228	501(C)(3) - 509(	10,000.	0.			RELIGION-RELATED
JUSTICE VENTURES INTERNATIONAL PO BOX 2834 WASHINGTON, DC 20013	20-4214306	501(C)(3) - 509(	24,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
KENTUCKY CENTER FOR THE ARTS ENDOWMENT FUND INC. - 501 W. MAIN ST. - LOUISVILLE, KY 40202	31-0999046	501(C)(3) - 509(	15,700.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY COLLEGE OF ART & DESIGN 845 S 3RD ST. LOUISVILLE, KY 40203	27-2232797	501(C)(3) - 509(	14,400.	0.			EDUCATION
KENTUCKY DANCE COUNCIL, INC. 315 EAST MAIN STREET LOUISVILLE, KY 40202	61-6033779	501(C)(3) - 509(	35,100.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY HEALTH JUSTICE NETWORK PO BOX 4761 LOUISVILLE, KY 40204	27-1246514	501(C)(3) - 509(	5,200.	0.			HEALTH CARE
KENTUCKY HUMANE SOCIETY 1000 LYNDON LANE #B LOUISVILLE, KY 40222	61-0463938	501(C)(3) - 509(5,350.	0.			ANIMAL-RELATED

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KENTUCKY K-9 SEARCH AND RESCUE TEAM - 1941 BISHOP LN, STE 707 - LOUISVILLE, KY 40218	11-3827751	501(C)(3) - 509(C)	5,000.	0.			ANIMAL-RELATED
KENTUCKY MUSEUM OF ART AND CRAFT 715 WEST MAIN STREET LOUISVILLE, KY 40202	61-0985312	501(C)(3) - 509(C)	39,400.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY NATURAL LANDS TRUST, INC. 433 CHESTNUT ST. BERE, KY 40403	61-1276913	501(C)(3) - 509(C)	10,100.	0.			ENVIRONMENT
KENTUCKY OPERA ASSOCIATION 323 W. BROADWAY, SUITE 601 LOUISVILLE, KY 40202	61-6013111	501(C)(3) - 509(C)	32,100.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY PUBLIC RADIO INC 619 SOUTH 4TH STREET LOUISVILLE, KY 40202	61-1259787	501(C)(3) - 509(C)	69,394.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY RESOURCES COUNCIL, INC. P.O. BOX 1070 FRANKFORT, KY 40602	31-1042931	501(C)(3) - 509(C)	7,200.	0.			ENVIRONMENT
KENTUCKY SHAKESPEARE FESTIVAL 323 W BROADWAY, #401 LOUISVILLE, KY 40202	61-6036654	501(C)(3) - 509(C)	5,100.	0.			ARTS, CULTURE & HUMANITIES
KENTUCKY TRUST FOR HISTORIC PRESERVATION INC - PO BOX 35000 - LOUISVILLE, KY 40232	61-1328391	501(C)(3) - 509(C)	35,000.	0.			ARTS, CULTURE & HUMANITIES
KING SOLOMON MISSIONARY BAPTIST CHURCH - PO BOX 1161 - LOUISVILLE, KY 40201		RELIGIOUS ORGANI	20,000.	0.			RELIGION-RELATED

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KOKOMO FIRST CHURCH OF THE NAZARENE - 2734 S. WASHINGTON STREET - KOKOMO, IN 46902	35-1329534	RELIGIOUS ORGANI	26,000.	0.			RELIGION-RELATED
KOSAIR CHARITIES COMMITTEE, INC. P.O. BOX 37370 LOUISVILLE, KY 40233	61-0514703	501(C)(3) - 509(C)	15,300.	0.			HEALTH CARE
LAMB AND LION MINISTRIES P.O. BOX 919 MCKINNEY, TX 75070	75-1717049	501(C)(3) - 509(C)	7,100.	0.			RELIGION-RELATED
LEADERSHIP LOUISVILLE FOUNDATION 732 W. MAIN ST. LOUISVILLE, KY 40202	31-0958491	501(C)(3) - 509(C)	6,250.	0.			PUBLIC & SOCIETAL BENEFIT
LEGAL AID SOCIETY, INC. 416 W. MUHAMMAD ALI BLVD., #300 LOUISVILLE, KY 40202	61-0537626	501(C)(3) - 509(C)	21,150.	0.			CRIME & LEGAL-RELATED
LEXINGTON CATHOLIC HIGH SCHOOL 2250 CLAYS MILL RD. LEXINGTON, KY 40503	61-1132894	501(C)(3) - 509(C)	5,000.	0.			RELIGION-RELATED
LEXINGTON OPERA SOCIETY P.O. BOX 8463 LEXINGTON, KY 40533	61-1170162	501(C)(3) - 509(C)	5,000.	0.			ARTS, CULTURE & HUMANITIES
LEXINGTON PHILHARMONIC SOCIETY 161 N. MILL ST. LEXINGTON, KY 40507	61-6033529	501(C)(3) - 509(C)	5,000.	0.			ARTS, CULTURE & HUMANITIES
LIBERTY HALL, INC. 202 WILKINSON STREET FRANKFORT, KY 40601	61-0469278	501(C)(3) - 509(C)	6,150.	0.			ARTS, CULTURE & HUMANITIES

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LIFE IN ABUNDANCE INTERNATIONAL PO BOX 660367 DALLAS, TX 75266	02-0587875	501(C)(3) - 509(C)	13,333.	0.			INTERNATIONAL, FOREIGN AFFAIRS
LIFESONG FOR ORPHANS INC PO BOX 40 GRIDLEY, IL 61744	35-1902841	501(C)(3) - 509(C)	5,500.	0.			INTERNATIONAL, FOREIGN AFFAIRS
LOUISVILLE COLLEGIATE SCHOOL 2427 GLENMARY AVENUE LOUISVILLE, KY 40204	61-0449630	501(C)(3) - 509(C)	92,075.	0.			EDUCATION
LOUISVILLE FILM SOCIETY PO BOX 6088 LOUISVILLE, KY 40206	26-0252493	501(C)(3) - 509(C)	10,000.	0.			ARTS, CULTURE & HUMANITIES
LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION - 301 YORK STREET - LOUISVILLE, KY 40203	61-0969361	501(C)(3) - 509(C)	15,315.	0.			EDUCATION
LOUISVILLE GROWS, INC. 2509 PORTLAND AVENUE LOUISVILLE, KY 40212	27-0959401	501(C)(3) - 509(C)	16,967.	0.			FOOD, AGRICULTURE & NUTRITION
LOUISVILLE METRO GOVERNMENT 527 W. JEFFERSON STREET LOUISVILLE, KY 40202	32-0049006	GOVERNMENT MUNIC	5,000.	0.			COMMUNITY IMPROVEMENT & CAPACITY BUILDING
LOUISVILLE METRO PARKS FOUNDATION, INC. - P O BOX 37280 - LOUISVILLE, KY 40233	20-4372292	501(C)(3) - 509(C)	14,715.	0.			ENVIRONMENT
LOUISVILLE OLMSTED PARKS CONSERVANCY, INC. - 1299 TREVILLIAN WAY - LOUISVILLE, KY 40213	61-1196368	501(C)(3) - 509(C)	59,504.	0.			RECREATION & SPORTS

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LOUISVILLE ORCHESTRA, INC. 323 W. BROADWAY, STE. 700 LOUISVILLE, KY 40202	61-6000384	501(C)(3) - 509(197,000.	0.			ARTS, CULTURE & HUMANITIES
LYNNHURST UNITED CHURCH OF CHRIST 4401 TAYLOR BOULEVARD LOUISVILLE, KY 40215	61-6014324	RELIGIOUS ORGANI	6,600.	0.			RELIGION-RELATED
MAIN STREET PRAYER CENTER INC. 35 N MAIN STREET MADISONVILLE, KY 42431	27-0273246	501(C)(3) - 509(	10,000.	0.			RELIGION-RELATED
MARION CHRISTIAN CHURCH P.O. BOX 361 MARION, KY 42064		RELIGIOUS ORGANI	10,000.	0.			RELIGION-RELATED
MARY IMMACULATE QUEEN CHURCH 15384 N. CHURCH ROAD RATHDRUM, ID 83858		RELIGIOUS ORGANI	11,283.	0.			RELIGION-RELATED
MARY TODD LINCOLN HOUSE PO BOX 132 LEXINGTON, KY 40588	23-7002838	501(C)(3) - 509(	5,000.	0.			ARTS, CULTURE & HUMANITIES
MARYHURST, INC. 1015 DORSEY LANE LOUISVILLE, KY 40223	31-1542209	501(C)(3) - 509(	11,850.	0.			MENTAL HEALTH & CRISIS INTERVENTION
MEDICAL TEAMS INTERNATIONAL P.O BOX 10 PORTLAND, OR 97207	93-0878944	501(C)(3) - 509(	5,000.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
MEMORIAL CHURCH OF CHRIST 900 ECHO LANE HOUSTON, TX 77024	74-1548114	RELIGIOUS ORGANI	9,500.	0.			RELIGION-RELATED

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MEREDITH-DUNN LEARNING CENTER 3023 MELBOURNE AVENUE LOUISVILLE, KY 40220	23-7339248	501(C)(3) - 509(50,500.	0.		EDUCATION	
METRO UNITED WAY P.O. BOX 950148 LOUISVILLE, KY 40295	61-0444680	501(C)(3) - 509(	346,500.	0.		PHILANTHROPY, VOLUNTARISM	
METRO UNITED WAY, INC. 334 E BROADWAY LOUISVILLE, KY 40204	61-0444680	501(C)(3) - 509(	101,250.	0.		PHILANTHROPY, VOLUNTARISM	
MILLIGAN COLLEGE P.O. BOX 750 MILLIGAN COLLEGE, TN 37682	62-0535755	501(C)(3) - 509(	5,000.	0.		EDUCATION	
MILTON BAPTIST CHURCH 10076 HIGHWAY 421 N MILTON, KY 40045	61-1037421	RELIGIOUS ORGANI	10,000.	0.		RELIGION-RELATED	
NAPERVILLE EVANGELICAL COVENANT CHURCH - 1150 HOBSON RD. - NAPERVILLE, IL 60540	51-0221694	RELIGIOUS ORGANI	7,500.	0.		RELIGION-RELATED	
NAPLES UNITED CHURCH OF CHRIST 5200 CRAYTON RD NAPLES, FL 34103	59-1555020	RELIGIOUS ORGANI	15,250.	0.		RELIGION-RELATED	
NATIONAL CHRISTIAN FOUNDATION KENTUCKY - PO BOX 175 - LEXINGTON, KY 40588	61-1404015	501(C)(3) - 509(	1,300,000.	0.		PHILANTHROPY, VOLUNTARISM	
NATIONAL STEM CELL FOUNDATION 462 S. 4TH STREET, STE. 1230 LOUISVILLE, KY 40202	83-0392250	501(C)(3) - 509(10,200.	0.		MEDICAL RESEARCH	

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NATIVITY ACADEMY AT ST. BONIFACE 529 E. LIBERTY STREET LOUISVILLE, KY 40202	51-0450314	501(C)(3) - 509(6,200.	0.			EDUCATION
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET NEW YORK, NY 10011	13-2654926	501(C)(3) - 509(	25,650.	0.			ENVIRONMENT
NATURE CONSERVANCY - KENTUCKY CHAPTER - 114 WOODLAND AVE - LEXINGTON, KY 40502	53-0242652	501(C)(3) - 509(	95,215.	0.			ENVIRONMENT
NAVIGATORS P.O. BOX 6000 COLORADO SPRINGS, CO 80934	84-6007896	501(C)(3) - 509(	6,000.	0.			RELIGION-RELATED
NEIGHBORHOOD HOUSE 201 NORTH 25TH STREET LOUISVILLE, KY 40212	61-0445842	501(C)(3) - 509(	7,000.	0.			HUMAN SERVICES
NORTH STAR FUND 520 EIGHTH AVENUE, SUITE 2203 NEW YORK, NY 10018	13-2950801	501(C)(3) - 509(	5,000.	0.			PHILANTHROPY, VOLUNTARISM
NUBILITY ATHLETICS FOUNDATION 8400 HIDDEN OAKS LANE TAMAROA, IL 62888	45-3724053	501(C)(3) - 509(	10,000.	0.			RECREATION & SPORTS
OLDHAM COUNTY HISTORICAL SOCIETY, INC. - 106 N. 2ND ST. - LAGRANGE, KY 40031	61-1195581	501(C)(3) - 509(	10,000.	0.			ARTS, CULTURE & HUMANITIES
OPEN DOORS WITH BROTHER ANDREW, INC. - PO BOX 27001 - SANTA ANA, CA 92799	23-7275342	501(C)(3) - 509(5,000.	0.			RELIGION-RELATED

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OUR LADY OF LOURDES CHURCH 508 BRECKINRIDGE LANE LOUISVILLE, KY 40207	61-6002467	RELIGIOUS ORGANI	19,151.	0.			RELIGION-RELATED
OUR LADY OF TEPEYAC HIGH SCHOOL 2228 S. WHIPPLE CHICAGO, IL 60623	36-2170826	501(C)(3) - 509(C)	39,450.	0.			EDUCATION
OUR LADY OF THE PILLAR 4049 S. 5TH STREET LOUISVILLE, KY 40214	61-1400379	501(C)(3) - 509(C)	23,932.	0.			RELIGION-RELATED
PALM SPRING ART MUSEUM 101 MUSEUM DR PALM SPRINGS, CA 92262	95-1809576	501(C)(3) - 509(C)	6,000.	0.			ARTS, CULTURE & HUMANITIES
PITT ACADEMY 7515 WESTPORT ROAD LOUISVILLE, KY 40222	23-7066205	501(C)(3) - 509(C)	163,625.	0.			EDUCATION
PLANNED PARENTHOOD OF INDIANA AND KENTUCKY - PO BOX 397 - INDIANAPOLIS, IN 46206	35-0874276	501(C)(3) - 509(C)	10,850.	0.			HEALTH CARE
PRACTICAL SHEPHERDING PO BOX 21806 LOUISVILLE, KY 40221	46-1070095	501(C)(3) - 509(C)	25,000.	0.			RELIGION-RELATED
PRESBYTERIAN CHURCH OF DANVILLE 500 W. MAIN ST. DANVILLE, KY 40422	61-0587173	RELIGIOUS ORGANI	13,364.	0.			RELIGION-RELATED
PRESENTATION ACADEMY 861 S. 4TH ST. LOUISVILLE, KY 40203	61-0447247	501(C)(3) - 509(C)	59,100.	0.			EDUCATION

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PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 124 MOUNT AUBURN STREET - CAMBRIDGE, MA 02138	04-2103580	501(C)(3) - 509(C)	7,100.	0.			EDUCATION
RAFIKI FOUNDATION, INC. PO BOX 1988 EUSTIS, FL 32727	74-2477089	501(C)(3) - 509(C)	5,000.	0.			HUMAN SERVICES
REASONS TO BELIEVE 731 EAST ARROW HIGHWAY GLEN DORA, CA 91740	33-0168048	501(C)(3) - 509(C)	5,000.	0.			RELIGION-RELATED
RIVER FIELDS, INC. 455 SOUTH 4TH ST, STE 990 LOUISVILLE, KY 40202	61-6032501	501(C)(3) - 509(C)	6,650.	0.			ENVIRONMENT
ROBERT E. LEE MEMORIAL ASSOCIATION, INC. - 483 GREAT HOUSE ROAD - STRATFORD, VA 22558	54-0536105	501(C)(3) - 509(C)	82,500.	0.			ARTS, CULTURE & HUMANITIES
SACRED HEART SCHOOLS INC. 3177 LEXINGTON ROAD LOUISVILLE, KY 40206	61-1181710	501(C)(3) - 509(C)	11,407.	0.			EDUCATION
SAINTS OF GOD CHURCH 2200 FOREST HILL AVE FLINT, MI 48504	36-4690747	RELIGIOUS ORGANIZATION	8,000.	0.			RELIGION-RELATED
SALVATION ARMY - LEXINGTON 736 W. MAIN ST LEXINGTON, KY 40508	22-2406433	501(C)(3) - 509(C)	15,000.	0.			HUMAN SERVICES
SANTA FE COUNCIL ON INTERNATIONAL RELATIONS - 413 GRANT AVENUE, SUITE D - SANTA FE, NM 87501	85-0196904	501(C)(3) - 509(C)	10,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS

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SCARLET HOPE 2305 SYCAMORE AVE LOUISVILLE, KY 40206	27-0804557	501(C)(3) - 509(C)	5,500.	0.			RELIGION-RELATED
SCHOOL CHOICE SCHOLARSHIPS, INC. 2200 DUNDEE ROAD, SUITE B LOUISVILLE, KY 40205	31-1589289	501(C)(3) - 509(C)	19,300.	0.			EDUCATION
SCHWAB CHARITABLE FUND 211 MAIN ST SAN FRANCISCO, CA 94105	31-1640316	501(C)(3) - 509(C)	40,000.	0.			PHILANTHROPY, VOLUNTARISM
SECOND PRESBYTERIAN CHURCH 3701 OLD BROWNSBORO ROAD LOUISVILLE, KY 40207	61-0466721	501(C)(3) - 509(C)	92,343.	0.			RELIGION-RELATED
SEE JESUS NET PO BOX 197 TELFORD, PA 18969	23-3000534	501(C)(3) - 509(C)	10,000.	0.			RELIGION-RELATED
SHAKER VILLAGE OF PLEASANT HILL 3501 LEXINGTON ROAD HARRODSBURG, KY 40330	61-0592561	501(C)(3) - 509(C)	63,750.	0.			ARTS, CULTURE & HUMANITIES
SHAKESPEARE BEHIND BARS INC PO BOX 33293 LOUISVILLE, KY 40232	27-3400469	501(C)(3) - 509(C)	5,200.	0.			ARTS, CULTURE & HUMANITIES
SHEPHERD'S HOUSE, INC. 154 BONNIE BRAE DRIVE LEXINGTON, KY 40508	61-1105573	501(C)(3) - 509(C)	10,000.	0.			MENTAL HEALTH & CRISIS INTERVENTION
SHEPHERDSTOWN PUBLIC LIBRARY P.O. BOX 278 SHEPHERDSTOWN, WV 25443	55-0629409	GOVERNMENT MUNIC	250,000.	0.			EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SISTERS FOR LIFE EDUCATION FUND INC - PO BOX 32534 - LOUISVILLE, KY 40232	33-1061393	501(C)(3) - 509(	5,000.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY
SISTERS OF CHARITY OF NAZARETH PO BOX 9 NAZARETH, KY 40048	75-3124022	501(C)(3) - 509(	7,800.	0.			RELIGION-RELATED
SMITH COLLEGE PO BOX 340029 BOSTON, MA 02241	04-1843040	501(C)(3) - 509(	16,650.	0.		EDUCATION	
SMITHVILLE FOOD PANTRY PO BOX 433 SMITHVILLE, TX 78957	74-2885979	501(C)(3) - 509(	15,000.	0.			FOOD, AGRICULTURE & NUTRITION
SOUTH LOUISVILLE COMMUNITY MINISTRIES, INC. - 415 1/2 W. ASHLAND AVE - LOUISVILLE, KY 40214	31-0891259	501(C)(3) - 509(	5,600.	0.			RELIGION-RELATED
SOUTHEAST CHRISTIAN CHURCH OF JEFFERSON COUNTY KENTUCKY INC. - 920 BLANKENBAKER PKWY - LOUISVILLE, KY 40243	61-0850307	501(C)(3) - 509(	144,833.	0.			RELIGION-RELATED
SPALDING UNIVERSITY 845 S. THIRD ST. LOUISVILLE, KY 40203	61-0444780	501(C)(3) - 509(	5,200.	0.		EDUCATION	
SPEED ART MUSEUM 2035 SOUTH THIRD ST. LOUISVILLE, KY 40208	61-0444823	501(C)(3) - 509(	54,375.	0.			ARTS, CULTURE & HUMANITIES
ST. ALBAN'S EPISCOPAL CHURCH 885 SHORE RD CAPE ELIZABETH, ME 04107	01-0240618	RELIGIOUS ORGANI	5,600.	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
ST. ALBERT THE GREAT CHURCH 1395 GIRARD DR. LOUISVILLE, KY 40222	61-0568020	RELIGIOUS ORGANI	8,800.	0.			RELIGION-RELATED
ST. ANDREW'S EPISCOPAL CHURCH 11 GLIDDEN ST. NEWCASTLE, ME 04553	01-0264364	RELIGIOUS ORGANI	47,000.	0.			RELIGION-RELATED
ST. BASIL CATHOLIC CHURCH 513 MONROE BLVD. SOUTH HAVEN, MI 49090	38-1961750	501(C)(3) - 509(	9,500.	0.			RELIGION-RELATED
ST. BERNADETTE CHURCH 6500 ST. BERNADETTE AVENUE PROSPECT, KY 40059	61-0447247	RELIGIOUS ORGANI	10,000.	0.			RELIGION-RELATED
ST. FRANCES OF ROME 2119 PAYNE ST. LOUISVILLE, KY 40206	61-0445829	RELIGIOUS ORGANI	6,000.	0.			RELIGION-RELATED
ST. FRANCIS IN THE FIELDS EPISCOPAL CHURCH - 6710 WOLF PEN BRANCH ROAD - HARRODS CREEK, KY 40027	61-0444805	RELIGIOUS ORGANI	145,050.	0.			RELIGION-RELATED
ST. FRANCIS SCHOOL INC. 11000 U.S. HWY. 42 GOSHEN, KY 40026	61-0663057	RELIGIOUS ORGANI	31,825.	0.		EDUCATION	
ST. IAKOVOS GREEK ORTHODOX CHURCH 36 W. 700 N. VALPARAISO, IN 46385	35-1509763	RELIGIOUS ORGANI	6,850.	0.			RELIGION-RELATED
ST. JAMES EPISCOPAL CHURCH PO BOX 507 LA GRANGE, TX 78945	501(C)(3) - 509(		18,750.	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
ST. JOHN CENTER FOR THE HOMELESS 700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE, KY 40202	61-1135907	501(C)(3) - 509(	6,935.	0.			HOUSING & SHELTER
ST. JOHN THE BAPTIST CATHOLIC CHURCH - PO BOX 510 - EDMOND, OK 73083	73-6095725	RELIGIOUS ORGANI	10,000.	0.			RELIGION-RELATED
ST. JOHN THE EVANGELIST CATHOLIC CHURCH - 625 111TH AVE. NORTH - NAPLES, FL 34108		RELIGIOUS ORGANI	10,000.	0.			RELIGION-RELATED
ST. JOHN UNITED METHODIST CHURCH 12700 W. HIGHWAY 42 PROSPECT, KY 40059	61-0961846	RELIGIOUS ORGANI	9,095.	0.			RELIGION-RELATED
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3) - 509(	13,150.	0.			DISEASES, DISORDERS & MEDICAL DISCIPLINES
ST. LABRE INDIAN SCHOOL PO BOX 797 ASHLAND, MT 59003	81-0244542	501(C)(3) - 509(	5,400.	0.			EDUCATION
ST. MARGARET MARY CATHOLIC COMMUNITY - 7813 SHELBYVILLE ROAD - LOUISVILLE, KY 40222	61-0447247	RELIGIOUS ORGANI	34,000.	0.			RELIGION-RELATED
ST. MARK'S EPISCOPAL CHURCH 2822 FRANKFORT AVENUE LOUISVILLE, KY 40206	61-0444813	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
ST. MARY OF THE KNOBS 3033 MARTIN ROAD FLOYDS KNOBS, IN 47119	35-6033616	RELIGIOUS ORGANI	19,200.	0.			RELIGION-RELATED

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. MATTHEW'S EPISCOPAL CHURCH 330 N. HUBBARDS LANE LOUISVILLE, KY 40207	61-0476701	RELIGIOUS ORGANI	6,105.	0.			RELIGION-RELATED
ST. MEINRAD ARCHABBEY 200 HILL DRIVE ST. MEINRAD, IN 47577	35-0868161	501(C)(3) - 509(C)	5,100.	0.			RELIGION-RELATED
ST. PAUL UNITED METHODIST CHURCH 2000 DOUGLAS BLVD. LOUISVILLE, KY 40205	61-0444817	RELIGIOUS ORGANI	6,000.	0.			RELIGION-RELATED
ST. PAUL'S CATHOLIC CHURCH 501 W. SHORT ST. LEXINGTON, KY 40507	61-1132894	501(C)(3) - 509(C)	5,000.	0.			RELIGION-RELATED
ST. PAUL'S SCHOOL 325 PLEASANT ST. CONCORD, NH 03301	02-0222227	501(C)(3) - 509(C)	30,000.	0.			EDUCATION
ST. WILLIAM CHURCH 1226 W. OAK STREET LOUISVILLE, KY 40210	61-0447247	RELIGIOUS ORGANI	12,100.	0.			RELIGION-RELATED
ST. XAVIER HIGH SCHOOL 1609 POPLAR LEVEL ROAD LOUISVILLE, KY 40217	61-0447247	RELIGIOUS ORGANI	91,450.	0.			EDUCATION
THE BONNET HOUSE 900 NORTH BIRCH ROAD FORT LAUDERDALE, FL 33304	65-0161955	501(C)(3) - 509(C)	5,000.	0.			ARTS, CULTURE & HUMANITIES
THE DE PAUL SCHOOL 1925 DUKER AVENUE LOUISVILLE, KY 40205	61-0711082	501(C)(3) - 509(C)	7,975.	0.			EDUCATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE KADAMPA CENTER 5412 ETTA BURKE COURT RALEIGH, NC 27606	56-1840856	501(C)(3) - 509(C)	7,000.	0.			RELIGION-RELATED
THE MORTON CENTER, INC. 1028 BARRETT AVE. LOUISVILLE, KY 40204	31-1068020	501(C)(3) - 509(C)	7,700.	0.			MENTAL HEALTH & CRISIS INTERVENTION
THE SALVATION ARMY - LOUISVILLE AREA COMMAND - P.O. BOX 1149 - LOUISVILLE, KY 40201	58-0660607	501(C)(3) - 509(C)	15,730.	0.			HUMAN SERVICES
THE TEMPLE-CONGREGATION ADATH ISRAEL BRITH SHOLOM - 5101 U.S. HIGHWAY 42 - LOUISVILLE, KY 40241	61-0918772	501(C)(3) - 509(C)	61,251.	0.			RELIGION-RELATED
THE UNIVERSITY OF LOUISVILLE FOUNDATION, INC. - 215 CENTRAL AVE., #300 - LOUISVILLE, KY 40208	23-7078461	501(C)(3) - 509(C)	39,400.	0.			EDUCATION
THE WEEKDAY SCHOOL AT SECOND PRESBYTERIAN CHURCH - 3701 BROWNSBORO ROAD - LOUISVILLE, KY 40207	23-6393377	RELIGIOUS ORGANI	5,600.	0.			RELIGION-RELATED
THRU THE BIBLE RADIO NETWORK 1146 E. GREEN ST PASADENA, CA 91106	95-6145276	501(C)(3) - 509(C)	5,000.	0.			RELIGION-RELATED
TRESLOUISVILLE PO BOX 5816 LOUISVILLE, KY 40255	47-3739795	501(C)(3) - 509(C)	180,300.	0.			ENVIRONMENT
TRINITY HIGH SCHOOL FOUNDATION, INC. - 4011 SHELBYVILLE RD. - LOUISVILLE, KY 40207	31-1105966	501(C)(3) - 509(C)	20,275.	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 UNITED METHODIST CHURCH 2796 CHARLESTOWN ROAD NEW ALBANY, IN 47150	35-1020930	RELIGIOUS ORGANI	5,000.	0.			RELIGION-RELATED
TRUSTEES OF PRINCETON UNIVERSITY PO BOX 5357 PRINCETON, NJ 08543	21-0634501	501(C)(3) - 509(	25,000.	0.			EDUCATION
TRUSTEES OF THE SMITH COLLEGE P.O. BOX 340029 BOSTON, MA 02241	04-1843040	501(C)(3) - 509(	5,000.	0.			EDUCATION
UFM INTERNATIONAL, INC 10000 N. OAK TRAFFICWAY KANSAS CITY, MO 64155	23-1352564	501(C)(3) - 509(	5,000.	0.			RELIGION-RELATED
UNITED WAY OF METROPOLITAN ATLANTA PO BOX 2692 ATLANTA, GA 30301	58-0566194	501(C)(3) - 509(	10,000.	0.			HUMAN SERVICES
UNITED WAY OF MIDLAND COUNTY 220 W. MAIN STREET, SUITE 100 MIDLAND, MI 48640	38-1434224	501(C)(3) - 509(	15,000.	0.			PHILANTHROPY, VOLUNTARISM
UNITY OF LOUISVILLE, INC. 757 S. BROOK STREET LOUISVILLE, KY 40203	61-0469289	501(C)(3) - 509(	20,500.	0.			RELIGION-RELATED
UNIVERSITY OF GEORGIA FOUNDATION 1260 LUMPKIN ST. ATHENS, GA 30602	58-6033837	501(C)(3) - 509(	28,009.	0.			EDUCATION
UNIVERSITY OF KENTUCKY WILLIAM B. STURGILL DEVELOPMENT BL LEXINGTON, KY 40506	61-6001218	GOVERNMENT MUNIC	27,227.	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
UNIVERSITY OF KENTUCKY ATHLETIC ASSOCIATION - 338 LEXINGTON AVENUE - LEXINGTON, KY 40506	61-0501295	501(C)(3) - 509(C)	5,000.	0.			RECREATION & SPORTS
UNIVERSITY OF NEBRASKA FOUNDATION 1010 LINCOLN MALL, SUITE 300 LINCOLN, NE 68508	47-0379839	501(C)(3) - 509(C)	8,000.	0.			EDUCATION
UNIVERSITY OF THE SOUTH 735 UNIVERSITY AVE SEWANEE, TN 37383	62-0475697	501(C)(3) - 509(C)	140,000.	0.			EDUCATION
UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION - 580 MASSIE ROAD - CHARLOTTESVILLE, VA 22903	54-0838566	501(C)(3) - 509(C)	10,250.	0.			EDUCATION
US ASSOCIATION FOR UNHCR 1775 K STREET, SUITE 580 WASHINGTON, DC 20006	52-1662800	501(C)(3) - 509(C)	5,150.	0.			INTERNATIONAL, FOREIGN AFFAIRS
VANDERBILT UNIVERSITY 2301 VANDEBILT PLACE NASHVILLE, TN 37240	62-0476822	501(C)(3) - 509(C)	11,250.	0.			EDUCATION
VANGUARD CHARITABLE ENDOWMENT PROGRAM - P.O. BOX 55766 - BOSTON, MA 02205	23-2888152	501(C)(3) - 509(C)	30,000.	0.			PHILANTHROPY, VOLUNTARISM
VOLUNTEERS OF AMERICA OF KENTUCKY AND TENNESSEE - 570 S FOURTH ST, #100 - LOUISVILLE, KY 40202	61-0480950	501(C)(3) - 509(C)	20,425.	0.			HUMAN SERVICES
WASHINGTON & LEE UNIVERSITY 204 W. WASHINGTON ST LEXINGTON, VA 24450	54-0505977	501(C)(3) - 509(C)	14,100.	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
WATERFRONT DEVELOPMENT CORPORATION 129 RIVER ROAD LOUISVILLE, KY 40202	32-0049006	GOVERNMENT MUNIC	6,400.	0.			RECREATION & SPORTS
WAYSIDE CHRISTIAN MISSION 808 EAST MARKET STREET LOUISVILLE, KY 40257	61-0667139	501(C)(3) - 509(C)	17,445.	0.			HUMAN SERVICES
WELLSRING, INC. P.O. BOX 1927 LOUISVILLE, KY 40201	31-1020023	501(C)(3) - 509(C)	22,700.	0.			MENTAL HEALTH & CRISIS INTERVENTION
WEST END PREPARATORY SCHOOL 3628 VIRGINIA AVENUE LOUISVILLE, KY 40211	04-3798875	501(C)(3) - 509(C)	58,300.	0.			EDUCATION
WHITE ROCK PRESBYTERIAN CHURCH 310 ROVER BOULEVARD LOS ALAMOS, NM 87544	23-7000560	RELIGIOUS ORGANI	12,500.	0.			RELIGION-RELATED
WILLOW CREEK ASSOCIATION PO BOX 3188 BARRINGTON, IL 60011	36-3799040	501(C)(3) - 509(C)	10,000.	0.			RELIGION-RELATED
WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989	54-0519590	501(C)(3) - 509(C)	18,750.	0.			EDUCATION
WORLD GOSPEL MISSION PO BOX 948 MARION, IN 46952	65-0339453	501(C)(3) - 509(C)	12,000.	0.			RELIGION-RELATED
WORLD HARVEST MISSION 101 WEST AVENUE #305 JENKINTOWN, PA 19046	23-2223692	501(C)(3) - 509(C)	18,400.	0.			RELIGION-RELATED

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD VISION P.O. BOX 9716 FEDERAL WAY, WA 98063	95-1922279	501(C)(3) - 509(C)	10,000.	0.			INTERNATIONAL, FOREIGN AFFAIRS
YALE IN KENTUCKY, INC. 408 DUFF LANE LOUISVILLE, KY 40207	31-1078981	501(C)(3) - 509(C)	5,700.	0.			EMPLOYMENT
YALE UNIVERSITY P.O. BOX 2038 NEW HAVEN, CT 06521	06-0646973	501(C)(3) - 509(C)	75,600.	0.			EDUCATION
YALE UNIVERSITY - SCHOOL OF FORESTRY & ENVIRONMENTAL STUDIES - 195 PROSPECT STREET - NEW HAVEN, CT 06511	06-0646973	501(C)(3) - 509(C)	350,000.	0.			EDUCATION
YEW DELL, INC. P.O. BOX 1334 CRESTWOOD, KY 40014	61-1390688	501(C)(3) - 509(C)	44,950.	0.			ENVIRONMENT
YMCA OF GREATER LOUISVILLE 545 S. 2ND STREET LOUISVILLE, KY 40202	61-0444843	501(C)(3) - 509(C)	28,150.	0.			HUMAN SERVICES
YOUNG ADULT DEVELOPMENT IN ACTION INC. - PO BOX 638 - LOUISVILLE, KY 40201	61-1374470	501(C)(3) - 509(C)	6,250.	0.			HUMAN SERVICES
YOUNG LIFE GREATER LOUISVILLE PO BOX 5098 LOUISVILLE, KY 40255	84-0385934	501(C)(3) - 509(C)	8,200.	0.			PHILANTHROPY, VOLUNTARISM
YOUNG NONPROFIT PROFESSIONALS NETWORK - 244 FIFTH AVENUE, SUITE L200 - NEW YORK, NY 10001	51-0434057	501(C)(3) - 509(C)	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
YOUTH FOR CHRIST USA, INC. PO BOX 21187 LOUISVILLE, KY 40221	61-1067013	501(C)(3) - 509(C)	5,500.	0.			YOUTH DEVELOPMENT

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

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

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

PART I, LINE 2:

THE ORGANIZATION USES GUIDESTAR.ORG TO CONFIRM THAT THE RECIPIENT

ORGANIZATIONS ARE IN GOOD STANDING PRIOR TO MAKING THE DONATION. WHEN THE

DONATION IS SENT THE FOLLOWING INFORMATION IS PROVIDED TO EACH GRANT

RECIPIENT:

"ENCLOSED IS A GRANT DISTRIBUTION FROM THE COMMUNITY FOUNDATION OF

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

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

Part IV Supplemental Information

PLEASE USE THE DONOR'S NAME AND ADDRESS LISTED ON THE CHECK. PLEASE NOTE

THAT GOODS AND/OR SERVICES THAT MAY BE GIVEN IN EXCHANGE FOR THIS

DISTRIBUTION ARE BEING DECLINED, EXCEPT THOSE THAT WOULD NOT REDUCE AN

INDIVIDUAL'S CHARITABLE TAX DEDUCTION.

BY ACCEPTING THIS CHECK YOUR ORGANIZATION CERTIFIES TO THE COMMUNITY

FOUNDATION OF LOUISVILLE THAT YOUR ORGANIZATION CONTINUES TO BE PUBLICLY

SUPPORTED AND EXEMPT UNDER SECTION 501(C)(3) OF THE IRS CODE. PLEASE NOTE

THAT YOU ARE REQUIRED TO NOTIFY US IMMEDIATELY OF ANY CHANGE TO YOUR IRS

CLASSIFICATION.

ADDITIONALLY, YOU CERTIFY THAT NO TANGIBLE BENEFIT, GOODS OR SERVICES WERE

RECEIVED BY ANY INDIVIDUALS OR ENTITIES CONNECTED WITH THE COMMUNITY

FOUNDATION OF LOUISVILLE FUND, AND THAT THE GRANT WILL NOT BE USED TO

SATISFY THE PAYMENT OF ANY ENFORCEABLE PLEDGE OR LEGALLY BINDING FINANCIAL

OBLIGATION ON BEHALF OF THE DONOR.

PLEASE CALL THE FOUNDATION AT (502) 585-4649 IF YOU HAVE ANY QUESTIONS

ABOUT THIS DISTRIBUTION FROM THE COMMUNITY FOUNDATION OF LOUISVILLE."

IN ADDITION, WHEN THE DONOR MAKES THE CONTRIBUTION TO THE DEPOSITORY, THE

DONOR ALSO AGREES THAT THEY ARE NOT RECEIVING ANY TANGIBLE BENEFIT, GOOD OR

SERVICE.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2015

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

▶ Attach to Form 990.

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.

Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |
- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** 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?
- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |
- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
- Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**
- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III
- 8** Were any amounts reported on 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
- 9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2015

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 on 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 in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SUSAN A BARRY PRESIDENT & CEO	(i)	0.	0.	0.	0.	0.	0.
	(ii)	240,614.	0.	11,695.	11,609.	263,918.	0.
(2) MATTHEW L. BACON VP & CFO	(i)	0.	0.	0.	0.	0.	0.
	(ii)	134,210.	0.	6,718.	9,555.	150,483.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	173	8,437,115	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 ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? **30a**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? **31**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **32a**
- 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.

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) (2015)

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)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

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

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

FORM 990, PART VI, SECTION B, LINE 11:

A DRAFT OF THE RETURN IS REVIEWED FIRST BY INTERNAL MANAGEMENT. AFTER

INTERNAL MANAGEMENT HAS REVIEWED THE RETURN AND ANY CHANGES ARE MADE A

DRAFT IS PROVIDED TO THE FINANCE COMMITTEE FOR REVIEW AND A COPY IS

PROVIDED TO THE ENTIRE BOARD. ONCE THE COMMENTS FROM THE BOARD ARE

REVIEWED, THE FINAL DRAFT OF THE RETURN IS PREPARED AND SIGNED BY THE VICE

PRESIDENT.

FORM 990, PART VI, SECTION B, LINE 12C:

OFFICERS, DIRECTORS AND KEY EMPLOYEES MAY NOT ENGAGE IN ACTIVITIES THAT

MIGHT INTERFERE WITH THE DISCHARGE OF THEIR RESPONSIBILITY OR IN

TRANSACTIONS THAT REASONABLY MIGHT AFFECT THE JUDGMENT EXERCISE ON BEHALF

OF THE ORGANIZATION. IF THERE HAVE BEEN ANY CHANGES THAT MAY BE A POTENTIAL

CONFLICT OF INTEREST, INDIVIDUALS SHOULD NOTIFY THE PRESIDENT & CEO.

OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO READ AND SIGN A

CONFLICT OF INTEREST DISCLOSURE FORM FROM TIME TO TIME WHICH THE

ORGANIZATION WILL KEEP ON FILE.

OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE EXPECTED AT ALL TIMES TO USE GOOD

JUDGMENT AND TO ADHERE TO HIGH ETHICAL STANDARDS. IN DOING SO, THEY WILL

CONDUCT THEIR AFFAIRS IN SUCH A MANNER AS TO AVOID ANY ACTUAL OR POTENTIAL

CONFLICT OF INTEREST.

THE ORGANIZATION BELIEVES THAT ITS OFFICERS, DIRECTORS AND KEY EMPLOYEES

SHOULD NOT BE INHIBITED SOLELY BECAUSE OF POTENTIAL CONFLICTS OF INTEREST.

IN FACT, THE ORGANIZATION BELIEVES THAT CONFLICTS OF INTEREST CAN BEST BE

HANDLED THROUGH FULL DISCLOSURE OF SUCH INTERESTS, TOGETHER WITH

NONINVOLVEMENT IN ANY VOTE WHERE SUCH A CONFLICT EXISTS.

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

Schedule O (Form 990 or 990-EZ) (2015)

532211
09-02-15

Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
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EACH OFFICER, DIRECTOR AND KEY EMPLOYEE IS REQUESTED TO PROVIDE ANNUALLY TO

THE PRESIDENT OF CFL A LIST OF OFFICES AND DIRECTORSHIPS HE OR SHE HOLDS IN

CHARITABLE AND BUSINESS ORGANIZATIONS, AND TO IDENTIFY HIS OR HER PLACE OF

EMPLOYMENT OR PRINCIPAL BUSINESS ACTIVITY.

OFFICERS, DIRECTORS AND KEY EMPLOYEES SHOULD DISCLOSE A CONFLICT OF

INTEREST:

PRIOR TO VOTING ON OR OTHERWISE DISCHARGING HIS OR HER DUTIES.

PRIOR TO ENTERING INTO ANY CONTRACT WHICH COMES BEFORE THE BOARD OR ANY

COMMITTEE;

AS SOON AS POSSIBLE AFTER THE INDIVIDUAL LEARNS OF A CONFLICT OF INTEREST

IN ANY OTHER CONTEXT.

DISCLOSURE SHOULD BE MADE TO THE BOARD CHAIR, PRESIDENT OF CFL, OR IN THE

CASE OF A COMMITTEE, TO THE CHAIRPERSON OF THAT COMMITTEE. THE MINUTES OF

THE MEETING SHOULD REFLECT THAT APPROPRIATE DISCLOSURE WAS MADE, AND THAT

THE INTERESTED PARTY ABSTAINED FROM VOTING.

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

THE ORGANIZATION DOES NOT HAVE ANY EMPLOYEES CURRENTLY; HOWEVER, THEY

FOLLOW THE POLICIES AND PROCEDURES FOR DETERMINING COMPENSATION AS

ESTABLISHED BY THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. THE COMMUNITY

FOUNDATION OF LOUISVILLE, INC. HAS A COMPENSATION COMMITTEE THAT REVIEWS

FORM 990'S AND COMPENSATION STUDIES TO DETERMINE A FAIR AND REASONABLE

COMPENSATION FOR THE OFFICERS AND KEY EMPLOYEES. THE PRESIDENT'S AND

OFFICERS' COMPENSATION IS THEN APPROVED BY THE COMPENSATION COMMITTEE.

COMPENSATION FOR ALL EMPLOYEES IS APPROVED BY THE COMPENSATION COMMITTEE

AND BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

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

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC. IS AUDITED AS PART OF THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. COMBINED GROUP.

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

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

**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.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE
DEPOSITORY, INC.

Employer identification number

31-1140889

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" 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, INC. - 31-0997017, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	7	N/A		X
FELIX E. MARTIN JR. FOUNDATION, INC - 26-2193468, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X
THE COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY, INC. - 61-11009, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	7	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X
THE REAL ESTATE ASSET LEGACY FOUNDATION OF KENTUCKY, INC - 26-2417672, 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202	FACILITATE INDIVIDUAL DONORS' CHARITABLE GIVING TYPE I SUPPORTING ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	COMMUNITY FOUNDATION OF LOUISVILLE, INC.		X

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2015

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

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

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

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

EIN: 61-1100993

325 W. MAIN STREET, SUITE 1110

LOUISVILLE, KY 40202

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number (EIN) or 31-1140889
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 325 W MAIN STREET, NO. 1110	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40202	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

MATTHEW L. BACON

- The books are in the care of ▶ 325 W. MAIN STREET, SUITE 1110 - LOUISVILLE, KY 40202
Telephone No. ▶ 502-585-4649 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2017, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning JUL 1, 2015, and ending JUN 30, 2016.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number (EIN) or 31-1140889
	Number, street, and room or suite no. If a P.O. box, see instructions. 325 W MAIN STREET, NO. 1110	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40202	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

MATTHEW L. BACON

• The books are in the care of 325 W. MAIN STREET, SUITE 1110 - LOUISVILLE, KY 40202
Telephone No. 502-585-4649 Fax No.

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until MAY 15, 2017.

5 For calendar year , or other tax year beginning JUL 1, 2015, and ending JUN 30, 2016.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension
THE ORGANIZATION NEEDS ADDITIONAL TIME TO GATHER THE NECESSARY INFORMATION AND TO REVIEW THE DRAFT RETURN TO ENSURE THAT THEY ARE FILING A COMPLETE AND ACCURATE RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date