

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

2021

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

A For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**

| | | |
|--|---|---|
| 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 Number and street (or P.O. box if mail is not delivered to street address) Room/suite 325 W MAIN STREET 1110 City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202 F Name and address of principal officer: RON GALLO SAME AS C ABOVE | D Employer identification number 31-1140889 E Telephone number 502-585-4649 G Gross receipts \$ 81,474,854. 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

| | | | | |
|-----------------------------|---------|---|--|----------------------------|
| | 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. | | |
| Activities & Governance | 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 6 |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 6 |
| | 5 | Total number of individuals employed in calendar year 2021 (Part V, line 2a) | 5 | 0 |
| | 6 | Total number of volunteers (estimate if necessary) | 6 | 7 |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| | 7b | Net unrelated business taxable income from Form 990-T, Part I, line 11 | 7b | 0. |
| | Revenue | 8 | Contributions and grants (Part VIII, line 1h) | Prior Year 17,857,642. |
| 9 | | Program service revenue (Part VIII, line 2g) | 0. | 0. |
| 10 | | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 346,060. | 397,911. |
| 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) | 18,203,702. | 22,827,292. |
| Expenses | | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 16,804,054. |
| | 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. |
| | 16b | Total fundraising expenses (Part IX, column (D), line 25) ▶ | 0. | |
| | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 562,977. | 512,657. |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 17,367,031. | 18,518,207. |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | 836,671. | 4,309,085. |
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) | Beginning of Current Year 29,429,716. | End of Year 31,052,896. |
| | 21 | Total liabilities (Part X, line 26) | 7,002,641. | 6,195,905. |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 22,427,075. | 24,856,991. |

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 MATTHEW L. BACON, EXECUTIVE VICE PRESIDENT & CFO Type or print name and title | Date |
| Paid Preparer Use Only | Print/Type preparer's name THERESA BATLINER, CPA | Preparer's signature Date 05/09/23 |
| | Firm's name ▶ MCM CPAS & ADVISORS LLP Firm's address ▶ 462 SOUTH 4TH STREET SUITE 2600 LOUISVILLE, KY 40202 | Check if self-employed <input type="checkbox"/> PTIN P00543162 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
If "Yes," describe these new services on Schedule O.

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

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

4a (Code: _____) (Expenses \$ 18,496,034. including grants of \$ 18,005,550.) (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 on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **▶** 18,496,034.

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> ? See instructions | 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 Rev. Proc. 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 donor-restricted endowments or in 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> See instructions | | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | X |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |
| 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 | |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---|-----|----|
| 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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | | X |
| 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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 the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <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 on 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 | | |
| b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | |

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

| | | Yes | No |
|------------|--|------------|----|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | |
| | 2a | | 0 |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. | 2b | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | 3b | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | X |
| b | If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | X |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | |
| 10 | Section 501(c)(7) organizations. Enter: | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | |
| 11 | Section 501(c)(12) organizations. Enter: | | |
| a | Gross income from members or shareholders | 11a | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11b | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. | 13a | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | 13b | |
| c | Enter the amount of reserves on hand | 13c | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 14b | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. | 15 | X |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | 16 | X |
| 17 | Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069. | 17 | |

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 on 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 on Schedule O. | | |
| 1b | Enter the number of voting members included on 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, 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 on 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 on 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 on 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 on 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 (1024 or 1024-A, 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 on Schedule O)
- 19** Describe on 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

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/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (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) RONALD GALLO PRESIDENT & CEO | 5.00 45.10 | | | X | | | | 0. | 310,888. | 8,277. |
| (2) MATTHEW L. BACON VP & CFO | 5.00 45.00 | | | X | | | | 0. | 186,028. | 12,834. |
| (3) TRISHA FINNEGAN CHIEF STRATEGY OFFICER (END DATE 6/ | 5.00 45.00 | | | X | | | | 0. | 173,842. | 13,578. |
| (4) HEATHER CASH VP, DEVELOPMENT & STEWARDS | 5.00 45.10 | | | X | | | | 0. | 128,947. | 13,356. |
| (5) JANET WALTHER VP, COMMUNICATIONS & MARKE | 5.00 45.00 | | | X | | | | 0. | 129,343. | 9,681. |
| (6) RAMONA DALLUM VP, EQUITY & IMPACT | 5.00 45.00 | | | X | | | | 0. | 79,652. | 7,220. |
| (7) STEPHANIE BATEMAN DIRECTOR | 1.00 2.00 | X | | | | | | 0. | 0. | 0. |
| (8) CURT SCOTT DIRECTOR | 1.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (9) STEPHANIE H. SMITH BOARD CHAIR (END DATE 9/29/21) | 2.00 4.10 | X | | X | | | | 0. | 0. | 0. |
| (10) DAVID TACHAU BOARD CHAIR | 2.00 4.10 | X | | X | | | | 0. | 0. | 0. |
| (11) ELIZABETH FUST BOARD VICE CHAIR | 2.00 3.10 | X | | X | | | | 0. | 0. | 0. |
| (12) MICHAEL W. GOUGH BOARD TREASURER | 2.00 4.00 | X | | X | | | | 0. | 0. | 0. |
| (13) DEBORAH B. WILLIAMS BOARD SECRETARY | 2.00 4.10 | X | | X | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (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 | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 1b Subtotal | | | | | | | 0. | 1,008,700. | 64,946. | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | 0. | 0. | 0. | |
| d Total (add lines 1b and 1c) | | | | | | | 0. | 1,008,700. | 64,946. | |

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

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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 | 309,884. | | | | |
| | e Government grants (contributions) | 1e | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 22,119,497. | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 12,173,844. | | | | |
| | h Total. Add lines 1a-1f | | | 22,429,381. | | | |
| 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) | | 526,408. | | | 526,408. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | | | | |
| | 6 a Gross rents | 6a | (i) Real | | | | |
| | | | (ii) Personal | | | | |
| | | | | | | | |
| | b Less: rental expenses | 6b | | | | | |
| | c Rental income or (loss) | 6c | | | | | |
| | d Net rental income or (loss) | | | | | | |
| | 7 a Gross amount from sales of assets other than inventory | 7a | (i) Securities | 58,519,065. | | | |
| | | | (ii) Other | | | | |
| | | | | | | | |
| | b Less: cost or other basis and sales expenses | 7b | 58,647,562. | | | | |
| | c Gain or (loss) | 7c | -128,497. | | | | |
| d Net gain or (loss) | | | -128,497. | | -128,497. | | |
| 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | 8a | | | | | | |
| b Less: direct expenses | 8b | | | | | | |
| c Net income or (loss) from fundraising events | | | | | | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | | |
| b Less: direct expenses | 9b | | | | | | |
| c Net income or (loss) from gaming activities | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | 10a | | | | | | |
| b Less: cost of goods sold | 10b | | | | | | |
| c Net income or (loss) from sales of inventory | | | | | | | |
| Miscellaneous Revenue | 11 a | Business Code | | | | | |
| | b | | | | | | |
| | c | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d | | | | | | |
| 12 Total revenue. See instructions | | | 22,827,292. | 0. | 0. | 397,911. | |

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 ... | 18,005,550. | 18,005,550. | | |
| 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 (nonemployees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | 22,173. | | 22,173. | |
| 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 on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) | | | | |
| a EARNINGS DISTRIBUTED TO | 490,484. | 490,484. | | |
| b _____ | | | | |
| c _____ | | | | |
| d _____ | | | | |
| e All other expenses _____ | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 18,518,207. | 18,496,034. | 22,173. | 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 | 25,510. | 1 | 777,622. |
| | 2 Savings and temporary cash investments | 12,854,843. | 2 | 11,757,109. |
| | 3 Pledges and grants receivable, net | 15,802. | 3 | 0. |
| | 4 Accounts receivable, net | 3,866. | 4 | 3,322. |
| | 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 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 | 14,111,426. | 11 | 16,519,279. |
| | 12 Investments - other securities. See Part IV, line 11 | 2,418,269. | 12 | 1,995,564. |
| | 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 33) | 29,429,716. | 16 | 31,052,896. | |
| Liabilities | 17 Accounts payable and accrued expenses | 538,154. | 17 | 40,823. |
| | 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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 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 | 6,464,487. | 25 | 6,155,082. |
| | 26 Total liabilities. Add lines 17 through 25 | 7,002,641. | 26 | 6,195,905. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 380,567. | 27 | -1,430,145. |
| | 28 Net assets with donor restrictions | 22,046,508. | 28 | 26,287,136. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 22,427,075. | 32 | 24,856,991. |
| 33 Total liabilities and net assets/fund balances | 29,429,716. | 33 | 31,052,896. | |

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 | 22,827,292. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 18,518,207. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 4,309,085. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 22,427,075. |
| 5 | Net unrealized gains (losses) on investments | 5 | -1,879,169. |
| 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 on Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 24,856,991. |

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 on 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 on 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 on Schedule O and describe any steps taken to undergo such audits _____ | | |

Form 990 (2021)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

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

Employer identification number
31-1140889

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
| | | | Yes | No | | |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| Total | | | | | | |

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|-------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 13,076,806. | 13,696,364. | 20,020,869. | 17,857,642. | 22,429,381. | 87,081,062. |
| 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 | 13,076,806. | 13,696,364. | 20,020,869. | 17,857,642. | 22,429,381. | 87,081,062. |
| 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) | | | | | | 8,076,926. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 79,004,136. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
|---|-------------|-------------|-------------|-------------|-------------|--------------------------|
| 7 Amounts from line 4 | 13,076,806. | 13,696,364. | 20,020,869. | 17,857,642. | 22,429,381. | 87,081,062. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 571,769. | 706,039. | 685,214. | 664,012. | 526,408. | 3,153,442. |
| 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 | | | | | | 90,234,504. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First 5 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 2021 (line 6, column (f), divided by line 11, column (f)) | 14 | 87.55 % |
| 15 Public support percentage from 2020 Schedule A, Part II, line 14 | 15 | 89.09 % |
| 16a 33 1/3% support test - 2021. 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 - 2020. 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 - 2021. 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 - 2020. 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 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (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) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (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 on 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 5 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 2021 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2020 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|--|-----------|---|
| 17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2020 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2021. 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 - 2020. 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 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).</i> | | |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 line 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 on lines 11b and 11c below, the governing body of a supported organization? | | |
| b A family member of a person described on line 11a above? | | |
| c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i> | | |
| 11a | | |
| 11b | | |
| 11c | | |

Section B. Type I Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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> | | |
| 1 | | |
| 2 | | |

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> | | |
| 1 | | |

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 on line 2, above, 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> | | |
| 1 | | |
| 2 | | |
| 3 | | |

Section E. Type III Functionally Integrated Supporting Organizations

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

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 (*explain in Part VI*). **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 (<i>explain in detail in Part VI</i>): | | |
| 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 0.015 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 0.035. | 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 0.85 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 | 1 |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 |
| 4 | Amounts paid to acquire exempt-use assets | 4 |
| 5 | Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) | 5 |
| 6 | Other distributions (describe in Part VI). See instructions. | 6 |
| 7 | Total annual distributions. Add lines 1 through 6. | 7 |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | 8 |
| 9 | Distributable amount for 2021 from Section C, line 6 | 9 |
| 10 | Line 8 amount divided by line 9 amount | 10 |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2021 | (iii) Distributable Amount for 2021 |
|---|---|--|---|
| 1 | Distributable amount for 2021 from Section C, line 6 | | |
| 2 | Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. | | |
| 3 | Excess distributions carryover, if any, to 2021 | | |
| a | From 2016 | | |
| b | From 2017 | | |
| c | From 2018 | | |
| d | From 2019 | | |
| e | From 2020 | | |
| f | Total of lines 3a through 3e | | |
| g | Applied to underdistributions of prior years | | |
| h | Applied to 2021 distributable amount | | |
| i | Carryover from 2016 not applied (see instructions) | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | |
| 4 | Distributions for 2021 from Section D, line 7: \$ | | |
| a | Applied to underdistributions of prior years | | |
| b | Applied to 2021 distributable amount | | |
| c | Remainder. Subtract lines 4a and 4b from line 4. | | |
| 5 | Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | |
| 6 | Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | |
| 7 | Excess distributions carryover to 2022. Add lines 3j and 4c. | | |
| 8 | Breakdown of line 7: | | |
| a | Excess from 2017 | | |
| b | Excess from 2018 | | |
| c | Excess from 2019 | | |
| d | Excess from 2020 | | |
| e | Excess from 2021 | | |

Schedule A (Form 990) 2021

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 doesn't meet the filing requirements of Schedule B (Form 990).

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|-----------------------------------|----------------------------|--|
| 1 | _____ _____ _____ | \$ 1,740,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | _____ _____ _____ | \$ 1,532,633. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | _____ _____ _____ | \$ 938,840. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 4 | _____ _____ _____ | \$ 508,750. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 5 | _____ _____ _____ | \$ 496,160. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 6 | _____ _____ _____ | \$ 3,100,166. | 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 |
|--|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|-----------------------------------|----------------------------|---|
| 7 | _____ _____ _____ | \$ 1,000,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 8 | _____ _____ _____ | \$ 947,480. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 9 | _____ _____ _____ | \$ 873,983. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

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

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|------------------------------|--|---|----------------------|
| 2 | STOCK <hr/> <hr/> <hr/> | \$ 802,633. | 12/16/21 |
| 3 | STOCK <hr/> <hr/> <hr/> | \$ 938,840. | 04/04/22 |
| 5 | STOCK <hr/> <hr/> <hr/> | \$ 496,160. | 06/30/21 |
| 6 | STOCK <hr/> <hr/> <hr/> | \$ 100,166. | 12/20/21 |
| 8 | STOCK <hr/> <hr/> <hr/> | \$ 947,480. | 03/15/22 |
| 9 | STOCK <hr/> <hr/> <hr/> | \$ 873,983. | 07/12/21 |

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

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 | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

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

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" 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 (for example, 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 7/25/06, 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 FASB 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 FASB 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 FASB ASC 958 relating to these items:

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

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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 make 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 program
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?

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?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 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 Term 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

Table with 2 columns: Yes, No. Rows: 3a(i) Unrelated organizations, 3a(ii) Related organizations, 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 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) WAYCROSS LP INVESTMENT | 1,995,564. | END-OF-YEAR MARKET VALUE |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | 1,995,564. | |

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 | 6,144,021. |
| (3) CASH OVERDRAFT | 11,061. |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | 6,155,082. |

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 FASB 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 RECORDED IN THE

ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.

Part XIII Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

**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.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|--|----------------|--|---------------------------------|---|--|--|---|
| COMMUNITY FOUNDATION OF LOUISVILLE, INC. - 325 W. MAIN STREET, SUITE 1110 - LOUISVILLE, KY 40202 | 31-0997017 | 509(A)(1) | 2,097,056. | 0. | | | T31 COMMUNITY FOUNDATIONS |
| 21ST CENTURY PARKS ENDOWMENT INC. 471 W. MAIN ST. #202 LOUISVILLE, KY 40202 | 20-8834817 | 509(A)(1) | 848,000. | 0. | | | N32 PARKS AND PLAYGROUNDS |
| EVOLVE502, INC. 334 E BROADWAY LOUISVILLE, KY 40202-0488 | 83-1877240 | 509(A)(1) | 700,500. | 0. | | | B99 EDUCATION N.E.C.* |
| ST. THERESA CHURCH 9245 RHODELIA RD PAYNEVILLE, KY 40157 | 61-0447247 | 509(A)(1) | 312,000. | 0. | | | X22 ROMAN CATHOLIC |
| UNIVERSITY OF NOTRE DAME DEPARTMENT OF DEVELOPMENT, 1100 GRACE HALL - NOTRE DAME, IN 46556-5612 | 35-0868188 | 509(A)(1) | 289,730. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| CHRIST CHURCH UNITED METHODIST 4614 BROWNSBORO ROAD LOUISVILLE, KY 40207 | 61-0449611 | RELIGIOUS ORGANIZATI | 264,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 408.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) 2021

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash 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 | 37-1642204 | 170(C)(1) | 260,400. | 0. | | | N RECREATION SPORTS LEISURE ATHLETICS |
| NATIONAL MUSEUM OF FOREST SERVICE HISTORY - PO BOX 2772 - MISSOULA, MT 59806 | 81-0454269 | 509(A)(1) | 250,000. | 0. | | | A54 HISTORY MUSEUMS |
| ST. FRANCIS IN THE FIELDS EPISCOPAL CHURCH - 6710 WOLF PEN BRANCH ROAD - HARRODS CREEK, KY 40027 | 61-0444805 | RELIGIOUS ORGANI | 239,430. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| LOUISVILLE ORCHESTRA INC. 624 W MAIN STREET STE 400 LOUISVILLE, KY 40202 | 61-6000384 | 509(A)(2) | 222,300. | 0. | | | A69 SYMPHONY ORCHESTRAS |
| CATHOLIC EDUCATION FOUNDATION 401 W. MAIN ST. #806 LOUISVILLE, KY 40202 | 61-1294640 | 509(A)(1) | 222,050. | 0. | | | B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS |
| KENTUCKY PUBLIC RADIO, INC. DBA LOUISVILLE PUBLIC MEDIA, 619 SOUTH 4TH STREET - LOUISVILLE, KY 40202 | 61-1259787 | 509(A)(1) | 218,432. | 0. | | | A34 RADIO |
| YEW DELL INC. 6220 OLD LAGRANGE ROAD CRESTWOOD, KY 40014 | 61-1390688 | 509(A)(1) | 179,700. | 0. | | | C30 NATURAL RESOURCE CONSERVATION AND PROTECTION |
| THE PARKLANDS OF FLOYD'S FORK 471 W. MAIN ST #202 LOUISVILLE, KY 40202 | 20-1780317 | 509(A)(1) | 171,100. | 0. | | | N32 PARKS AND PLAYGROUNDS |
| BOYS & GIRLS CLUBS INC. AKA BOYS & GIRLS CLUBS OF KENTUCKIANA, 3900 CRITTENDEN DRIVE - LOUISVILLE, K | 61-0568789 | 509(A)(1) | 169,000. | 0. | | | O23 BOYS AND GIRLS CLUBS (COMBINED) |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| SOUTHEAST CHRISTIAN CHURCH OF JEFFERSON COUNTY KENTUCKY INC. - 920 BLANKENBAKER PKWY - LOUISVILLE, KY 40243 | 61-0850307 | 509(A)(1) | 167,260. | 0. | | | X20 CHRISTIAN |
| CAMP PASQUANEY 19 PASQUANEY LANE HEBRON, NH 03241 | 02-0227848 | 509(A)(1) | 165,880. | 0. | | | N20 RECREATIONAL AND SPORTING CAMPS (DAY OVERNIGHT ETC.) |
| SECOND PRESBYTERIAN CHURCH 3701 OLD BROWNSBORO ROAD LOUISVILLE, KY 40207 | 61-0466721 | RELIGIOUS ORGANI | 161,050. | 0. | | | X20 CHRISTIAN |
| LOUISVILLE OLMSTED PARKS CONSERVANCY, INC. - 1299 TREVILIAN WAY - LOUISVILLE, KY 40213 | 61-1196368 | 509(A)(1) | 160,600. | 0. | | | N32 PARKS AND PLAYGROUNDS |
| COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY - 325 W. MAIN STREET, SUITE 1110 - LOUISVILLE, KY 40202 | 61-1100993 | 509(A)(1) | 152,227. | 0. | | | T31 COMMUNITY FOUNDATIONS |
| SPONSOR 4 SUCCESS INC 1219 WEST JEFFERSON STREET #205 LOUISVILLE, KY 40203 | 81-4780035 | 509(A)(1) | 151,000. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| ISAAC W. BERNHEIM FOUNDATION INC. PO BOX 130, 2499 CLERMONT RD. CLERMONT, KY 40110 | 61-0444651 | 509(A)(1) | 150,750. | 0. | | | C36 FOREST CONSERVATION |
| BELLARMINE UNIVERSITY 2001 NEWBURG ROAD LOUISVILLE, KY 40205-0671 | 61-0482955 | 509(A)(1) | 146,450. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| METRO UNITED WAY, INC. 334 E BROADWAY, PO BOX 4488 LOUISVILLE, KY 40204-0488 | 61-0444680 | 509(A)(1) | 139,628. | 0. | | | P30 CHILDREN'S AND YOUTH SERVICES |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| FUND FOR THE ARTS, INC. 623 WEST MAIN STREET LOUISVILLE, KY 40202 | 61-0479626 | 509(A)(1) | 134,550. | 0. | | | A12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| OUR LADY OF THE PILLAR 4049 S. 5TH STREET LOUISVILLE, KY 40214 | 61-1400379 | 509(A)(1) | 133,556. | 0. | | | X22 ROMAN CATHOLIC |
| THE NATURE CONSERVANCY - KENTUCKY CHAPTER - 114 WOODLAND AVE - LEXINGTON, KY 40502 | 53-0242652 | 509(A)(1) | 128,600. | 0. | | | C99 ENVIRONMENTAL QUALITY PROTECTION AND BEAUTIFICATION N.E.C.* |
| TREESLOUISVILLE PO BOX 5816 LOUISVILLE, KY 40255 | 47-3739795 | 509(A)(1) | 122,300. | 0. | | | C ENVIRONMENTAL QUALITY PROTECTION BEAUTIFICATION |
| FAYETTE COUNTY AREA FOUNDATION PO BOX 664 LA GRANGE, TX 78945 | 74-2997477 | 509(A)(2) | 117,316. | 0. | | | T PHILANTHROPY VOLUNTARISM AND GRANTMAKING |
| LOUISVILLE BALLET 315 EAST MAIN STREET LOUISVILLE, KY 40202 | 61-6033779 | 509(A)(1) | 116,100. | 0. | | | A63 BALLET |
| RELAPSING POLYCHONDROITIS AWARENESS AND SUPPORT FOUNDATION - 1202 LEXINGTON AVENUE BOX 112 - NEW YORK, NY 10028 | 46-2458916 | 509(A)(2) | 110,000. | 0. | | | G19 NONMONETARY SUPPORT N.E.C.* |
| HARBOR HOUSE OF LOUISVILLE PO BOX 58219 LOUISVILLE, KY 40268 | 61-1216323 | 509(A)(2) | 108,300. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| LEUKEMIA & LYMPHOMA SOCIETY - LOUISVILLE - SOUTHEAST (OHIO RIVER VALLEY), PO BOX 22443 - NEW YORK, NY 10087 | 13-5644916 | 509(A)(1) | 105,565. | 0. | | | G30 CANCER |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| CHRISTIAN ACADEMY OF LOUISVILLE 700 SOUTH ENGLISH STATION RD. LOUISVILLE, KY 40245 | 61-0907309 | 509(A)(1) | 101,000. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| DETROIT COUNTRY DAY SCHOOL 22305 WEST THIRTEEN MILE ROAD BEVERLY HILLS, MI 48025 | 38-1359251 | 509(A)(1) | 100,000. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| WEST END PREPARATORY SCHOOL 3628 VIRGINIA AVENUE LOUISVILLE, KY 40211 | 04-3798875 | 509(A)(1) | 96,700. | 0. | | | B24 PRIMARY/ELEMENTARY SCHOOL |
| OUR LADY OF LOURDES CHURCH 508 BRECKENRIDGE LANE LOUISVILLE, KY 40207 | 61-6002467 | RELIGIOUS ORGANI | 88,136. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ARCHDIOCESE OF LOUISVILLE CATHOLIC SERVICES APPEAL, PO BOX 32 LOUISVILLE, KY 40232 | 61-0447247 | 509(A)(1) | 86,225. | 0. | | | X22 ROMAN CATHOLIC |
| SPEED ART MUSEUM 2035 SOUTH THIRD STREET LOUISVILLE, KY 40208 | 61-0444823 | 509(A)(1) | 82,050. | 0. | | | A51 ART MUSEUMS |
| FRANCIS PARKER SCHOOL OF LOUISVILLE - DEVELOPMENT DEPARTMENT, 11000 U.S. HWY. 42 - GOSHEN, KY 40026 | 31-0896538 | 509(A)(1) | 77,050. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| SAVE THE CHILDREN FEDERATION INC. PO BOX 97132 WASHINGTON, DC 20090 | 06-0726487 | 509(A)(1) | 76,300. | 0. | | | Q30 INTERNATIONAL DEVELOPMENT RELIEF SERVICES |
| FILSON HISTORICAL SOCIETY AKA FILSON CLUB, 1310 SOUTH THIRD S LOUISVILLE, KY 40208 | 61-0444690 | 509(A)(1) | 76,045. | 0. | | | A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| PRESENTATION ACADEMY 861 S. 4TH ST. LOUISVILLE, KY 40203 | 61-0507080 | 509(A)(1) | 75,400. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| PRACTICAL SHEPHERDING PO BOX 21806 LOUISVILLE, KY 40221 | 46-1070095 | 509(A)(1) | 73,000. | 0. | | | X20 CHRISTIAN |
| FIRST PRESBYTERIAN CHURCH - ELIZABETHTOWN - 1016 PEAR ORCHARD DR. - ELIZABETHTOWN, KY 42701 | 61-0183855 | RELIGIOUS ORGANI | 70,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| VOLUNTEERS OF AMERICA MID-STATES AKA VOLUNTEERS OF AMERICA OF KENTUCKY, 570 S FOURTH ST #100 - LOUISVILLE, KY | 61-0480950 | 509(A)(1) | 70,000. | 0. | | | P26 VOLUNTEERS OF AMERICA |
| HOLY CROSS HIGH SCHOOL 5144 DIXIE HIGHWAY LOUISVILLE, KY 40216 | 61-1053991 | RELIGIOUS ORGANI | 67,840. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| SACRED HEART SCHOOLS INC. 3115 LEXINGTON RD LOUISVILLE, KY 40206 | 61-1181710 | 509(A)(1) | 66,088. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| ACTORS THEATRE OF LOUISVILLE, INC. 316 WEST MAIN STREET LOUISVILLE, KY 40202 | 61-0645030 | 509(A)(1) | 66,000. | 0. | | | A65 THEATER |
| ST. PAUL'S SCHOOL 325 PLEASANT ST. CONCORD, NH 03301-2591 | 02-0222227 | 509(A)(1) | 65,500. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| KENTUCKIANAWORKS 410 WEST CHESTNUT STREET STE 200 LOUISVILLE, KY 40202 | 46-4856936 | 509(A)(1) | 64,200. | 0. | | | S31 URBAN COMMUNITY |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| HOLY TRINITY CHURCH 501 CHERRYWOOD ROAD LOUISVILLE, KY 40207 | 61-0507073 | RELIGIOUS ORGANI | 64,050. | 0. | | | X20 CHRISTIAN |
| HIS CHURCH ANGLICAN 34500 SIX MILE RD. LIVONIA, MI 48152 | 20-4286188 | 509(A)(1) | 64,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ST. XAVIER HIGH SCHOOL 1609 POPLAR LEVEL ROAD LOUISVILLE, KY 40217 | 61-0447247 | 509(A)(1) | 62,150. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| NATIONAL CENTER FOR FAMILIES LEARNING INC. - WATERFRONT PLAZA, 325 WEST MAIN STREET, SUITE 300 - LOUISVILLE, KY 40202 | 61-1159549 | 509(A)(1) | 61,100. | 0. | | | B05 RESEARCH INSTITUTES AND/OR PUBLIC POLICY ANALYSIS |
| DARE TO CARE, INC. PO BOX 35458 LOUISVILLE, KY 40232 | 23-7345952 | 509(A)(1) | 59,520. | 0. | | | K31 FOOD BANKS FOOD PANTRIES |
| UNIVERSITY OF LOUISVILLE FOUNDATION, INC. - PO BOX 772050 - CHICAGO, IL 60677 | 23-7078461 | 509(A)(1) | 58,324. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| BASILICA OF ST. JOSEPH PROTO-CATHEDRAL - 310 WEST STEPHEN FOSTER, PO BOX 548 - BARDSTOWN, KY 40004 | 61-0485640 | RELIGIOUS ORGANI | 56,537. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| HEALING PLACE INC 1020 WEST MARKET ST. LOUISVILLE, KY 40202 | 61-1164775 | 509(A)(1) | 56,250. | 0. | | | F20 ALCOHOL DRUG AND SUBSTANCE ABUSE DEPENDENCY PREVENTION & TREATMENT |
| HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE, KY 40206 | 61-0445834 | 509(A)(1) | 56,235. | 0. | | | P30 CHILDREN'S AND YOUTH SERVICES |

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| KENTUCKY STATE TREASURER KENTUCKY FINANCE AND ADMINISTRATION CABINET, 200 MERO STREET, 5TH FLOOR - FR | 61-0600439 | 170(C)(1) | 55,600. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| HIGHLAND PRESBYTERIAN CHURCH 1011 CHEROKEE ROAD LOUISVILLE, KY 40204 | 61-0538145 | RELIGIOUS ORGANI | 54,250. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ASSUMPTION HIGH SCHOOL 2170 TYLER LANE LOUISVILLE, KY 40205 | 61-1133759 | 509(A)(1) | 54,200. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| ST. JOHN CENTER FOR THE HOMELESS 700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE, KY 40202-3614 | 61-1135907 | 509(A)(1) | 52,467. | 0. | | | L41 TEMPORARY SHELTER FOR THE HOMELESS |
| BETHLEHEM HIGH SCHOOL 309 WEST STEPHEN FOSTER AVE. BARDSTOWN, KY 40004 | 61-0592028 | 509(A)(1) | 50,600. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| TRUNACY, INC. 6010 BROWNSBORO PARK BLVD, SUITE C LOUISVILLE, KY 40207 | 84-3086582 | 509(A)(2) | 50,000. | 0. | | | A31 FILM VIDEO |
| SHEPHERDSTOWN PUBLIC LIBRARY P.O. BOX 278 SHEPHERDSTOWN, WV 25443 | 85-2360289 | 170(C)(1) | 50,000. | 0. | | | B70 LIBRARIES LIBRARY SCIENCE |
| GILDA'S CLUB 2440 GRINSTEAD DRIVE LOUISVILLE, KY 40204 | 20-1635170 | 509(A)(1) | 49,295. | 0. | | | N50 RECREATIONAL PLEASURE OR SOCIAL CLUB |
| KENTUCKY FARM BUREAU EDUCATION FOUNDATION INC - PO BOX 20700 - LOUISVILLE, KY 40250 | 61-6035765 | 509(A)(2) | 48,972. | 0. | | | K28 FARM BUREAU |

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| LOUISVILLE COLLEGIATE SCHOOL 2427 GLENMARY AVENUE LOUISVILLE, KY 40204 | 61-0449630 | 509(A)(1) | 48,800. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| GIRL SCOUTS OF KENTUCKIANA 2115 LEXINGTON RD LOUISVILLE, KY 40206 | 61-0444698 | 509(A)(1) | 47,500. | 0. | | | O42 GIRL SCOUTS |
| HABITAT FOR HUMANITY OF METRO LOUISVILLE, INC. - 1620 BANK STREET - LOUISVILLE, KY 40203 | 58-1735528 | 509(A)(1) | 45,600. | 0. | | | X20 CHRISTIAN |
| VANGUARD CHARITABLE P.O. BOX 9509 WARWICK, RI 02889 | 23-2888152 | 509(A)(1) | 45,000. | 0. | | | T99 OTHER PHILANTHROPY VOLUNTARISM AND GRANTMAKING FOUNDATIONS N.E.C.* |
| ST. JOSEPH CHILDREN'S HOME 2823 FRANKFORT AVENUE LOUISVILLE, KY 40206 | 61-0475286 | 509(A)(1) | 44,950. | 0. | | | P73 GROUP HOME (LONG-TERM PRIMARILY ASSISTED LIVING) |
| WATER WITH BLESSINGS 1902 CAMPUS PLACE, STE 11 LOUISVILLE, KY 40299 | 37-1639872 | 509(A)(1) | 44,540. | 0. | | | M99 OTHER PUBLIC SAFETY DISASTER PREPAREDNESS AND RELIEF N.E.C.* |
| CABBAGE PATCH SETTLEMENT HOUSE INC. - 1413 SOUTH SIXTH STREET - LOUISVILLE, KY 40208 | 61-0458359 | 509(A)(1) | 44,500. | 0. | | | P28 NEIGHBORHOOD CENTER SETTLEMENT HOUSE |
| NATIONAL CHRISTIAN FOUNDATION KENTUCKY - PO BOX 175 - LEXINGTON, KY 40588 | 61-1404015 | 509(A)(1) | 44,000. | 0. | | | T11 SINGLE ORGANIZATION SUPPORT |
| COMMUNITY FOUNDATION OF WEST KENTUCKY - 333 BROADWAY SUITE 530 - PADUCAH, KY 42001 | 61-1304905 | 509(A)(1) | 43,550. | 0. | | | T30 PUBLIC FOUNDATIONS |

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| ST. ANDREW'S EPISCOPAL CHURCH 2233 WOODBOURNE AVE. LOUISVILLE, KY 40205 | 61-0444798 | RELIGIOUS ORGANI | 43,298. | 0. | | | X20 CHRISTIAN |
| FAMILY SCHOLAR HOUSE, INC. 403 REG SMITH CIRCLE LOUISVILLE, KY 40208-2746 | 61-1285124 | 509(A)(1) | 42,600. | 0. | | | P42 SINGLE PARENT AGENCIES/SERVICES |
| TEACH KENTUCKY 907 BARRET AVE LOUISVILLE, KY 40204 | 20-4009920 | 509(A)(1) | 42,350. | 0. | | | B03 PROFESSIONAL SOCIETIES & ASSOCIATIONS |
| WESTPORT ROAD CHURCH OF CHRIST 4500 WESTPORT ROAD LOUISVILLE, KY 40207 | 61-0661484 | RELIGIOUS ORGANI | 41,775. | 0. | | | X20 CHRISTIAN |
| SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607 | 58-1437002 | 509(A)(1) | 41,400. | 0. | | | X20 CHRISTIAN |
| WATERFRONT BOTANICAL GARDENS PO BOX 5056 LOUISVILLE, KY 40255 | 61-1297238 | 509(A)(1) | 40,140. | 0. | | | C40 BOTANICAL HORTICULTURAL AND LANDSCAPE SERVICES |
| ST. VINCENT DE PAUL SOCIETY COUNCIL OF LOUISVILLE - ATTN: ACCOUNTING DEPT., P.O. BOX 17126 - LOUISVILLE, KY 40217-0126 | 61-0727110 | 509(A)(1) | 39,500. | 0. | | | P85 HOMELESS SERVICES/CENTERS |
| HIGHVIEW BAPTIST CHURCH 7711 FEGENBUSH LANE LOUISVILLE, KY 40228 | 61-0601713 | RELIGIOUS ORGANI | 39,100. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| BELLEVUE BAPTIST CHURCH 4950 KY-56 OWENSBORO, KY 42301 | 61-0598848 | RELIGIOUS ORGANI | 39,000. | 0. | | | X20 CHRISTIAN |

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| CHRISTOPHER 2X GAME CHANGERS 1800 W. MUHAMMAD ALI BLVD, STE. 2D2 LOUISVILLE, KY 40203-1560 | 83-0655030 | 509(A)(1) | 38,200. | 0. | | | P62 VICTIMS' SERVICES |
| JUNIOR ACHIEVEMENT OF KENTUCKIANA 1401 W. MUHAMMAD ALI BLVD. LOUISVILLE, KY 40203 | 61-0476694 | 509(A)(1) | 36,500. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| WAYSIDE CHRISTIAN MISSION PO BOX 7249 LOUISVILLE, KY 40257 | 61-0667139 | 509(A)(1) | 36,050. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| FOOD FOR THE POOR INC. 6401 LYONS ROAD COCONUT CREEK, FL 33073 | 59-2174510 | 509(A)(1) | 35,918. | 0. | | | Q33 INTERNATIONAL RELIEF |
| ACADEMY FOR INDIVIDUAL EXCELLENCE 3101 BLUEBIRD LANE LOUISVILLE, KY 40299 | 81-4505964 | 509(A)(1) | 35,000. | 0. | | | B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS |
| SHOWING UP FOR RACIAL JUSTICE EDUCATION FUND, INC - PO BOX 1053 - BUFFALO, NY 14205 | 82-2309274 | 509(A)(1) | 35,000. | 0. | | | R99 CIVIL RIGHTS SOCIAL ACTION & ADVOCACY N.E.C.* |
| INTERNATIONAL RESCUE COMMITTEE INC. - PO BOX 6068 - ALBERT LEA, MN 56007 | 13-5660870 | 509(A)(1) | 34,900. | 0. | | | Q33 INTERNATIONAL RELIEF |
| HAND IN HAND MINISTRIES 518 N. 26TH STREET LOUISVILLE, KY 40212 | 61-1352889 | 509(A)(1) | 33,950. | 0. | | | P99 HUMAN SERVICES-MULTIPURPOSE & OTHER N.E.C.* |
| COALITION FOR THE HOMELESS 1300 S 4TH ST. #250 LOUISVILLE, KY 40208 | 61-1118307 | 509(A)(2) | 33,250. | 0. | | | L01 ALLIANCE/ADVOCACY ORGANIZATIONS |

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| LOUISVILLE STORY PROGRAM 851 S. 4TH ST. LOUISVILLE, KY 40203 | 47-5237414 | 509(A)(1) | 32,875. | 0. | | | A33 PRINTING PUBLISHING |
| KENTUCKY SHAKESPEARE INC 616 MYRTLE STREET LOUISVILLE, KY 40208 | 61-6036654 | 509(A)(1) | 31,100. | 0. | | | A65 THEATER |
| EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY, AL 36104 | 63-1135091 | 509(A)(1) | 31,000. | 0. | | | I83 PUBLIC INTEREST LAW/LITIGATION |
| ST. MARY OF THE KNOBS 5719 SAINT MARYS ROAD FLOYDS KNOBS, IN 47119 | 35-6033616 | RELIGIOUS ORGANI | 30,600. | 0. | | | X20 CHRISTIAN |
| UNIVERSITY OF KENTUCKY UK PHILANTHROPY, PO BOX 23552 LEXINGTON, KY 40523 | 61-6001218 | 170(C)(1) | 30,150. | 0. | | | B40 HIGHER ED INSTITUTIONS |
| MARYKNOLL FATHERS & BROTHERS P.O. BOX 302 MARYKNOLL, NY 10545-0304 | 13-1740144 | 509(A)(1) | 30,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| FAYETTE COUNTY HABITAT FOR HUMANITY - PO BOX 1127 - LA GRANGE, TX 78945 | 20-0729517 | 509(A)(1) | 30,000. | 0. | | | L20 HOUSING DEVELOPMENT CONSTRUCTION MANAGEMENT |
| LEAGUE OF WOMEN VOTERS EDUCATION FUND - PO BOX 11036 - LEWISTON, ME 04243-9405 | 53-0239013 | 509(A)(1) | 30,000. | 0. | | | R40 VOTER EDUCATION/ REGISTRATION |
| LIVING WATERS FOR THE WORLD 5016 SPEDALE CT. #399 SPRING HILL, TN 37174 | 82-2041626 | 509(A)(1) | 30,000. | 0. | | | Q33 INTERNATIONAL RELIEF |

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| MARK HINKEL PEDALING FORWARD 2212 ABBEYWOOD RD LEXINGTON, KY 40515 | 82-2972116 | 509(A)(1) | 30,000. | 0. | | | W99 PUBLIC SOCIETY BENEFIT-MULTIPURPOSE & OTHER N.E.C.* |
| WARD HALL PRESERVATION FOUNDATION INC - P.O. BOX 1957 - GEORGETOWN, KY 40324 | 84-1669127 | 509(A)(1) | 30,000. | 0. | | | A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES |
| TRINITY UNITED METHODIST CHURCH 26 W. 3RD MAYSVILLE, KY 41056 | 61-0534628 | RELIGIOUS ORGANI | 29,900. | 0. | | | X20 CHRISTIAN |
| SPALDING UNIVERSITY OFFICE OF ADVANCEMENT & PHILANTHROPY, 845 S. THIRD ST. - LOUISVILLE, KY 4020 | 61-0444780 | 509(A)(1) | 29,200. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| LITTLE SISTERS OF THE POOR HOME FOR THE AGED OF LOUISVILLE, 15 AUDUBON PLAZA DRIVE - LOUISVILLE, KY 402 | 61-0487466 | 509(A)(1) | 29,050. | 0. | | | X22 ROMAN CATHOLIC |
| DOCTORS WITHOUT BORDERS PO BOX 5030 HAGERSTOWN, MD 21741 | 13-3433452 | 509(A)(1) | 28,420. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| CATHEDRAL OF THE ASSUMPTION 433 SOUTH FIFTH STREET LOUISVILLE, KY 40202 | 61-0448554 | RELIGIOUS ORGANI | 28,300. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| CHILDREN'S HOSPITAL FOUNDATION - LOUISVILLE - DEPT. 86140, P.O. BOX 950183 - LOUISVILLE, KY 40295-0183 | 61-6027530 | 509(A)(1) | 28,050. | 0. | | | E11 SINGLE ORGANIZATION SUPPORT |
| RIGHT TO LIFE EDUCATIONAL FOUNDATION OF KENTUCKY - 161 ST. MATTHEWS AVE., STE. 2 - LOUISVILLE, KY 40207-3145 | 31-0955315 | 509(A)(1) | 27,800. | 0. | | | R62 RIGHT TO LIFE |

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| MUSIC MAKER RELIEF FOUNDATION INC. PO BOX 1358 HILLSBOROUGH, NC 27278 | 13-3782018 | 509(A)(1) | 27,600. | 0. | | | A68 MUSIC |
| CHURCH OF THE HOLY SPIRIT 3345 LEXINGTON ROAD LOUISVILLE, KY 40206 | 61-0700575 | 509(A)(1) | 27,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| WELLSPRING INC. P.O. BOX 1927 LOUISVILLE, KY 40201 | 31-1020023 | 509(A)(2) | 27,368. | 0. | | | F33 GROUP HOME RESIDENTIAL TREATMENT FACILITY-MENTAL HEALTH RELATED |
| KENTUCKY SCIENCE CENTER 727 WEST MAIN STREET LOUISVILLE, KY 40202 | 31-1005850 | 509(A)(1) | 27,050. | 0. | | | A57 SCIENCE & TECHNOLOGY MUSEUM |
| ADELANTE HISPANIC ACHIEVERS INC. DOUGLASS BLVD CHRISTIAN CHURCH, 2005 DOUGLASS BLVD. - LOUISVILLE, KY 40205 | 20-2267012 | 509(A)(1) | 27,000. | 0. | | | O50 YOUTH DEVELOPMENT PROGRAMS |
| CRESTWOOD UNITED METHODIST CHURCH 7214 KAVANAUGH RD CRESTWOOD, KY 40014 | 61-0525162 | RELIGIOUS ORGANI | 27,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| JEWISH COMMUNITY OF LOUISVILLE, INC. - D/B/A JEWISH FEDERATION OF LOUISVILLE, 3600 DUTCHMANS LANE - LOUISVILLE, KY 40205 | 61-0444765 | 509(A)(1) | 26,894. | 0. | | | T70 FUNDRAISING ORGANIZATIONS THAT CROSS CATEGORIES (INCLUDES COMMUNITY FUNDS) |
| AMERICAN RED CROSS - LOUISVILLE AREA CHAPTER - 510 EAST CHESTNUT STREET - LOUISVILLE, KY 40202 | 53-0196605 | 509(A)(1) | 26,550. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| TRINITY ONE THEATRE TROUPE INC PO BOX 881846 SAN DIEGO, CA 92168 | 46-1465106 | 509(A)(2) | 26,500. | 0. | | | A ARTS CULTURE AND HUMANITIES |

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| THE SALVATION ARMY - LOUISVILLE AREA COMMAND - 911 S. BROOK ST - LOUISVILLE, KY 40203 | 58-0660607 | 509(A)(1) | 26,400. | 0. | | | P24 SALVATION ARMY |
| COMMUNITY CATHOLIC CENTER INC. PO BOX 11065 LOUISVILLE, KY 40251 | 01-0785892 | 509(A)(1) | 26,250. | 0. | | | B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS |
| HEARTLAND CHURCH INC. 14900 EAST 126TH STREET FISHERS, IN 46037 | 35-2108005 | 509(A)(1) | 26,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| DOUGLASS BOULEVARD CHRISTIAN CHURCH - 2005 DOUGLASS BOULEVARD - LOUISVILLE, KY 40205 | 61-0449616 | 509(A)(1) | 25,800. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| DOCTORS WITHOUT BORDERS USA INC. 40 RECTOR ST., 16TH FLOOR NEW YORK, NY 10006 | 13-3433452 | 509(A)(1) | 25,550. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| RIP MEDICAL DEBT 28-07 JACKSON AVE, 5TH FL LONG ISLAND CITY, NY 11101 | 47-1442997 | 509(A)(1) | 25,250. | 0. | | | P50 PERSONAL SOCIAL SERVICES |
| FLOYD'S FORK CONSERVANCY 1357 BARDSTOWN ROAD LOUISVILLE, KY 40204 | 47-1938011 | 509(A)(1) | 25,000. | 0. | | | C32 WATER RESOURCE WETLANDS CONSERVATION & MANAGEMENT |
| JOBS FOR AMERICA'S GRADUATES, INC. 1729 KING ST SUITE 100 ALEXANDRIA, VA 22314 | 52-1194546 | 509(A)(1) | 25,000. | 0. | | | B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER |
| LEXINGTON PHILHARMONIC SOCIETY 161 N. MILL ST. LEXINGTON, KY 40507 | 61-6033529 | 509(A)(1) | 25,000. | 0. | | | A69 SYMPHONY ORCHESTRAS |

Schedule I (Form 990)

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| TRINITY PRESBYTERIAN CHURCH OF SOUTHLAKE - 1452 W SOUTHLAKE BLVD - SOUTHLAKE, TX 76092 | 75-2811005 | 509(A)(1) | 25,000. | 0. | | | X21 PROTESTANT |
| ST. AGNES CHURCH 1920 NEWBURG ROAD LOUISVILLE, KY 40205-1400 | 61-0447247 | 509(A)(1) | 24,900. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| TRINITY HIGH SCHOOL FOUNDATION INC. - 4011 SHELBYVILLE RD. - LOUISVILLE, KY 40207 | 31-1105966 | 509(A)(1) | 24,400. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| SISTER VISITOR CENTER 2235 W MARKET ST LOUISVILLE, KY 40212 | 61-1239600 | 509(A)(1) | 24,300. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| CENTRAL PRESBYTERIAN CHURCH 318 WEST KENTUCKY STREET LOUISVILLE, KY 40203 | 61-0459493 | 509(A)(1) | 24,089. | 0. | | | X21 PROTESTANT |
| ST. LAWRENCE CATHOLIC CHURCH 1925 LEWISTON DRIVE LOUISVILLE, KY 40216 | 61-0447247 | RELIGIOUS ORGANI | 24,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| CROSSLAND COMMUNITY CHURCH INC 600 31-W BYPASS SUITE 18D BOWLING GREEN, KY 42103 | 20-0157252 | 509(A)(1) | 23,868. | 0. | | | X20 CHRISTIAN |
| FATHER MALONEY'S BOYS' HAVEN INC. AKA BOYS AND GIRLS HAVEN, 2301 GOLDSMITH LANE - LOUISVILLE, KY 40218 | 61-0479621 | 509(A)(1) | 23,863. | 0. | | | P70 RESIDENTIAL CUSTODIAL CARE (GROUP HOME) |
| KMAC MUSEUM 715 WEST MAIN STREET LOUISVILLE, KY 40202 | 61-0985312 | 509(A)(1) | 23,175. | 0. | | | A40 VISUAL ARTS ORGANIZATIONS |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| MARYHURST INC. 1015 DORSEY LANE LOUISVILLE, KY 40223 | 31-1542209 | 509(A)(1) | 23,050. | 0. | | | P31 ADOPTION |
| SHAKER VILLAGE OF PLEASANT HILL 3501 LEXINGTON ROAD HARRODSBURG, KY 40330-8846 | 61-0592561 | 509(A)(2) | 22,500. | 0. | | | A54 HISTORY MUSEUMS |
| ST. WILLIAM CHURCH 1226 W. OAK STREET LOUISVILLE, KY 40210 | 61-0447247 | RELIGIOUS ORGANI | 21,733. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105 | 62-0646012 | 509(A)(1) | 21,400. | 0. | | | G98 PEDIATRICS |
| DOWNTOWN DEVELOPMENT CORPORATION 315 GUTHRIE ST., SUITE 300 LOUISVILLE, KY 40202 | 31-0992627 | 509(A)(1) | 21,070. | 0. | | | S31 URBAN COMMUNITY |
| YMCA OF GREATER LOUISVILLE ATTN: DEVELOPMENT, 545 SOUTH 2ND ST LOUISVILLE, KY 40202 | 61-0444843 | 509(A)(2) | 20,750. | 0. | | | P27 YMCA YWCA YWHA YMHA |
| DYNAMIC CATHOLIC INSTITUTE 5081 OLYMPIC BLVD. ERLANGER, KY 41018 | 26-4549213 | 509(A)(1) | 20,500. | 0. | | | X22 ROMAN CATHOLIC |
| CATHOLIC CHARITIES OF LOUISVILLE INC. - 2911 S. FOURTH STREET - LOUISVILLE, KY 40208 | 61-1239600 | 509(A)(1) | 20,500. | 0. | | | P99 HUMAN SERVICES-MULTIPURPOSE & OTHER N.E.C.* |
| NATIVITY ACADEMY AT ST. BONIFACE 529 E. LIBERTY STREET LOUISVILLE, KY 40202 | 51-0450314 | 509(A)(1) | 20,400. | 0. | | | B24 PRIMARY/ELEMENTARY SCHOOL |

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| PRODIGAL MINISTRIES PO BOX 1484 CRESTWOOD, KY 40014 | 61-1275040 | 509(A)(1) | 20,400. | 0. | | | P50 PERSONAL SOCIAL SERVICES |
| ALL PEOPLES A UNITARIAN UNIVERSALIST CONGREGATION - 4936 BROWNSBORO ROAD - LOUISVILLE, KY 40222 | 61-0593460 | RELIGIOUS ORGANI | 20,350. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| 350.ORG PO BOX 843004 BOSTON, MA 02284-3004 | 26-1150699 | 509(A)(1) | 20,250. | 0. | | | C01 ALLIANCE/ADVOCACY ORGANIZATIONS |
| GARDENIA E. JANSSEN ANIMAL SHELTER 240 SVOBODA LANE LA GRANGE, TX 78945 | 74-2726459 | 509(A)(1) | 20,150. | 0. | | | D ANIMAL RELATED |
| GLYNWOOD CENTER, INC PO BOX 157, 362 GLYNWOOD RD COLD SPRING, NY 10516 | 13-3852957 | 509(A)(1) | 20,000. | 0. | | | W70 LEADERSHIP DEVELOPMENT |
| HAVE A HEART FOUNDATION INC 310 EAST BROADWAY, SUITE 100 LOUISVILLE, KY 40202 | 26-1433114 | 509(A)(1) | 20,000. | 0. | | | E99 HEALTH-GENERAL & REHABILITATIVE N.E.C.* |
| CHURCH OF THE ETERNAL HILLS PO BOX 300 TABERNASH, CO 80478 | 51-0211480 | 509(A)(1) | 20,000. | 0. | | | X20 CHRISTIAN |
| CROSS CATHOLIC OUTREACH 2700 N. MILITARY TRAIL SUITE 240, PO BOX 273908 - BOCA RATON, FL 33427-3908 | 65-1156061 | 509(A)(1) | 20,000. | 0. | | | P12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| JAMES DICK FOUNDATION FOR THE PERFORMING ARTS - PO BOX 89 - ROUND TOP, TX 78954 | 74-1732353 | 509(A)(1) | 20,000. | 0. | | | A ARTS CULTURE AND HUMANITIES |

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

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| AREA MINISTRIES FOR EMERGENCY NEEDS - PO BOX 571 - LA GRANGE, TX 78945 | 74-2626889 | 509(A)(1) | 20,000. | 0. | | | P60 EMERGENCY ASSISTANCE (FOOD CLOTHING CASH) |
| AMERICAN CIVIL LIBERTIES UNION OF KENTUCKY FOUNDATION, INC. - 325 W MAIN ST SUITE 2210 - LOUISVILLE, KY 40202 | 61-6058569 | 509(A)(2) | 19,950. | 0. | | | R60 CIVIL LIBERTIES ADVOCACY |
| LIFEHOUSE INC. 2710 REIDLING RD LOUISVILLE, KY 40206 | 20-8514733 | 509(A)(1) | 19,500. | 0. | | | P31 ADOPTION |
| AMERICAN RED CROSS - WESTERN KENTUCKY CHAPTER - 1700 FREDERICA ST., SUITE 105 - OWENSBORO, KY 42301 | 53-0196605 | 509(A)(1) | 19,500. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| BLUE RIDGE SCHOOL 273 MAYO DRIVE ST. GEORGE, VA 22935 | 54-0505868 | 509(A)(1) | 19,500. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| ST. BERNADETTE CHURCH 6500 SAINT BERNADETTE AVE. PROSPECT, KY 40059-6543 | 61-0447247 | RELIGIOUS ORGANI | 19,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| KOSAIR CHARITIES COMMITTEE, INC. PO 950136 LOUISVILLE, KY 40295-0136 | 61-0514703 | 509(A)(1) | 19,050. | 0. | | | E12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| CATHOLIC RELIEF SERVICES P.O. BOX 17090 BALTIMORE, MD 21297-0303 | 13-5563422 | 509(A)(1) | 18,850. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| CHURCH WORLD SERVICE 28606 PHILLIPS ST, PO BOX 968 ELKHART, IN 46514 | 13-4080201 | 509(A)(1) | 18,500. | 0. | | | Q33 INTERNATIONAL RELIEF |

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| PLANNED PARENTHOOD OF INDIANA AND KENTUCKY - ATTN: DEVELOPMENT, PO BOX 397 - INDIANAPOLIS, IN 46206 | 13-1644147 | 509(A)(1) | 17,600. | 0. | | | E40 REPRODUCTIVE HEALTH CARE FACILITIES AND ALLIED SERVICES |
| ST. BERNARD CATHOLIC CHURCH 7500 TANGELO DRIVE LOUISVILLE, KY 40228 | 61-0644954 | RELIGIOUS ORGANI | 17,542. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| YOUTH WITH A MISSION LOUISVILLE INC. - PO BOX 22185 - LOUISVILLE, KY 40252 | 27-0604489 | 509(A)(1) | 17,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION - 301 YORK STREET - LOUISVILLE, KY 40203 | 61-0969361 | 509(A)(1) | 17,100. | 0. | | | B70 LIBRARIES LIBRARY SCIENCE |
| TURTLE WING FOUNDATION 1203 S KESSLER AVE SCHULENBURG, TX 78956 | 45-3822942 | 509(A)(1) | 17,000. | 0. | | | O11 SINGLE ORGANIZATION SUPPORT |
| LOVE THY NEIGHBORHOOD 1143 SOUTH 3RD STREET, STE B LOUISVILLE, KY 40203 | 46-4428574 | 509(A)(1) | 17,000. | 0. | | | X21 PROTESTANT |
| MISSISSIPPI STATE UNIVERSITY FOUNDATION INC. - P.O. BOX 6149 - MISSISSIPPI STATE, MS 39762 | 64-0410581 | 509(A)(1) | 17,000. | 0. | | | P11 SINGLE ORGANIZATION SUPPORT |
| HOSPICE BRAZOS VALLEY INC. 502 W. 26TH STREET BRYAN, TX 77803 | 74-2229794 | 509(A)(2) | 17,000. | 0. | | | P HUMAN SERVICES |
| ST. JAMES EPISCOPAL CHURCH PO BOX 507 LA GRANGE, TX 78945 | 74-6195723 | 509(A)(1) | 17,000. | 0. | | | X21 PROTESTANT |

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--------------------------------------|
| SIMMONS COLLEGE OF KENTUCKY OFFICE OF DEVELOPMENT, 1000 S 4TH S LOUISVILLE, KY 40203 | 20-5289168 | 509(A)(1) | 16,800. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| ACADEMY OF OUR LADY OF MERCY DBA MERCY ACADEMY, 5801 FEGENBUSH L LOUISVILLE, KY 40228 | 61-1116388 | 509(A)(1) | 16,350. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| WHAS CRUSADE FOR CHILDREN INC. 520 W. CHESTNUT ST. LOUISVILLE, KY 40202 | 23-7075524 | 509(A)(1) | 16,250. | 0. | | | P30 CHILDREN'S AND YOUTH SERVICES |
| RIVER FIELDS, INC. 1201 STORY AVENUE SUITE 215 LOUISVILLE, KY 40206 | 61-6032501 | 509(A)(1) | 16,140. | 0. | | | C34 LAND RESOURCES CONSERVATION |
| ST. ALBERT THE GREAT CHURCH 1395 GIRARD DR. LOUISVILLE, KY 40222 | 61-0568020 | RELIGIOUS ORGANI | 16,125. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| CHARLESTON LIBRARY SOCIETY 164 KING ST. CHARLESTON, SC 29401 | 57-0314372 | 509(A)(1) | 16,100. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| KENTUCKY NATURAL LANDS TRUST INC. 433 CHESTNUT ST. BEREA, KY 40403 | 61-1276913 | 509(A)(1) | 16,100. | 0. | | | C36 FOREST CONSERVATION |
| SMITH COLLEGE SMITH COLLEGE GIFT ACCOUNTING, STODDARD ANNEX, 23 ELM STREET - NORTHAMPTON, | 04-1843040 | 509(A)(1) | 16,000. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| REDEEMER'S GRACE CHURCH PO BOX 1161 JEFFERSONVILLE, IN 47131 | 26-4430099 | RELIGIOUS ORGANI | 15,900. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| AMERICANA COMMUNITY CENTER 4801 SOUTHSIDE DR. LOUISVILLE, KY 40214-2111 | 61-1251306 | 509(A)(1) | 15,900. | 0. | | | P84 ETHNIC/IMMIGRANT SERVICES |
| ST. FRANCIS DESALES HIGH SCHOOL 425 W KENWOOD DR LOUISVILLE, KY 40214-2843 | 26-0689151 | RELIGIOUS ORGANI | 15,750. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| RONALD MCDONALD HOUSE CHARITIES OF KENTUCKIANA, INC. - 550 SOUTH FIRST STREET - LOUISVILLE, KY 40202 | 31-1053467 | 509(A)(1) | 15,400. | 0. | | | L99 OTHER HOUSING SHELTER N.E.C.* |
| ST. MARGARET MARY CATHOLIC COMMUNITY - 7813 SHELBYVILLE ROAD - LOUISVILLE, KY 40222 | 61-0447247 | 509(A)(1) | 15,300. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| KIPP METRO ATLANTA COLLABORATIVE 1445 MAYNARD RD NW ATLANTA, GA 30331 | 11-3723114 | 509(A)(1) | 15,150. | 0. | | | B12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| CHAMBER MUSIC SOCIETY OF LINCOLN CENTER, INC. - 70 LINCOLN CENTER PLAZA, 10TH FLOOR - NEW YORK, NY 10023 | 13-2628036 | 509(A)(1) | 15,000. | 0. | | | A60 PERFORMING ARTS |
| OUR LADY OF TEPEYAC HIGH SCHOOL 2228 SOUTH WHIPPLE ST. CHICAGO, IL 60623 | 36-2170826 | 509(A)(1) | 15,000. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| JOHNS HOPKINS UNIVERSITY SCHOOL OF ADVANCED INTERNATIONAL STUDIES - OFFICE OF DEVELOPMENT AND ALUMNI RELATIONS, 1740 MASSACHUSETTS | 52-0595110 | 509(A)(1) | 15,000. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| ALZHEIMER'S DISEASE RESEARCH FOUNDATION - DBA CURE ALZHEIMER'S FUND, 34 WASHINGTON ST. SUITE 310 - WELLESLEY HILLS, MA 02481 | 52-2396428 | 509(A)(1) | 15,000. | 0. | | | H83 ALZHEIMER'S |

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| ST. JOHN THE APOSTLE CHURCH 515 BROADWAY BRANDENBURG, KY 40108 | 61-0582893 | RELIGIOUS ORGANI | 15,000. | 0. | | | X22 ROMAN CATHOLIC |
| SOUTHERN POVERTY LAW CENTER, INC. 400 WASHINGTON AVENUE MONTGOMERY, AL 36104 | 63-0598743 | 509(A)(1) | 15,000. | 0. | | | R30 INTERGROUP/RACE RELATIONS |
| EPISCOPAL RELIEF & DEVELOPMENT 815 2ND AVE 2ND FLOOR NEW YORK, NY 10017 | 73-1635264 | 509(A)(1) | 15,000. | 0. | | | X20 CHRISTIAN |
| TEXAS CZECH HERITAGE AND CULTURAL CENTER - PO BOX 6 - LA GRANGE, TX 78945 | 74-2832358 | 509(A)(1) | 15,000. | 0. | | | A23 CULTURAL/ETHNIC AWARENESS |
| CITY OF LA GRANGE 155 E. COLORADO ST. LA GRANGE, TX 78945 | 74-6001543 | 170(C)(1) | 15,000. | 0. | | | S COMMUNITY IMPROVEMENT CAPACITY BUILDING |
| TEJAS HEALTH CARE 753 E. TRAVIS STREET LA GRANGE, TX 78945 | 75-3260266 | 509(A)(1) | 15,000. | 0. | | | E30 HEALTH TREATMENT FACILITIES (PRIMARYLY OUTPATIENT) |
| SHARA'S HOPE, INC. 4949 OLD BROWNSBORO RD, STE 249, LOUISVILLE, KY 40222 | 82-3536868 | 509(A)(1) | 15,000. | 0. | | | P80 SERVICES TO PROMOTE THE INDEPENDENCE OF SPECIFIC POPULATIONS |
| KENTUCKY CIVIC ENGAGEMENT TABLE INC - 2508 PORTLAND AVE., STE. 14 - LOUISVILLE, KY 40212 | 83-2413836 | 509(A)(1) | 15,000. | 0. | | | S21 COMMUNITY COALITIONS |
| CHEYENNE MOUNTAIN ZOOLOGICAL SOCIETY - AKA CHEYENNE MOUNTAIN ZOO, 4250 CHEYENNE MOUNTAIN ZOO ROAD - COLORADO SPRINGS, CO 80906 | 84-0407039 | 509(A)(2) | 15,000. | 0. | | | D50 ZOO ZOOLOGICAL SOCIETY |

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| STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION - 2361 HYLAN BLVD, , - STATEN ISLAND, NY 10306 | 02-0554654 | 509(A)(1) | 14,956. | 0. | | | B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS |
| COMMONWEALTH FUND FOR KET, INC. 600 COOPER DR LEXINGTON, KY 40502 | 61-1285473 | 509(A)(1) | 14,875. | 0. | | | B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER |
| CHAPEL HILL UNITED CHURCH OF CHRIST - 2307 EMBASSY LANE - LOUISVILLE, KY 40216 | 61-0602255 | RELIGIOUS ORGANI | 13,800. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| EARTHJUSTICE 50 CALIFORNIA ST. #500 SAN FRANCISCO, CA 94111 | 94-1730465 | 509(A)(2) | 13,243. | 0. | | | C99 ENVIRONMENTAL QUALITY PROTECTION AND BEAUTIFICATION N.E.C.* |
| UNITED WAY OF SOUTHERN KENTUCKY, INC. - P. O. BOX 3330 - BOWLING GREEN, KY 42102 | 61-0590564 | 509(A)(1) | 13,150. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| SIERRA CLUB FOUNDATION 2101 WEBSTER STREET SUITE 1250 OAKLAND, CA 94612 | 94-6069890 | 509(A)(1) | 13,143. | 0. | | | C99 ENVIRONMENTAL QUALITY PROTECTION AND BEAUTIFICATION N.E.C.* |
| A CURE FOR ROBERT INC 508 TIFFANY LN LOUISVILLE, KY 40207 | 85-1792143 | 509(A)(1) | 13,000. | 0. | | | E12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| LEGAL AID SOCIETY INC. 416 W. MUHAMMAD ALI BLVD. #300 LOUISVILLE, KY 40202 | 61-0537626 | 509(A)(1) | 12,900. | 0. | | | I83 PUBLIC INTEREST LAW/LITIGATION |
| BROADWAY BAPTIST CHURCH 4000 BROWNSBORO ROAD LOUISVILLE, KY 40207 | 61-6001947 | RELIGIOUS ORGANI | 12,625. | 0. | | | X20 CHRISTIAN |

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| OWSLEY BROWN FRAZIER HISTORICAL ARMS MUSEUM FOUNDATION INC. - DBA THE FRAZIER HISTORY MUSEUM, 829 W. MAIN ST. - LOUISVILLE, KY 40202 | 61-1378343 | 509(A)(1) | 12,500. | 0. | | | A54 HISTORY MUSEUMS |
| ROBERT E. LEE MEMORIAL ASSOCIATION INC. - AKA STRATFORD HALL, 483 GREAT HOUSE ROAD - STRATFORD, VA 22558 | 54-0536105 | 509(A)(1) | 12,250. | 0. | | | A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES |
| BEARGRASS CHRISTIAN CHURCH 4100 SHELBYVILLE ROAD LOUISVILLE, KY 40207 | 61-1219287 | 509(A)(1) | 12,100. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ST. PATRICK ST. ANTHONY PARISH 920 FULTON STREET GRAND HAVEN, MI 49417 | 38-1575680 | RELIGIOUS ORGANI | 12,000. | 0. | | | X20 CHRISTIAN |
| GUTHRIE OPPORTUNITY CENTER FOUNDATION INC. - 900 NUTTER DRIVE - BARDSTOWN, KY 40004 | 45-2999517 | 509(A)(1) | 12,000. | 0. | | | P11 SINGLE ORGANIZATION SUPPORT |
| ACADEMY OF MUSIC PRODUCTION EDUCATION AND DEVELOPMENT - 1219 W. JEFFERSON ST., SUITE 206 - LOUISVILLE, KY 40203 | 47-1113120 | 509(A)(1) | 12,000. | 0. | | | A68 MUSIC |
| FIRST UNITED METHODIST CHURCH 212 3RD STREET N. ST. PETERSBURG, FL 33701 | 59-0637842 | 509(A)(1) | 12,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY - 9901 DONNA KLEIN BOULEVARD - BOCA RATON, FL 33428-1788 | 59-1945109 | 509(A)(1) | 12,000. | 0. | | | P12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| GLENVILLE BAPTIST CHURCH 10517 HWY 81 UTICA, KY 42376 | 61-0549873 | 509(A)(1) | 12,000. | 0. | | | X21 PROTESTANT |

Schedule I (Form 990)

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| BARDSTOWN UNITED METHODIST CHURCH 116 E. FLAGET BARDSTOWN, KY 40004 | 61-0646117 | RELIGIOUS ORGANI | 12,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| APPALACHIAN RESEARCH & DEFENSE FUND OF KY - 120 N. FRONT STREET - PRESTONSBURG, KY 41653 | 61-0848948 | 509(A)(1) | 12,000. | 0. | | | I80 LEGAL SERVICES |
| BASTROP COUNTY WOMEN'S SHELTER DBA FAMILY CRISIS CENTER, PO BOX 73 BASTROP, TX 78602 | 74-2304542 | 509(A)(1) | 12,000. | 0. | | | P43 FAMILY VIOLENCE SHELTERS AND SERVICES |
| THE TEMPLE-CONGREGATION ADATH ISRAEL BRITH SHOLOM - ATTN: CRAIG GOLDSTEIN, 5101 U.S. HIGHWAY 42 - LOUISVILLE, KY 40241 | 61-0918772 | 509(A)(1) | 11,959. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ACLU FOUNDATION, INC. 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004-2400 | 13-6213516 | 509(A)(1) | 11,900. | 0. | | | R60 CIVIL LIBERTIES ADVOCACY |
| CENTER FOR WOMEN AND FAMILIES P.O. BOX 2048 LOUISVILLE, KY 40201 | 61-0444846 | 509(A)(1) | 11,855. | 0. | | | P43 FAMILY VIOLENCE SHELTERS AND SERVICES |
| LAKE WALES FIRST BAPTIST CHURCH 338 E. CENTRAL AVENUE LAKE WALES, FL 33853 | 59-0818915 | 509(A)(1) | 11,800. | 0. | | | X21 PROTESTANT |
| LA CASITA CENTER PO BOX 1844 LOUISVILLE, KY 40201 | 74-3178408 | 509(A)(1) | 11,745. | 0. | | | P33 CHILD DAY CARE |
| DAY SPRING, INC. 2210 MEADOW DRIVE LOUISVILLE, KY 40218 | 61-1205613 | 509(A)(2) | 11,600. | 0. | | | P33 CHILD DAY CARE |

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| TRINITY HIGH SCHOOL 4011 SHELBYVILLE ROAD LOUISVILLE, KY 40207 | 61-1256093 | RELIGIOUS ORGANI | 11,600. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| KILGORE SAMARITAN COUNSELING CENTER - PO BOX 6728 - LOUISVILLE, KY 40206 | 61-1131420 | 509(A)(2) | 11,250. | 0. | | | F60 COUNSELING SUPPORT GROUPS |
| CHANGE TODAY, CHANGE TOMORROW, INC. - 902 SOUTH 15TH STREET - LOUISVILLE, KY 40210 | 84-3715550 | 509(A)(2) | 11,250. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063-9716 | 95-1922279 | 509(A)(1) | 11,220. | 0. | | | Q30 INTERNATIONAL DEVELOPMENT RELIEF SERVICES |
| BAPTIST HEALTH FOUNDATION GREATER LOUISVILLE INC - DBA BAPTIST HEALTH FOUNDATION, 4007 KRESGE WAY - LOUISVILLE, KY 40207 | 20-0292291 | 509(A)(3) TYPE I | 11,100. | 0. | | | E11 SINGLE ORGANIZATION SUPPORT |
| CONGREGATION ADATH JESHURUN 2401 WOODBOURNE AVE. LOUISVILLE, KY 40205 | 61-0458363 | 509(A)(1) | 11,018. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| DARTMOUTH COLLEGE GIFT RECORDING OFFICE, 6066 DEVELOPMENT OFFICE - HANOVER, NH 03755 | 02-0222111 | 509(A)(1) | 11,000. | 0. | | | B42 UNDERGRADUATE COLLEGE (4-YEAR) |
| KENTUCKY RESOURCES COUNCIL INC. P.O. BOX 1070 FRANKFORT, KY 40602-1070 | 31-1042931 | 509(A)(1) | 11,000. | 0. | | | C01 ALLIANCE/ADVOCACY ORGANIZATIONS |
| REGIONAL CANCER CENTER CORPORATION ATTN: ELEA FOX, 529 S. JACKSON STRE LOUISVILLE, KY 40202 | 61-0936656 | 509(A)(1) | 11,000. | 0. | | | H11 SINGLE ORGANIZATION SUPPORT |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| MIDDLETOWN UNITED METHODIST CHURCH 11902 OLD SHELBYVILLE RD LOUISVILLE, KY 40243 | 61-6014894 | RELIGIOUS ORGANI | 11,000. | 0. | | | X21 PROTESTANT |
| ST. MARK'S MEDICAL CENTER FOUNDATION - 1 SAINT MARKS PL - LA GRANGE, TX 78945 | 74-2795943 | 509(A)(3) TYPE I | 11,000. | 0. | | | T30 PUBLIC FOUNDATIONS |
| CAMBERWELL GRIEF SANCTUARY 9850 VON ALLMEN CT STE 201 LOUISVILLE, KY 40241 | 84-3179952 | 509(A)(1) | 11,000. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| LOUISVILLE URBAN LEAGUE 1535 WEST BROADWAY LOUISVILLE, KY 40203 | 61-0444771 | 509(A)(1) | 10,800. | 0. | | | P22 URBAN LEAGUE |
| DOWN SYNDROME OF LOUISVILLE, INC. 5001 S HURSTBOURNE PARKWAY, , LOUISVILLE, KY 40291 | 61-1214126 | 509(A)(2) | 10,750. | 0. | | | G25 DOWN'S SYNDROME |
| CALVARY EPISCOPAL CHURCH 821 SOUTH 4TH STREET LOUISVILLE, KY 40203 | 61-0444666 | RELIGIOUS ORGANI | 10,550. | 0. | | | X20 CHRISTIAN |
| NATIONAL PRESBYTERIAN CHURCH 4101 NEBRASKA AVENUE NW WASHINGTON, DC 20016 | 53-0196611 | 509(A)(1) | 10,500. | 0. | | | X20 CHRISTIAN |
| LOUISVILLE METRO POLICE FOUNDATION 982 EASTERN PARKWAY BOX #5 LOUISVILLE, KY 40217 | 61-1498961 | 509(A)(1) | 10,500. | 0. | | | I01 ALLIANCE/ADVOCACY ORGANIZATIONS |
| THE MORTON CENTER INC. 1028 BARRETT AVE. LOUISVILLE, KY 40204 | 31-1068020 | 509(A)(2) | 10,400. | 0. | | | F22 ALCOHOL DRUG ABUSE (TREATMENT ONLY) |

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

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| HOLY SPIRIT CHURCH 3345 LEXINGTON RD. LOUISVILLE, KY 40206-3047 | 61-0447247 | 509(A)(1) | 10,400. | 0. | | | X22 ROMAN CATHOLIC |
| NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE US - THE WATERGATE OFFICE BUILDING, 2600 VIRGINA AVE NW STE 1100 - | 53-0210807 | 509(A)(1) | 10,300. | 0. | | | A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES |
| THE BAIL PROJECT PO BOX 102592 PASADENA, CA 91189 | 81-4985512 | 509(A)(1) | 10,200. | 0. | | | I44 PRISON ALTERNATIVES |
| IMPACT 100 LOUISVILLE 3044 BARDSTOWN ROAD #269 LOUISVILLE, KY 40205 | 84-3784887 | 509(A)(1) | 10,125. | 0. | | | T99 OTHER PHILANTHROPY VOLUNTARISM AND GRANTMAKING FOUNDATIONS N.E.C.* |
| MERCY CHEFS INC 711 WASHINGTON STREET PORTSMOUTH, VA 23704 | 20-5050449 | 509(A)(1) | 10,100. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| KENTUCKY HUMANITIES COUNCIL INC. 206 E. MAXWELL ST. LEXINGTON, KY 40508 | 31-0981031 | 509(A)(1) | 10,100. | 0. | | | A26 ARTS COUNCIL/AGENCY |
| REDFORD CENTER, INC. P.O. BOX 29144, , SAN FRANCISCO, CA 94129 | 46-4549706 | 509(A)(1) | 10,100. | 0. | | | C60 ENVIRONMENTAL EDUCATION AND OUTDOOR SURVIVAL PROGRAMS |
| BETHEL GOSPEL CENTER PO BOX 806 BETHEL, ME 04217 | 01-0346028 | 509(A)(1) | 10,000. | 0. | | | X20 CHRISTIAN |
| CENTER FOR FURNITURE CRAFTSMANSHIP 25 MILL STREET, , ROCKPORT, ME 04856 | 01-0517984 | 509(A)(2) | 10,000. | 0. | | | B99 EDUCATION N.E.C.* |

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

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| NATIONAL MATH AND SCIENCE INITIATIVE INC - PO BOX 732578 - DALLAS, TX 75373 | 11-3769438 | 509(A)(1) | 10,000. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| ALZHEIMERS DISEASE AND RELATED DISORDERS NEW YORK CITY INC. - 360 LEXINGTON AVE., 3RD FL. - NEW YORK, NY 10017 | 13-3277408 | 509(A)(1) | 10,000. | 0. | | | G83 ALZHEIMER 'S |
| LAMBDA CHI ALPHA EDUCATIONAL FOUNDATION INC - 11711 N. PENNSYLVANIA ST. - CARMEL, IN 46032 | 13-6266432 | 509(A)(1) | 10,000. | 0. | | | B83 STUDENT SORORITIES FRATERNITIES |
| PAT TILLMAN FOUNDATION 180 N. LASALLE ST., STE. 2910 CHICAGO, IL 60601 | 20-1072336 | 509(A)(1) | 10,000. | 0. | | | T30 PUBLIC FOUNDATIONS |
| GIVEWELL AKA: GIVEWELL, 1714 FRANKLIN STREET OAKLAND, CA 94612 | 20-8625442 | 509(A)(1) | 10,000. | 0. | | | T30 PUBLIC FOUNDATIONS |
| GLASSWING INTERNATIONAL USA 85 BROAD STREET, FLOOR 17 NEW YORK, NY 10004 | 26-1456470 | 509(A)(1) | 10,000. | 0. | | | P12 FUNDRAISING AND/OR FUND DISTRIBUTION |
| UNIVERSITY OF LOUISVILLE ATHLETIC ASSOCIATION INC. - ATHLETIC DEPT. SAC BLDG, 2100 S. FLOYD STREET - LOUISVILLE, KY 40208 | 31-1106941 | 509(A)(3) TYPE I | 10,000. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| CULTURE SHOCK DANCE TROUPE INC 2110 HANCOCK ST, #200, , SAN DIEGO, CA 92110 | 33-0682422 | 509(A)(2) | 10,000. | 0. | | | A62 DANCE |
| CURE SMA AKA: FAMILIES OF SMA, 925 BUSSE ROAD ELK GROVE VILLAGE, IL 60007 | 36-3320440 | 509(A)(1) | 10,000. | 0. | | | G80 SPECIFICALLY NAMED DISEASES |

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| SHELBY COUNTY PARKS AND RECREATION FOUNDATION - 717 BURKS BRANCH ROAD - SHELBYVILLE, KY 40065 | 38-3818270 | 509(A)(1) | 10,000. | 0. | | | N RECREATION SPORTS LEISURE ATHLETICS |
| AUGSBURG UNIVERSITY 2211 RIVERSIDE AVE MINNEAPOLIS, MN 55454 | 41-0694721 | 509(A)(1) | 10,000. | 0. | | | B42 UNDERGRADUATE COLLEGE (4-YEAR) |
| NORTH OLDHAM HIGH SCHOOL ATHLETIC BOOSTERS CLUB - 1815 SOUTH HIGHWAY 1793 - GOSHEN, KY 40026 | 43-2021765 | 509(A)(2) | 10,000. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| FELLOWSHIP OF CHRISTIAN ATHLETES - UNIVERSITY OF LOUISVILLE - P.O BOX 21005 - LOUISVILLE, KY 40221 | 44-0610626 | 509(A)(1) | 10,000. | 0. | | | O55 RELIGIOUS LEADERSHIP YOUTH DEVELOPMENT |
| AFRICAN WILDLIFE FOUNDATION 1100 NEW JERSEY AVE SE, SUITE 900 WASHINGTON, DC 20003 | 52-0781390 | 509(A)(1) | 10,000. | 0. | | | D30 WILDLIFE PRESERVATION/PROTECTION |
| UNIVERSITY OF VIRGINIA DARDEN SCHOOL FOUNDATION - PO BOX 7726 - CHARLOTTESVILLE, VA 22906-7726 | 54-6046419 | 509(A)(1) | 10,000. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| JEFFERSON COUNTY FARM LAND PROTECTION BOARD - PO BOX 731 - CHARLES TOWN, WV 25414 | 55-0779838 | 509(A)(1) | 10,000. | 0. | | | C34 LAND RESOURCES CONSERVATION |
| NATIONAL CHRISTIAN CHARITABLE FOUNDATION INC - CONTRIBUTION SERVICES, 11625 RAINWATER DRIVE #500 - ALPHARETTA, GA 30009 | 58-1493949 | 509(A)(1) | 10,000. | 0. | | | T30 PUBLIC FOUNDATIONS |
| ARROWMONT SCHOOL OF ARTS AND CRAFTS - PO BOX 567 - GATLINBURG, TN 37738 | 58-2007394 | 509(A)(1) | 10,000. | 0. | | | B83 STUDENT SORORITIES FRATERNITIES |

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

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| ST. VINCENT DE PAUL OUTREACH MINISTRIES - 118 E. BROADWAY - BARDSTOWN, KY 40004 | 61-0485640 | RELIGIOUS ORGANI | 10,000. | 0. | | | X22 ROMAN CATHOLIC |
| CEDAR LAKE LODGE 9505 WILLIAMSBURG PLAZA STE 200 LOUISVILLE, KY 40222 | 61-0713587 | 509(A)(2) | 10,000. | 0. | | | F33 GROUP HOME RESIDENTIAL TREATMENT FACILITY-MENTAL HEALTH RELATED |
| ST. STEPHEN BAPTIST CHURCH 1018 SOUTH 15TH ST. LOUISVILLE, KY 40210 | 61-0724114 | 509(A)(1) | 10,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| KENTUCKY COUNTRY DAY SCHOOL 4100 SPRINGDALE ROAD LOUISVILLE, KY 40241 | 61-0731998 | 509(A)(1) | 10,000. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| FAIRNESS EDUCATION FUND 2263 FRANKFORT AVENUE LOUISVILLE, KY 40206 | 61-1230383 | 509(A)(1) | 10,000. | 0. | | | B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER |
| KENTUCKY BALLET THEATRE 740 NATIONAL AVENUE STE #170 LEXINGTON, KY 40502 | 61-1329176 | 509(A)(2) | 10,000. | 0. | | | A63 BALLET |
| KENTUCKY HORSE PARK FOUNDATION 4075 IRON WORKS PARKWAY BLDG D LEXINGTON, KY 40511 | 62-1257717 | 509(A)(1) | 10,000. | 0. | | | N69 EQUESTRIAN RIDING |
| ASSOCIATION OF FORMER STUDENTS OF TEXAS A&M UNIVERSITY - 505 GEORGE BUSH DRIVE - COLLEGE STATION, TX 77840 | 74-0490865 | 509(A)(1) | 10,000. | 0. | | | B84 ALUMNI ASSOCIATIONS |
| COMBINED COMMUNITY ACTION 165 WEST AUSTIN GIDDINGS, TX 78942 | 74-1548511 | 509(A)(1) | 10,000. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |

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| CENTRAL TEXAS FOOD BANK 6500 METROPOLIS DRIVE AUSTIN, TX 78744 | 74-2217350 | 509(A)(1) | 10,000. | 0. | | | K31 FOOD BANKS FOOD PANTRIES |
| TEXAS A & M FOUNDATION 401 GEORGE BUSH DRIVE COLLEGE STATION, TX 77840 | 74-2245072 | 509(A)(1) | 10,000. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| BLINN COLLEGE FOUNDATION INC 902 COLLEGE AVE BRENHAM, TX 77833 | 74-2581806 | 509(A)(1) | 10,000. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| REFUGEE SERVICES OF TEXAS, INC. 9330 LYNDON B. JOHNSON FREEWAY STE. DALLAS, TX 75243 | 75-1618251 | 509(A)(1) | 10,000. | 0. | | | P84 ETHNIC/IMMIGRANT SERVICES |
| JEFFERSON COUNTY FOUNDATION PO BOX 460 RANSON, WV 25438 | 81-1417341 | 509(A)(2) | 10,000. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| EVOLVE502 SCHOLARS FOUNDATION INC 334 E BROADWAY LOUISVILLE, KY 40202 | 83-1897986 | 509(A)(1) | 10,000. | 0. | | | B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS |
| GLOBAL ARTS CORPORATION 405 N. AVENUE 53 LOS ANGELES, CA 90042 | 83-4028238 | 509(A)(1) | 10,000. | 0. | | | A68 MUSIC |
| CARE AND SHARE INC AKA CARE & SHARE FOOD BANK FOR SOUTHERN COLORADO, 2605 PREAMBLE PT - COLORAD | 84-0731930 | 509(A)(1) | 10,000. | 0. | | | K31 FOOD BANKS FOOD PANTRIES |
| FRIENDS OF THE LIBRARY SMITHVILLE TEXAS - 507 MAIN STREET - SMITHVILLE, TX 78957 | 85-0337384 | 509(A)(1) | 10,000. | 0. | | | B70 LIBRARIES LIBRARY SCIENCE |

Schedule I (Form 990)

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

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| ART GUILD OF FAYETTEVILLE AKA ARTS FOR RURAL TEXAS, 114 NORTH LIVE OAK STREET, - FAYETTEVILLE, TX 7894 | 86-1075343 | 509(A)(2) | 10,000. | 0. | | | A40 VISUAL ARTS ORGANIZATIONS |
| BJC FOUNDATION FOR HOSPICE 1001 HIGHLANDS PLAZA DR W STE 140 SAINT LOUIS, MO 63110 | 43-1648435 | 509(A)(1) | 9,534. | 0. | | | E11 SINGLE ORGANIZATION SUPPORT |
| EPISCOPAL CHURCH OF THE ADVENT 901 BAXTER AVE. LOUISVILLE, KY 40204 | 61-0459581 | RELIGIOUS ORGANI | 9,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| KENTUCKY HUMANE SOCIETY ATTN: LAURA ZARTMAN, 1000 LYNDON LANE SUITE B - LOUISVILLE, KY 40222 | 61-0463938 | 509(A)(2) | 9,364. | 0. | | | D20 ANIMAL PROTECTION AND WELFARE (INCLUDES HUMANE SOCIETIES AND SPCAS) |
| THE ARROW FUND INC. PO BOX 1127 PROSPECT, KY 40059 | 61-1396389 | 509(A)(1) | 9,300. | 0. | | | D20 ANIMAL PROTECTION AND WELFARE (INCLUDES HUMANE SOCIETIES AND SPCAS) |
| HOSPARUS, INC. C/O DEVELOPMENT DEPARTMENT, 6200 DUTCHMANS LANE, STE 102 - LOUISVILLE, KY 40 | 61-0921718 | 509(A)(1) | 9,200. | 0. | | | P74 HOSPICE |
| YALE UNIVERSITY CONTRIBUTION PROCESSING, P.O. BOX 2 NEW HAVEN, CT 06521-2038 | 06-0646973 | 509(A)(1) | 9,100. | 0. | | | B43 UNIVERSITY OR TECHNOLOGICAL |
| CHURCH OF THE ASCENSION 4600 LYNNBROOK DR LOUISVILLE, KY 40220 | 61-0652304 | RELIGIOUS ORGANI | 9,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| NORTHEAST CHRISTIAN CHURCH 9900 BROWNSBORO RD. LOUISVILLE, KY 40241 | 61-0941327 | 509(A)(1) | 9,000. | 0. | | | X20 CHRISTIAN |

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|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| FAMILY RENEWAL PROJECT 622 WOODLAKE DRIVE LOUISVILLE, KY 40245 | 81-4191808 | 509(A)(1) | 8,961. | 0. | | | P HUMAN SERVICES |
| KENTUCKY EDUCATIONAL TELEVISION FOUNDATION, INC. - 600 COOPER DRIVE - LEXINGTON, KY 40502 | 61-0722558 | 509(A)(1) | 8,825. | 0. | | | A32 TELEVISION |
| HOLY ANGELS ACADEMY 12201 OLD HENRY RD LOUISVILLE, KY 40223 | 61-0845326 | 509(A)(1) | 8,750. | 0. | | | B99 EDUCATION N.E.C.* |
| KIDS CANCER ALLIANCE INC. P.O. BOX 24337 LOUISVILLE, KY 40224 | 61-1256743 | 509(A)(1) | 8,750. | 0. | | | E86 PATIENT SERVICES-ENTERTAINMENT RECREATION |
| JEWISH FAMILY & CAREER SERVICES OF LOUISVILLE, INC. - P.O. BOX 32578 - LOUISVILLE, KY 40232 | 61-0444704 | 509(A)(1) | 8,500. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| CANOPY CERTIFIED INC. 1500 LYTLE STREET LOUISVILLE, KY 40203 | 83-0965241 | 509(A)(2) | 8,500. | 0. | | | S30 ECONOMIC DEVELOPMENT |
| WALNUT MEMORIAL BAPTIST CHURCH 519 W. BYERS AVENUE OWENSBORO, KY 42303 | 61-0534630 | RELIGIOUS ORGANI | 8,400. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| HILDEGARD HOUSE PO BOX 5613 LOUISVILLE, KY 40255 | 46-5555742 | 509(A)(1) | 8,300. | 0. | | | L99 OTHER HOUSING SHELTER N.E.C.* |
| ANCHAL INC. PO BOX 7392 LOUISVILLE, KY 40257 | 27-2959378 | 509(A)(1) | 8,200. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |

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|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| PASSIONISTS OF THE HOLY CROSS PROVINCE - 660 BUSSE HWY - PARK RIDGE, IL 60068 | 36-6063802 | RELIGIOUS ORGANI | 8,200. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| PARKVIEW BAPTIST CHURCH 403 HAYES RD FORT PIERCE, FL 34950 | 59-0971745 | RELIGIOUS ORGANI | 8,100. | 0. | | | X20 CHRISTIAN |
| WATERSTEP AKA: EDGE OUTREACH INC, 625 MYRTLE LOUISVILLE, KY 40208 | 61-1262016 | 509(A)(1) | 8,070. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| WAVE HILL INCORPORATED 675 W. 252ND ST. BRONX, NY 10471 | 13-6178903 | 509(A)(1) | 8,000. | 0. | | | C40 BOTANICAL HORTICULTURAL AND LANDSCAPE SERVICES |
| POLITICAL RESEARCH ASSOCIATES 1310 BROADWAY STE. 201 SOMERVILLE, MA 02144 | 36-3193323 | 509(A)(1) | 8,000. | 0. | | | V24 POLITICAL SCIENCE |
| SECOND WIND THOROUGHbred PROJECT, INC. - SECOND WIND THOROUGHbred PROJECT, 65 POST ROAD - BETHUNE, SC 29009 | 47-3445193 | 509(A)(2) | 8,000. | 0. | | | D99 ANIMAL RELATED ACTIVITIES N.E.C.* |
| LEADERSHIP INSTITUTE STEPHEN P.J. WOOD BUILDING, 1101 N. HIGHLAND ST. - ARLINGTON, VA 22201 | 51-0235174 | 509(A)(1) | 8,000. | 0. | | | B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER |
| LINCOLN FOUNDATION 4322 BISHOP LANE LOUISVILLE, KY 40218 | 61-0449631 | 509(A)(1) | 8,000. | 0. | | | B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER |
| SOS INTERNATIONAL INC. 1500 ARLINGTON AVE LOUISVILLE, KY 40206 | 27-2624272 | 509(A)(2) | 7,998. | 0. | | | Q INTERNATIONAL FOREIGN AFFAIRS AND NATIONAL SECURITY |

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| LOUISVILLE ZOO FOUNDATION, INC. 1100 TREVILIAN WAY LOUISVILLE, KY 40233-9902 | 31-0971742 | 509(A)(1) | 7,950. | 0. | | | D11 SINGLE ORGANIZATION SUPPORT |
| JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION - VANHOOSE EDUCATION CENTER, 3332 NEWBURG ROAD - LOUISVILLE, KY 40218 | 61-1021128 | 509(A)(1) | 7,850. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| METROPOLITAN HOUSING COALITION PO BOX 4533 LOUISVILLE, KY 40204 | 61-1201545 | 509(A)(1) | 7,750. | 0. | | | L01 ALLIANCE/ADVOCACY ORGANIZATIONS |
| KENDLE'S KREW INC. 6350 TAMARACK TRAIL CUMMING, GA 30040 | 84-2900007 | 509(A)(1) | 7,750. | 0. | | | G01 ALLIANCE/ADVOCACY ORGANIZATIONS |
| ST. TIMOTHY'S SCHOOL 8400 GREENSPRING AVENUE STEVENSON, MD 21153 | 52-0591488 | 509(A)(1) | 7,600. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| UNIVERSITY OF TEXAS FOUNDATION 9011 MOUNTAIN RIDGE., SUITE 150 AUSTIN, TX 78759 | 74-1587488 | 509(A)(1) | 7,600. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| NEIGHBORHOOD HOUSE 201 NORTH 25TH STREET LOUISVILLE, KY 40212 | 61-0445842 | 509(A)(1) | 7,550. | 0. | | | P28 NEIGHBORHOOD CENTER SETTLEMENT HOUSE |
| BEACON HOUSE AFTERCARE PROGRAM 963 SOUTH 2ND STREET LOUISVILLE, KY 40203 | 31-1497608 | 509(A)(2) | 7,500. | 0. | | | F22 ALCOHOL DRUG ABUSE (TREATMENT ONLY) |
| MUNSON HEALTHCARE CHARLEVOIX HOSPITAL - 14700 LAKE SHORE DRIVE - CHARLEVOIX, MI 49720-1999 | 38-1459366 | 509(A)(1) | 7,500. | 0. | | | E22 HOSPITAL (GENERAL) |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| NAPERVILLE EVANGELICAL COVENANT CHURCH - 1150 HOBSON RD. - NAPERVILLE, IL 60540 | 51-0221694 | 509(A)(1) | 7,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| HISTORIC LOCUST GROVE INC. 561 BLANKENBAKER LANE LOUISVILLE, KY 40207 | 61-1390403 | 509(A)(1) | 7,500. | 0. | | | A54 HISTORY MUSEUMS |
| OLD DOMINION CONSERVATION & EDUCATIONAL FOUNDATION - BOX 222 - ORLEAN, VA 20128 | 83-4431129 | 509(A)(2) | 7,500. | 0. | | | C34 LAND RESOURCES CONSERVATION |
| GRACE REFORMED BAPTIST CHURCH 1501 E. 26TH ST OWENSBORO, KY 42303 | 61-1156499 | RELIGIOUS ORGANI | 7,400. | 0. | | | X20 CHRISTIAN |
| FELIX E. MARTIN, JR. FOUNDATION, INC. - 325 W. MAIN STREET SUITE 1110 - LOUISVILLE, KY 40202 | 26-2193468 | 509(A)(3) TYPE I | 7,350. | 0. | | | S11 SINGLE ORGANIZATION SUPPORT |
| UOFL HEALTH - FRAZIER REHAB INSTITUTE - C/O UOFL FOUNDATION, PO BOX 772050 - CHICAGO, IL 60677 | 84-3178470 | 509(A)(1) | 7,259. | 0. | | | E22 HOSPITAL (GENERAL) |
| KIDS CENTER FOR PEDIATRIC THERAPIES - P.O. BOX 17630 - LOUISVILLE, KY 40217 | 61-0492378 | 509(A)(1) | 7,250. | 0. | | | G98 PEDIATRICS |
| NATIONAL COURT APPOINTED SPECIAL ADVOCATE ASSOCIATION - 100 W HARRISON STREET NORTH TOWER SUITE 500 - SEATTLE, WA 98119 | 91-1255818 | 509(A)(1) | 7,250. | 0. | | | R20 CIVIL RIGHTS ADVOCACY FOR SPECIFIC GROUPS |
| FIRST BAPTIST CHURCH PO BOX 904 OWENSBORO, KY 42302 | 61-0510932 | RELIGIOUS ORGANI | 7,200. | 0. | | | X20 CHRISTIAN |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| KENTUCKY HEALTH JUSTICE NETWORK PO BOX 4761 LOUISVILLE, KY 40204 | 27-1246514 | 509(A)(1) | 7,150. | 0. | | | E40 REPRODUCTIVE HEALTH CARE FACILITIES AND ALLIED SERVICES |
| CENTENARY UNITED METHODIST CHURCH 2800 TATES CREEK ROAD LEXINGTON, KY 40502 | 61-0593018 | RELIGIOUS ORGANI | 7,125. | 0. | | | X20 CHRISTIAN |
| CAMPUS CRUSADE FOR CHRIST INTERNATIONAL - ATTN: CONTRIBUTIONS, PO BOX 628222 - ORLANDO, FL 32862-8222 | 33-0863088 | 509(A)(1) | 7,000. | 0. | | | X20 CHRISTIAN |
| ACVS FOUNDATION 19785 CRYSTAL ROCK DRIVE SUITE 305 GERMANTOWN, MD 20874 | 52-1946008 | 509(A)(3) TYPE I | 7,000. | 0. | | | D ANIMAL RELATED |
| ST. FRANCIS OF ASSISI CHURCH 1960 BARDSTOWN ROAD LOUISVILLE, KY 40205 | 61-0444804 | RELIGIOUS ORGANI | 7,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ST. RAPHAEL CATHOLIC CHURCH 2141 LANCASHIRE AVE. LOUISVILLE, KY 40205 | 61-0549869 | RELIGIOUS ORGANI | 7,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| HOLY SPIRIT NEWMAN CENTER 320 ROSE LANE LEXINGTON, KY 40508 | 61-1132892 | RELIGIOUS ORGANI | 7,000. | 0. | | | X20 CHRISTIAN |
| LOUISVILLE PRESBYTERIAN THEOLOGICAL SEMINARY - 1044 ALTA VISTA ROAD - LOUISVILLE, KY 40205-1798 | 61-0444768 | 509(A)(1) | 6,950. | 0. | | | B50 GRADUATE PROFESSIONAL (SEPARATE ENTITIES) |
| WASHINGTON & LEE UNIVERSITY 204 W. WASHINGTON ST., DEVELOPMENT LEXINGTON, VA 24450 | 54-0505977 | 509(A)(1) | 6,900. | 0. | | | B42 UNDERGRADUATE COLLEGE (4-YEAR) |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|------------------------------------|
| WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989 | 54-0519590 | 509(A)(1) | 6,700. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| DIOCESE OF OWENSBORO 600 LOCUST ST OWENSBORO, KY 42301 | 61-0598513 | 509(A)(1) | 6,700. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| WKU FOUNDATION INC. 292 ALUMNI AVE., SUITE 305 BOWLING GREEN, KY 42101 | 61-1251555 | 509(A)(1) | 6,600. | 0. | | | B11 SINGLE ORGANIZATION SUPPORT |
| ST. ALBAN'S EPISCOPAL CHURCH 885 SHORE RD CAPE ELIZABETH, ME 04107 | 01-0240618 | RELIGIOUS ORGANI | 6,500. | 0. | | | X20 CHRISTIAN |
| PHILLIPS EXETER ACADEMY THE EXETER FUND OFFICE, 20 MAIN STR EXETER, NH 03833-2460 | 02-0222174 | 509(A)(1) | 6,500. | 0. | | | B25 SECONDARY/HIGH SCHOOL |
| GRAUER FOUNDATION FOR EDUCATION 1500 S EL CAMINO REAL ENCINITAS, CA 92024 | 33-0708902 | 509(A)(1) | 6,500. | 0. | | | B20 ELEMENTARY SECONDARY ED |
| ST. FRANCES OF ROME 2119 PAYNE STREET LOUISVILLE, KY 40206 | 61-0445829 | RELIGIOUS ORGANI | 6,500. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| PARTNERS IN HEALTH A NONPROFIT CORPORATION - PO BOX 996 - FREDERICK, MD 21705 | 04-3567502 | 509(A)(1) | 6,250. | 0. | | | E21 COMMUNITY HEALTH SYSTEMS |
| MATRIX HUMAN SERVICES 1400 WOODBRIDGE ST. DETROIT, MI 48207 | 38-1358015 | 509(A)(1) | 6,175. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| LITTLE WAY PREGNANCY RESOURCE CENTER INC. - 515 W. OAK ST. - LOUISVILLE, KY 40203 | 61-1055060 | 509(A)(1) | 6,150. | 0. | | | P40 FAMILY SERVICES |
| MUHLENBERG COUNTY LONG TERM DISASTER RECOVERY COMMITTEE INC - PO BOX 1025 - CENTRAL CITY, KY 42330 | 26-3683333 | 509(A)(1) | 6,100. | 0. | | | M23 SEARCH AND RESCUE SERVICES |
| SOWING SEEDS WITH FAITH C/O DA'MARRION FLEMING, P.O. BOX 16 LOUISVILLE, KY 40256 | 81-4862518 | 509(A)(2) | 6,100. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| ST. JAMES EPISCOPAL CHURCH PRESCHOOL - 156 N. MONROE ST., PO BOX 507 - LA GRANGE, TX 78945 | 20-0169354 | RELIGIOUS ORGANI | 6,000. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| PAWS WITH PURPOSE PO BOX 5458 LOUISVILLE, KY 40255 | 20-0681397 | 509(A)(1) | 6,000. | 0. | | | P86 BLIND/VISUALLY IMPAIRED CENTERS SERVICES |
| SMITHVILLE COMMUNITY GARDENS PO BOX 644 SMITHVILLE, TX 78957 | 27-3320512 | 509(A)(1) | 6,000. | 0. | | | K30 FOOD SERVICE FREE FOOD DISTRIBUTION PROGRAMS |
| SHRINER'S HOSPITAL FOR CHILDREN ATTN: PROCESSING CENTER, PO BOX 947 ATLANTA, GA 30394 | 36-2193608 | 509(A)(1) | 6,000. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| SWEET BRIAR INSTITUTE DEVELOPMENT OFFICE, PO BOX 1057 SWEET BRIAR, VA 24595 | 54-0534105 | 509(A)(1) | 6,000. | 0. | | | B42 UNDERGRADUATE COLLEGE (4-YEAR) |
| UNIVERSITY OF VIRGINIA ADVANCEMENT SERVICES, PO BOX 37963 BOONE, IA 50037 | 54-6001796 | 509(A)(1) | 6,000. | 0. | | | B EDUCATIONAL INSTITUTIONS |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--------------------------------------|
| CHARLESTON SYMPHONY ORCHESTRA P.O. BOX 30818 CHARLESTON, SC 29417 | 57-6000192 | 509(A)(2) | 6,000. | 0. | | | A69 SYMPHONY ORCHESTRAS |
| LOGGERHEAD MARINELIFE CENTER INC 14200 US HWY 1 JUNO BEACH, FL 33408 | 59-2445926 | 509(A)(1) | 6,000. | 0. | | | D31 PROTECTION OF ENDANGERED SPECIES |
| ST. STEPHEN CATHEDRAL 610 LOCUST ST. OWENSBORO, KY 42301 | 61-0598513 | 509(A)(1) | 6,000. | 0. | | | X22 ROMAN CATHOLIC |
| MENTORKIDS KENTUCKY 2815 VEACH ROAD OWENSBORO, KY 42303 | 61-1222299 | 509(A)(1) | 6,000. | 0. | | | O31 BIG BROTHER BIG SISTERS |
| STUDENT MOBILIZATION PO BOX 567 CONWAY, AR 72033 | 71-0629392 | 509(A)(1) | 6,000. | 0. | | | X21 PROTESTANT |
| CHURCH OF THE SERVANT 3835 BURTON ST SE GRAND RAPIDS, MI 49546 | 23-7410095 | 509(A)(1) | 5,900. | 0. | | | X21 PROTESTANT |
| KENTUCKY OPERA ASSOCIATION DEVELOPMENT DEPARTMENT, 708 MAGAZINE STREET - LOUISVILLE, KY 40203 | 61-6013111 | 509(A)(1) | 5,850. | 0. | | | A6A OPERA |
| BEREA COLLEGE CPO 2216 BEREA, KY 40404 | 61-0444650 | 509(A)(1) | 5,800. | 0. | | | B40 HIGHER ED INSTITUTIONS |
| KENTUCKY RACE TRACK CHAPLAINCY INC. - PO BOX 324 - SIMPSONVILLE, KY 40067 | 31-1571797 | 509(A)(1) | 5,700. | 0. | | | X20 CHRISTIAN |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|--|
| KENTUCKY REFUGEE MINISTRIES, INC. 969-B CHEROKEE ROAD LOUISVILLE, KY 40204 | 61-1229842 | 509(A)(2) | 5,600. | 0. | | | P20 HUMAN SERVICE ORGANIZATIONS |
| ST. MEINRAD ARCHABBEY DEVELOPMENT OFFICE, 200 HILL DRIVE ST. MEINRAD, IN 47577 | 35-0868161 | 509(A)(1) | 5,525. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| FURTHER STILL MINISTRIES INC PO BOX 436165 LOUISVILLE, KY 40253 | 26-0149915 | 509(A)(2) | 5,500. | 0. | | | X20 CHRISTIAN |
| FRIENDS OF AL ROWWAD USA 75 2ND AVE, SUITE 605 NEEDHAM HEIGHTS, MA 02494 | 26-3503743 | 509(A)(1) | 5,500. | 0. | | | Q30 INTERNATIONAL DEVELOPMENT RELIEF SERVICES |
| TEACH TO TRANSFORM INC. PO BOX 43233 LOUISVILLE, KY 40243 | 45-4449839 | 509(A)(1) | 5,500. | 0. | | | Q33 INTERNATIONAL RELIEF |
| AMERICAN NATIONAL RED CROSS 431 18TH ST NW WASHINGTON, DC 20006 | 53-0196605 | 509(A)(1) | 5,500. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| AMERICAN RED CROSS SOUTH CENTRAL KENTUCKY CHAPTER - 958 COLLETT AVENUE, SUITE 800 - BOWLING GREEN, KY 42101 | 53-0196605 | 509(A)(1) | 5,500. | 0. | | | M20 DISASTER PREPAREDNESS AND RELIEF SERVICE |
| THE DE PAUL SCHOOL 1925 DUKER AVENUE LOUISVILLE, KY 40205 | 61-0711082 | 509(A)(1) | 5,500. | 0. | | | B28 SPECIAL ED INSTITUTIONS/ SCHOOLS FOR VISUALLY OR HEARING IMPAIRED LEARNING |
| FIRST FREE WILL BAPTIST CHURCH 4314 W 5TH STREET RD OWENSBORO, KY 42301 | 61-0910514 | 509(A)(1) | 5,500. | 0. | | | X21 PROTESTANT |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash 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 1400 OXMOOR ROAD BIRMINGHAM, AL 35209 | 63-0302180 | RELIGIOUS ORGANI | 5,500. | 0. | | | X20 CHRISTIAN |
| CHURCH HOME & INFIRMARY EPISCOPAL CHURCH HOME - 7504 WESTPORT ROAD - LOUISVILLE, KY 40222 | 61-0461720 | 509(A)(2) | 5,350. | 0. | | | E91 NURSING CONVALESCENT (GERIATRIC AND NURSING) |
| EXPLOITED CHILDREN'S HELP ORGANIZATION - 1411 ALGONQUIN PKWY - LOUISVILLE, KY 40210 | 31-1094281 | 509(A)(1) | 5,300. | 0. | | | I72 CHILD ABUSE PREVENTION OF |
| MAYO CLINIC DEPARTMENT OF DEVELOPMENT, 200 FIRS ROCHESTER, MN 55905 | 41-6011702 | 509(A)(2) | 5,300. | 0. | | | E21 COMMUNITY HEALTH SYSTEMS |
| FAMILY & CHILDREN'S PLACE 525 ZANE ST. LOUISVILLE, KY 40203 | 61-0549561 | 509(A)(1) | 5,300. | 0. | | | P40 FAMILY SERVICES |
| KENTUCKY ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH - 7400 FLOYDSBURG ROAD, , - CRESTWOOD, KY 40014 | 61-1310926 | RELIGIOUS ORGANI | 5,300. | 0. | | | X20 CHRISTIAN |
| MUHAMMAD ALI MUSEUM AND EDUCATION CENTER INC. - 144 N SIXTH ST - LOUISVILLE, KY 40202 | 61-1323046 | 509(A)(1) | 5,300. | 0. | | | A23 CULTURAL/ETHNIC AWARENESS |
| HAZELDEN BETTY FORD FOUNDATION PO BOX 64348 SAINT PAUL, MN 55164-0348 | 41-0682405 | 509(A)(1) | 5,250. | 0. | | | F20 ALCOHOL DRUG AND SUBSTANCE ABUSE DEPENDENCY PREVENTION & TREATMENT |
| ST. LABRE INDIAN SCHOOL PO BOX 216 ASHLAND, MT 59003 | 81-0244542 | 509(A)(1) | 5,250. | 0. | | | B25 SECONDARY/HIGH SCHOOL |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| FRIENDS OF SINNERS INC 320 CLAY STREET OWENSBORO, KY 42303 | 27-0332382 | 509(A)(1) | 5,200. | 0. | | | F21 ALCOHOL DRUG ABUSE (PREVENTION ONLY) |
| CALVARY WORSHIP CENTER INC 72 ESQUIRE LN LONDON, KY 40741 | 31-0988991 | 509(A)(1) | 5,200. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| CANEEY CREEK COMMUNITY CENTER DBA ALICE LLOYD COLLEGE, 100 PURPOSE ROAD - PIPPA PASSES, KY 41844-9988 | 61-0492351 | 509(A)(2) | 5,200. | 0. | | | B EDUCATIONAL INSTITUTIONS |
| PRESBYTERIAN CHURCH OF DANVILLE 500 W. MAIN ST. DANVILLE, KY 40422 | 61-0587173 | RELIGIOUS ORGANI | 5,200. | 0. | | | X RELIGION SPIRITUAL DEVELOPMENT |
| LOUISVILLE CENTRAL COMMUNITY CENTER, INC. - 1300 W. MUHAMMAD ALI BLVD. - LOUISVILLE, KY 40203 | 61-0590743 | 509(A)(1) | 5,200. | 0. | | | P30 CHILDREN'S AND YOUTH SERVICES |
| MERCY CORPS INTERNATIONAL NATIONAL PROCESSING CENTER, PO BOX BOONE, IA 50037 | 91-1148123 | 509(A)(1) | 5,200. | 0. | | | O30 ADULT CHILD MATCHING PROGRAMS |
| WORLD CENTRAL KITCHEN INC. ATTN: DONOR SERVICES TEAM, 200 MASSACHUSETTS AVE NW, 7TH FLOOR - WASHINGTON, | 27-3521132 | 509(A)(1) | 5,150. | 0. | | | Q33 INTERNATIONAL RELIEF |
| VANDERBILT UNIVERSITY MEDICAL CENTER - VUMC GIFT AND DONOR SERVICES, 3322 WEST END AVENU SUITE 900 - NASHVILLE, TN | 35-2528741 | 509(A)(1) | 5,100. | 0. | | | E20 HOSPITALS AND PRIMARY MEDICAL CARE FACILITIES |
| GO TELL MINISTRIES INC PO BOX 2138 GEORGIA, GA 30096 | 58-2588619 | 509(A)(1) | 5,100. | 0. | | | X20 CHRISTIAN |

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|----------------------------------|---|--|---|
| HEUSER HEARING & LANGUAGE ACADEMY INC. - 111 E KENTUCKY ST. - LOUISVILLE, KY 40203 | 61-0492369 | 509(A)(1) | 5,100. | 0. | | | B28 SPECIAL ED INSTITUTIONS/ SCHOOLS FOR VISUALLY OR HEARING IMPAIRED LEARNING |
| MIRACLE LEAGUE OF LOUISVILLE 800 LILY CREEK ROAD SUITE #2 LOUISVILLE, KY 40243 | 61-1740095 | 509(A)(1) | 5,100. | 0. | | | N63 BASEBALL SOFTBALL (INCLUDES LITTLE LEAGUES) |
| DAVIDSON COLLEGE PO BOX 7170 DAVIDSON, NC 28035-7170 | 56-0529961 | 509(A)(1) | 5,050. | 0. | | | B42 UNDERGRADUATE COLLEGE (4-YEAR) |
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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 noncash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
| | | | | | |
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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:

"BY DEPOSITING THIS CHECK, YOUR ORGANIZATION CERTIFIES THAT NO INDIVIDUALS

OR ENTITIES CONNECTED WITH THE DONOR RECEIVED ANY TANGIBLE BENEFITS, GOODS,

OR OTHER SERVICES (E.G. EVENT TICKETS, MEMBERSHIP FEES, TUITION, OR ITEMS

Part IV Supplemental Information

PURCHASED AT AUCTION). YOUR ORGANIZATION ALSO CERTIFIES IT CONTINUES TO BE
PUBLICLY SUPPORTED AND EXEMPT UNDER IRS CODE SECTION 501(C)(3). AS A FORCE
FOR GOOD, THE COMMUNITY FOUNDATION OF LOUISVILLE IS PROUD TO SUPPORT THE
WORK OF YOUR ORGANIZATION. IF YOU HAVE ANY QUESTIONS REGARDING THIS GRANT,
PLEASE CONTACT US AT 502-585-4649 OR GRANTS@CFLOUISVILLE.ORG."

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

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

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 (such as 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 on line 1a?

3 Indicate which, if any, of the following the 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" on 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 nonfixed 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" on 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) 2021

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 aren't 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 and/or 1099-NEC 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) RONALD GALLO PRESIDENT & CEO | (i) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (ii) | 310,888. | 0. | 0. | 7,936. | 341. | 319,165. | 0. |
| (2) MATTHEW L. BACON VP & CFO | (i) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (ii) | 186,028. | 0. | 0. | 5,644. | 7,190. | 198,862. | 0. |
| (3) TRISHA FINNEGAN CHIEF STRATEGY OFFICER (END DATE 6/ | (i) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (ii) | 173,842. | 0. | 0. | 4,688. | 8,890. | 187,420. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

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

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 | 396 | 12,173,844. | 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 V, Donee Acknowledgement **29** 0

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

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

Schedule M (Form 990) 2021

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.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

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

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

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

EXECUTIVE VICE PRESIDENT & CFO.

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.

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

Schedule O (Form 990) 2021

132211 11-11-21

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

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.

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 ANNUALLY REVIEWS INDUSTRY SURVEY INFORMATION TO DETERMINE A FAIR AND REASONABLE

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

COMPENSATION FOR THE OFFICERS AND KEY EMPLOYEES. THE PRESIDENT'S AND OFFICERS' COMPENSATION IS THEN APPROVED BY THE COMPENSATION COMMITTEE. COMPENSATION FOR ALL EMPLOYEES IS APPROVED BY THE COMPENSATION COMMITTEE AND BOARD.

FORM 990, PART VI, SECTION C, LINE 19:
 THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART 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.

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|-------------------------|--|-------------------------------------|---|---------------------------------|--|---|----|---|---|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Section 512(b)(13) controlled entity? | |
|--|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|---|----|
| | | | | | | | | Yes | No |
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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) | | X |
| 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) | | X |
| 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 | | X |
| q Reimbursement paid by related organization(s) for expenses | | X |
| r Other transfer of cash or property to related organization(s) | | X |
| 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 VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e) Are all partners sec. 501(c)(3) orgs.? | | (f) Share of total income | (g) Share of end-of-year assets | (h) Dispropor- tionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|-------------------------|--|---|--|----|------------------------------------|--|--|----|---|---|----|--------------------------------|
| | | | | Yes | No | | | Yes | No | | Yes | No | |
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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